

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**
AMERICA FIRST ACTION, INC.

ADDRESS (number and street) **1400 Crystal Drive**
Suite 850
 Check if different than previously reported. (ACC) **Arlington VA 22202**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00637512 3. IS THIS REPORT NEW (N) OR AMENDED (A)

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

5. Covering Period / / 2020 through / / 2020

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

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

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

AMERICA FIRST ACTION, INC.

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>		18154316.68
(b) Cash on Hand at Beginning of Reporting Period.....	28922396.11	
(c) Total Receipts (from Line 19)	2404158.42	23422740.69
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	31326554.53	41577057.37
7. Total Disbursements (from Line 31).....	4252535.11	14503037.95
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	27074019.42	27074019.42
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	527569.85	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

AMERICA FIRST ACTION, INC.

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	2161294.54	22551834.78
(ii) Unitemized	242692.07	785294.84
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	2403986.61	23337129.62
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	50000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	2403986.61	23387129.62
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	39.76	1699.52
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	132.05	33911.55
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	2404158.42	23422740.69
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	2404158.42	23422740.69

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	732074.47	5234421.91
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	732074.47	5234421.91
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	3520460.64	9265263.06
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	3352.98
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	3352.98
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	4252535.11	14503037.95
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4252535.11	14503037.95

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	2403986.61	23387129.62
34. Total Contribution Refunds (from Line 28(d))	0.00	3352.98
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2403986.61	23383776.64
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	732074.47	5234421.91
37. Offsets to Operating Expenditures (from Line 15, page 3).....	39.76	1699.52
38. Net Operating Expenditures (subtract Line 37 from Line 36)	732034.71	5232722.39

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

A. ABEL, SONJA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2184 LILY DR
 City LOVELAND State CO Zip Code 80537
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 614.66

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2020
Transaction ID : SA11AI.112015
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. ABEL, SONJA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2184 LILY DR
 City LOVELAND State CO Zip Code 80537
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 714.66

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2020
Transaction ID : SA11AI.112016
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. ABEL, SONJA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2184 LILY DR
 City LOVELAND State CO Zip Code 80537
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 764.66

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 04 / 2020
Transaction ID : SA11AI.112017
 Amount of Each Receipt this Period
 50.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. ABRAMS, JERRY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15 ARTEMIS BLVD

City MERRITT ISLAND	State FL	Zip Code 32953
------------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2020

Transaction ID : SA11AI.112028

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 652 WINDSWEPT PL

City SIMI VALLEY	State CA	Zip Code 93065
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		09		2020

Transaction ID : SA11AI.112069

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 6819 FALCON PT

City DICKINSON	State TX	Zip Code 77539
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AFFOLTER CONTRACTING CO. INC.	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
206.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		27		2020

Transaction ID : SA11AI.112120

Amount of Each Receipt this Period
50.00

Memo Item

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

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

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

FOR LINE NUMBER: PAGE 8 OF 404
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ALBRANT, ANDREW, , ,

Mailing Address 6141 BELLINGHAM CT

City BURTON State MI Zip Code 48519

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2020

Transaction ID : SA11AI.112162

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 6141 BELLINGHAM CT

City BURTON State MI Zip Code 48519

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2020

Transaction ID : SA11AI.112163

Amount of Each Receipt this Period
35.00

Memo Item

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

Mailing Address 100 LYNX CIR

City DEVINE State TX Zip Code 78016

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 04 / 2020

Transaction ID : SA11AI.112172

Amount of Each Receipt this Period
100.00

Memo Item

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 OF 404
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. ALDRIDGE, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1931 MOCK RD
 City HIGH POINT State NC Zip Code 27265
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 01 / 2020
Transaction ID : SA11AI.112177
 Amount of Each Receipt this Period 100.00
 Memo Item

B. ALEXANDER, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 93 JEFFREY PINE LN
 City CARSON CITY State NV Zip Code 89705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 26 / 2020
Transaction ID : SA11AI.112184
 Amount of Each Receipt this Period 100.00
 Memo Item

C. ALLEN, BLAIR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2601 COLLEGE PKWY
 City CARSON CITY State NV Zip Code 89706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COMSTOCK VILLAGE Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 05 / 28 / 2020
Transaction ID : SA11AI.112215
 Amount of Each Receipt this Period 250.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 OF 404
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. ALLEN, ELLEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 117 MEANDERING WAY

City WEATHERFORD	State TX	Zip Code 76086
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FEC ID number of contributing federal political committee. **C**

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

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2020

Transaction ID : SA11AI.112223

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 2 GROVE ISLE DR

City MIAMI	State FL	Zip Code 33133
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PRIME NURSING CARE	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
478.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 10 / 2020

Transaction ID : SA11AI.112272

Amount of Each Receipt this Period
100.00

Memo Item

C. AMERICA FIRST POLICIES, INC.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1400 CRYSTAL DRIVE
STE 850

City ARLINGTON	State VA	Zip Code 22202
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FEC ID number of contributing federal political committee. **C**

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

Aggregate Year-to-Date ▼
393619.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2020

Transaction ID : SA11AI.116642

Amount of Each Receipt this Period
82162.00

Memo Item
IN-KIND - PAYROLL / OFFICE EXPENSES

SUBTOTAL of Receipts This Page (optional).....	82312.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 47769 MAYA ST

City FREMONT	State CA	Zip Code 94539
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
281.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2020

Transaction ID : SA11AI.112318

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 47769 MAYA ST

City FREMONT	State CA	Zip Code 94539
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FEC ID number of contributing federal political committee. **C**

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

Aggregate Year-to-Date ▼
331.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		24		2020

Transaction ID : SA11AI.112319

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 1625 W LOIS MEADOWS CT

City RIVERTON	State UT	Zip Code 84065
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FEC ID number of contributing federal political committee. **C**

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

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		14		2020

Transaction ID : SA11AI.112320

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	305.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. ANDERSON, CLAUDIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1625 W LOIS MEADOWS CT
 City RIVERTON State UT Zip Code 84065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1750.00

Date of Receipt 05 / 26 / 2020
Transaction ID : SA11AI.112321
 Amount of Each Receipt this Period 250.00
 Memo Item

B. ANDERSON, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6542 ENCLAVE DR
 City CLARKSTON State MI Zip Code 48348
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 03 / 2020
Transaction ID : SA11AI.112327
 Amount of Each Receipt this Period 100.00
 Memo Item

C. ANDERSON, JAMES, L, BG,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 219 APPLETREE LN
 City CHAPEL HILL State NC Zip Code 27517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 204.99

Date of Receipt 05 / 20 / 2020
Transaction ID : SA11AI.112338
 Amount of Each Receipt this Period 100.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

A. ANDRIALIS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 870 UNITED NATIONS PLZ
 City NEW YORK State NY Zip Code 10017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 209.98

Date of Receipt 05 / 30 / 2020
Transaction ID : SA11AI.112374
 Amount of Each Receipt this Period 4.99
 Memo Item

B. ARFLACK, NORMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1014 BITTERSWEET LN
 City FRANKFORT State KY Zip Code 40601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KY DEPT OF VETERANS AFFAIRS Occupation (for Individual) COMMISSIONER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 05 / 2020
Transaction ID : SA11AI.112450
 Amount of Each Receipt this Period 100.00
 Memo Item

C. ARKANASE, ARTHUR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 WHITE ST
 City TAUNTON State MA Zip Code 02780
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 212.00

Date of Receipt 05 / 18 / 2020
Transaction ID : SA11AI.112462
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	129.99
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 14 OF 404
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. ARNO, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 W SUMMIT AVE
 City SAN ANTONIO State TX Zip Code 78212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2020
Transaction ID : SA11AI.112487
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. ARNOLD, RODERICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 728 BROCKINGTON LN
 City FLORENCE State SC Zip Code 29501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INTERNATIONAL FIBRE RESOURCES, INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2020
Transaction ID : SA11AI.112496
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. ARREDONDO, DANNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6920 PALADORA LN
 City RIVERSIDE State CA Zip Code 92509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INDEPENDENT PUMPING GROUP INC Occupation (for Individual) SEPTIC SERVICE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 206.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2020
Transaction ID : SA11AI.112503
 Amount of Each Receipt this Period
 35.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. ARRINGTON, REBECCA, , ,

Mailing Address 1157 E APPALACHIA BAY RD

City CLEVELAND	State OK	Zip Code 74020
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

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

Transaction ID : SA11AI.112508

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 611 PRESTWICK DR

City DOTHAN	State AL	Zip Code 36305
----------------	-------------	-------------------

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

Name of Employer (for Individual) U.S. ARMY	Occupation (for Individual) OPS SPECIALIST
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

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

Transaction ID : SA11AI.112515

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 32200 N HARBOR DR

City FORT BRAGG	State CA	Zip Code 95437
--------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
414.98

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2020

Transaction ID : SA11AI.112527

Amount of Each Receipt this Period
4.99

Memo Item

SUBTOTAL of Receipts This Page (optional).....	154.99
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. AUDRAIN, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8839 HIDDEN OAKS DR
 City EDEN PRAIRIE State MN Zip Code 55344
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.99

Date of Receipt 05 / 07 / 2020
Transaction ID : SA11AI.112579
 Amount of Each Receipt this Period 25.00
 Memo Item

B. AUDRAIN, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8839 HIDDEN OAKS DR
 City EDEN PRAIRIE State MN Zip Code 55344
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.99

Date of Receipt 05 / 07 / 2020
Transaction ID : SA11AI.112580
 Amount of Each Receipt this Period 25.00
 Memo Item

C. AUL, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1195 E PALATINE
 City ARLINGTON HEIGHTS State IL Zip Code 60004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 18 / 2020
Transaction ID : SA11AI.112590
 Amount of Each Receipt this Period 100.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

A. BAHLER, WALTER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5927 S CREEKSIDE CT

City REMINGTON	State IN	Zip Code 47977
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		18		2020

Transaction ID : SA11AI.112656

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 4401 TILSON LN

City HOUSTON	State TX	Zip Code 77041
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2020

Transaction ID : SA11AI.112698

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 112 E MICHIGAN AVE

City PALATINE	State IL	Zip Code 60067
------------------	-------------	-------------------

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

Name of Employer (for Individual) NBOME	Occupation (for Individual) VP FINANCE
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		21		2020

Transaction ID : SA11AI.112718

Amount of Each Receipt this Period
50.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. BARCO, SHARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23 GOLFVIEW PL
 City ROTONDA WEST State FL Zip Code 33947
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BARCOS ACCOUNTING & TAX Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 05 / 30 / 2020
Transaction ID : SA11AI.112775
 Amount of Each Receipt this Period 75.00
 Memo Item

B. BARRETT, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 82401
 City CONYERS State GA Zip Code 30013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 421.00

Date of Receipt 05 / 14 / 2020
Transaction ID : SA11AI.112857
 Amount of Each Receipt this Period 25.00
 Memo Item

C. BARRETT, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 82401
 City CONYERS State GA Zip Code 30013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 446.00

Date of Receipt 05 / 27 / 2020
Transaction ID : SA11AI.112858
 Amount of Each Receipt this Period 25.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. BARRETT, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 82401
 City CONYERS State GA Zip Code 30013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 481.00

Date of Receipt 05 / 28 / 2020
Transaction ID : SA11AI.112859
 Amount of Each Receipt this Period 35.00
 Memo Item

B. BASSO, NICHOLAS, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 68 COACHLIGHT SQ
 City MONTROSE State NY Zip Code 10548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt 05 / 01 / 2020
Transaction ID : SA11AI.112895
 Amount of Each Receipt this Period 20.00
 Memo Item

C. BASSO, NICHOLAS, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 68 COACHLIGHT SQ
 City MONTROSE State NY Zip Code 10548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 05 / 13 / 2020
Transaction ID : SA11AI.112896
 Amount of Each Receipt this Period 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 20 OF 404
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. BASSO, NICHOLAS, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 68 COACHLIGHT SQ
 City MONTROSE State NY Zip Code 10548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt 05 / 15 / 2020
Transaction ID : SA11AI.112897
 Amount of Each Receipt this Period 10.00
 Memo Item

B. BASSO, NICHOLAS, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 68 COACHLIGHT SQ
 City MONTROSE State NY Zip Code 10548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 495.00

Date of Receipt 05 / 19 / 2020
Transaction ID : SA11AI.112898
 Amount of Each Receipt this Period 10.00
 Memo Item

C. BATRES, GERARDO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 345 CLAY ST APT C
 City FILLMORE State CA Zip Code 93015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 03 / 2020
Transaction ID : SA11AI.112912
 Amount of Each Receipt this Period 100.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 21 OF 404
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Mailing Address 4370 POINT BLVD
 APT 314

City GARLAND State TX Zip Code 75043

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

Name of Employer (for Individual) DEAN FOODS Occupation (for Individual) COST ACCOUNTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 05 / 03 / 2020
Transaction ID : SA11AI.112946

Amount of Each Receipt this Period
 100.00

Memo Item

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

Mailing Address 23710 GREEN SPRING RD

City ABINGDON State VA Zip Code 24211

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 05 / 18 / 2020
Transaction ID : SA11AI.113035

Amount of Each Receipt this Period
 25.00

Memo Item

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

Mailing Address 23710 GREEN SPRING RD

City ABINGDON State VA Zip Code 24211

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 05 / 25 / 2020
Transaction ID : SA11AI.113036

Amount of Each Receipt this Period
 25.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. BELCHER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 431 VIRGINIA AVE
 City CAMPBELL State CA Zip Code 95008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICAN RIGGING Occupation (for Individual) RIGGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2020
Transaction ID : SA11AI.113052
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. BELCHER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 431 VIRGINIA AVE
 City CAMPBELL State CA Zip Code 95008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICAN RIGGING Occupation (for Individual) RIGGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2020
Transaction ID : SA11AI.113053
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. BELCHER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 431 VIRGINIA AVE
 City CAMPBELL State CA Zip Code 95008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICAN RIGGING Occupation (for Individual) RIGGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2020
Transaction ID : SA11AI.113054
 Amount of Each Receipt this Period
 100.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. BELL, CRAIG, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1634 NATCHEZ TRACE BLVD

City ORLANDO	State FL	Zip Code 32818
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
204.48

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		09		2020

Transaction ID : SA11AI.113066

Amount of Each Receipt this Period
104.48

Memo Item

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

Mailing Address 1634 NATCHEZ TRACE BLVD

City ORLANDO	State FL	Zip Code 32818
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
304.48

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		27		2020

Transaction ID : SA11AI.113067

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 1796 INAS WAY

City TUCKER	State GA	Zip Code 30084
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		02		2020

Transaction ID : SA11AI.113070

Amount of Each Receipt this Period
495.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	699.48
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 24 OF 404
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. BELL, GLORIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1796 INAS WAY

City TUCKER	State GA	Zip Code 30084
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
520.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		06		2020

Transaction ID : SA11AI.113071

Amount of Each Receipt this Period
20.00

Memo Item

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

Mailing Address 2 GAELSONG LN

City READING	State PA	Zip Code 19610
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
291.56

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2020

Transaction ID : SA11AI.113110

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 3013 TAHITI ST NE

City ALBUQUERQUE	State NM	Zip Code 87111
---------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
761.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		02		2020

Transaction ID : SA11AI.113111

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	70.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. BENISCHEK, ELLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3013 TAHITI ST NE
 City ALBUQUERQUE State NM Zip Code 87111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 787.35

Date of Receipt 05 / 05 / 2020
Transaction ID : SA11AI.113112
 Amount of Each Receipt this Period 26.35
 Memo Item

B. BENNER, TOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3229 VIA ALMONTE
 City FALLBROOK State CA Zip Code 92028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CTC Occupation (for Individual) PROPOSAL MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 17 / 2020
Transaction ID : SA11AI.113119
 Amount of Each Receipt this Period 100.00
 Memo Item

C. BENOIT, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 325
 City OLEAN State NY Zip Code 14760
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 200.31

Date of Receipt 05 / 10 / 2020
Transaction ID : SA11AI.113142
 Amount of Each Receipt this Period 5.52
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	131.87
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 26 OF 404
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BENOIT, JUDITH, , ,

Mailing Address PO BOX 325

City OLEAN	State NY	Zip Code 14760
---------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.83

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	10	/	2020

Transaction ID : SA11AI.113143

Amount of Each Receipt this Period
5.52

Memo Item

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

Mailing Address PO BOX 325

City OLEAN	State NY	Zip Code 14760
---------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.83

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	11	/	2020

Transaction ID : SA11AI.113144

Amount of Each Receipt this Period
5.00

Memo Item

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

Mailing Address PO BOX 325

City OLEAN	State NY	Zip Code 14760
---------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
215.82

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	12	/	2020

Transaction ID : SA11AI.113145

Amount of Each Receipt this Period
4.99

Memo Item

SUBTOTAL of Receipts This Page (optional).....	15.51
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BENOIT, JUDITH, , ,

Mailing Address PO BOX 325

City OLEAN	State NY	Zip Code 14760
---------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.82

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2020

Transaction ID : SA11AI.113146

Amount of Each Receipt this Period
5.00

Memo Item

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

Mailing Address PO BOX 325

City OLEAN	State NY	Zip Code 14760
---------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.82

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2020

Transaction ID : SA11AI.113147

Amount of Each Receipt this Period
5.00

Memo Item

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

Mailing Address PO BOX 325

City OLEAN	State NY	Zip Code 14760
---------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
231.34

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2020

Transaction ID : SA11AI.113148

Amount of Each Receipt this Period
5.52

Memo Item

SUBTOTAL of Receipts This Page (optional).....	15.52
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 28 OF 404
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BENOIT, JUDITH, , ,

Mailing Address PO BOX 325

City OLEAN	State NY	Zip Code 14760
---------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
232.34

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2020

Transaction ID : SA11AI.113149

Amount of Each Receipt this Period
1.00

Memo Item

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

Mailing Address PO BOX 325

City OLEAN	State NY	Zip Code 14760
---------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
242.34

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2020

Transaction ID : SA11AI.113150

Amount of Each Receipt this Period
10.00

Memo Item

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

Mailing Address PO BOX 325

City OLEAN	State NY	Zip Code 14760
---------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
243.34

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2020

Transaction ID : SA11AI.113151

Amount of Each Receipt this Period
1.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	12.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BENOIT, JUDITH, , ,

Mailing Address PO BOX 325

City OLEAN	State NY	Zip Code 14760
---------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
244.34

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		29		2020

Transaction ID : SA11AI.113152

Amount of Each Receipt this Period

1.00

 Memo Item

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

Mailing Address PO BOX 325

City OLEAN	State NY	Zip Code 14760
---------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
249.34

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		29		2020

Transaction ID : SA11AI.113153

Amount of Each Receipt this Period

5.00

 Memo Item

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

Mailing Address PO BOX 325

City OLEAN	State NY	Zip Code 14760
---------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
254.34

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		29		2020

Transaction ID : SA11AI.113154

Amount of Each Receipt this Period

5.00

 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	11.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. BENTLEY, COLTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 367 HAROLDS BRANCH RD
F6

City PIKEVILLE	State KY	Zip Code 41501
-------------------	-------------	-------------------

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

Name of Employer (for Individual) BENTLEY CHIROPRACTIC	Occupation (for Individual) DOCTOR OF CHIROPRACTIC/OWNE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.47

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 20 / 2020

Transaction ID : SA11AI.113164

Amount of Each Receipt this Period
5.52

Memo Item

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

Mailing Address 367 HAROLDS BRANCH RD
F6

City PIKEVILLE	State KY	Zip Code 41501
-------------------	-------------	-------------------

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

Name of Employer (for Individual) BENTLEY CHIROPRACTIC	Occupation (for Individual) DOCTOR OF CHIROPRACTIC/OWNE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.99

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 20 / 2020

Transaction ID : SA11AI.113165

Amount of Each Receipt this Period
5.52

Memo Item

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

Mailing Address 367 HAROLDS BRANCH RD
F6

City PIKEVILLE	State KY	Zip Code 41501
-------------------	-------------	-------------------

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

Name of Employer (for Individual) BENTLEY CHIROPRACTIC	Occupation (for Individual) DOCTOR OF CHIROPRACTIC/OWNE
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
242.14

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2020

Transaction ID : SA11AI.113166

Amount of Each Receipt this Period
21.15

Memo Item

SUBTOTAL of Receipts This Page (optional).....	32.19
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

A. BENTLEY, COLTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 367 HAROLDS BRANCH RD
 F6
 City PIKEVILLE State KY Zip Code 41501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BENTLEY CHIROPRACTIC Occupation (for Individual) DOCTOR OF CHIROPRACTIC/OWNEF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 263.29

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2020
Transaction ID : SA11AI.113167
 Amount of Each Receipt this Period
 21.15
 Memo Item

B. BENTLEY, COLTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 367 HAROLDS BRANCH RD
 F6
 City PIKEVILLE State KY Zip Code 41501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BENTLEY CHIROPRACTIC Occupation (for Individual) DOCTOR OF CHIROPRACTIC/OWNEF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 268.29

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2020
Transaction ID : SA11AI.113168
 Amount of Each Receipt this Period
 5.00
 Memo Item

C. BENTLEY, COLTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 367 HAROLDS BRANCH RD
 F6
 City PIKEVILLE State KY Zip Code 41501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BENTLEY CHIROPRACTIC Occupation (for Individual) DOCTOR OF CHIROPRACTIC/OWNEF
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 273.29

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2020
Transaction ID : SA11AI.113169
 Amount of Each Receipt this Period
 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	31.15
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

A. BENTLEY, COLTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 367 HAROLDS BRANCH RD
 F6
 City PIKEVILLE State KY Zip Code 41501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BENTLEY CHIROPRACTIC Occupation (for Individual) DOCTOR OF CHIROPRACTIC/OWNEF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 278.29

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2020
Transaction ID : SA11AI.113170
 Amount of Each Receipt this Period
 5.00
 Memo Item

B. BENTLEY, COLTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 367 HAROLDS BRANCH RD
 F6
 City PIKEVILLE State KY Zip Code 41501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BENTLEY CHIROPRACTIC Occupation (for Individual) DOCTOR OF CHIROPRACTIC/OWNEF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 283.29

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2020
Transaction ID : SA11AI.113171
 Amount of Each Receipt this Period
 5.00
 Memo Item

C. BENTLEY, COLTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 367 HAROLDS BRANCH RD
 F6
 City PIKEVILLE State KY Zip Code 41501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BENTLEY CHIROPRACTIC Occupation (for Individual) DOCTOR OF CHIROPRACTIC/OWNEF
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 288.29

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2020
Transaction ID : SA11AI.113172
 Amount of Each Receipt this Period
 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	15.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. BENTLEY, COLTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 367 HAROLDS BRANCH RD
F6

City PIKEVILLE	State KY	Zip Code 41501
-------------------	-------------	-------------------

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

Name of Employer (for Individual) BENTLEY CHIROPRACTIC	Occupation (for Individual) DOCTOR OF CHIROPRACTIC/OWNEF
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
293.29

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2020

Transaction ID : SA11AI.113173

Amount of Each Receipt this Period
5.00

Memo Item

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

Mailing Address 367 HAROLDS BRANCH RD
F6

City PIKEVILLE	State KY	Zip Code 41501
-------------------	-------------	-------------------

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

Name of Employer (for Individual) BENTLEY CHIROPRACTIC	Occupation (for Individual) DOCTOR OF CHIROPRACTIC/OWNEF
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
309.23

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2020

Transaction ID : SA11AI.113174

Amount of Each Receipt this Period
15.94

Memo Item

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

Mailing Address 367 HAROLDS BRANCH RD
F6

City PIKEVILLE	State KY	Zip Code 41501
-------------------	-------------	-------------------

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

Name of Employer (for Individual) BENTLEY CHIROPRACTIC	Occupation (for Individual) DOCTOR OF CHIROPRACTIC/OWNEF
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
325.17

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2020

Transaction ID : SA11AI.113175

Amount of Each Receipt this Period
15.94

Memo Item

SUBTOTAL of Receipts This Page (optional).....	36.88
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. BERRY, SHARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3115 CLUB DR
 City BIRMINGHAM State AL Zip Code 35226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 203.18

Date of Receipt 05 / 29 / 2020
Transaction ID : SA11AI.113254
 Amount of Each Receipt this Period 20.00
 Memo Item

B. BERRY, SHARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3115 CLUB DR
 City BIRMINGHAM State AL Zip Code 35226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 223.18

Date of Receipt 05 / 29 / 2020
Transaction ID : SA11AI.113255
 Amount of Each Receipt this Period 20.00
 Memo Item

C. BERTAS, MARY KAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1329 HILLSIDE CIR
 City CHASKA State MN Zip Code 55318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 302.70

Date of Receipt 05 / 25 / 2020
Transaction ID : SA11AI.113266
 Amount of Each Receipt this Period 151.35
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	191.35
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. BERTOLOTTI, EUNICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1283 ESTATE DR
 City LOS ALTOS State CA Zip Code 94024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 26 / 2020
Transaction ID : SA11AI.113268
 Amount of Each Receipt this Period 100.00
 Memo Item

B. BERTRAM, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 MAGNOLIA GLEN
 City CENTERVILLE State GA Zip Code 31028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AAA SUPPLY INC. Occupation (for Individual) POOL BUILDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 18 / 2020
Transaction ID : SA11AI.113271
 Amount of Each Receipt this Period 50.00
 Memo Item

C. BEYER, STEVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2209 VERSAILLES CT
 City HENDERSON State NV Zip Code 89074
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STEVE BEYER PRODUCTIONS Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 27 / 2020
Transaction ID : SA11AI.113296
 Amount of Each Receipt this Period 100.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. BIDDLE, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4739 SQUIRREL NEST LN
 City MINT HILL State NC Zip Code 28227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 23 / 2020
Transaction ID : SA11AI.113300
 Amount of Each Receipt this Period 35.00
 Memo Item

B. BIZZARRO, GRACE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2630 WEBBER ST
 City SARASOTA State FL Zip Code 34239
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 05 / 08 / 2020
Transaction ID : SA11AI.113354
 Amount of Each Receipt this Period 100.00
 Memo Item

C. BIZZOZERO, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 113 DEL MESA DR
 City CARMEL State CA Zip Code 93923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt 05 / 29 / 2020
Transaction ID : SA11AI.113355
 Amount of Each Receipt this Period 50.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. BLANCHFIELD, ROGER, , ,			Date of Receipt MM / DD / YYYY 05 / 03 / 2020
Mailing Address 767 110TH ST			Transaction ID : SA11AI.113400
City CHURDAN	State IA	Zip Code 50050	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) SELF-EMPLOYED		Occupation (for Individual) FARMER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 370.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. BLANCHFIELD, ROGER, , ,			Date of Receipt MM / DD / YYYY 05 / 04 / 2020
Mailing Address 767 110TH ST			Transaction ID : SA11AI.113401
City CHURDAN	State IA	Zip Code 50050	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) SELF-EMPLOYED		Occupation (for Individual) FARMER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. BLANCHFIELD, ROGER, , ,			Date of Receipt MM / DD / YYYY 05 / 16 / 2020
Mailing Address 767 110TH ST			Transaction ID : SA11AI.113402
City CHURDAN	State IA	Zip Code 50050	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) SELF-EMPLOYED		Occupation (for Individual) FARMER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 400.00		

SUBTOTAL of Receipts This Page (optional).....▶	55.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. BLANCHFIELD, ROGER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 767 110TH ST

City CHURDAN	State IA	Zip Code 50050
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2020

Transaction ID : SA11AI.113403

Amount of Each Receipt this Period
20.00

Memo Item

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

Mailing Address 767 110TH ST

City CHURDAN	State IA	Zip Code 50050
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
465.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		21		2020

Transaction ID : SA11AI.113404

Amount of Each Receipt this Period
45.00

Memo Item

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

Mailing Address 502 WASHINGTON ST

City WELLESLEY	State MA	Zip Code 02482
-------------------	-------------	-------------------

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

Name of Employer (for Individual) ARCHDIOCESE OF BOSTON	Occupation (for Individual) CATHOLIC PRIEST
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		16		2020

Transaction ID : SA11AI.113408

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	565.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. BLANKENSHIP, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 E 21ST ST

City BAYONNE	State NJ	Zip Code 07002
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2020

Transaction ID : SA11AI.113411

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 50 E 21ST ST

City BAYONNE	State NJ	Zip Code 07002
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		18		2020

Transaction ID : SA11AI.113412

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 17109 NE 183RD PL

City WOODINVILLE	State WA	Zip Code 98072
---------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
521.46

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		16		2020

Transaction ID : SA11AI.113479

Amount of Each Receipt this Period
260.73

Memo Item

SUBTOTAL of Receipts This Page (optional).....	360.73
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. BOLE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7581 CHELSEA LN
 City GATES MILLS State OH Zip Code 44040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 404.48

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2020
Transaction ID : SA11AI.113480
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. BOLE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7581 CHELSEA LN
 City GATES MILLS State OH Zip Code 44040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.48

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2020
Transaction ID : SA11AI.113481
 Amount of Each Receipt this Period
 1.00
 Memo Item

C. BOLE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7581 CHELSEA LN
 City GATES MILLS State OH Zip Code 44040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 605.48

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2020
Transaction ID : SA11AI.113482
 Amount of Each Receipt this Period
 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	301.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. BOLE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7581 CHELSEA LN
 City GATES MILLS State OH Zip Code 44040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 709.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2020
Transaction ID : SA11AI.113483
 Amount of Each Receipt this Period
 104.48
 Memo Item

B. BOLE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7581 CHELSEA LN
 City GATES MILLS State OH Zip Code 44040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 809.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2020
Transaction ID : SA11AI.113484
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. BOLT, LELAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5155 CANTERBURY DR
 City SAN DIEGO State CA Zip Code 92116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2020
Transaction ID : SA11AI.113497
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	304.48
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 43 OF 404
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. BOLT, LELAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5155 CANTERBURY DR
 City SAN DIEGO State CA Zip Code 92116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2020
Transaction ID : SA11AI.113498
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. BOLTON, VICKI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 LANDING DR
 City AIKEN State SC Zip Code 29801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.46

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2020
Transaction ID : SA11AI.113504
 Amount of Each Receipt this Period
 20.00
 Memo Item

C. BOLTON, VICKI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 LANDING DR
 City AIKEN State SC Zip Code 29801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.46

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2020
Transaction ID : SA11AI.113505
 Amount of Each Receipt this Period
 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	275.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

A. BOLTON, VICKI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 LANDING DR
 City AIKEN State SC Zip Code 29801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.98

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2020
Transaction ID : SA11AI.113506
 Amount of Each Receipt this Period
 5.52
 Memo Item

B. BOLTON, VICKI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 LANDING DR
 City AIKEN State SC Zip Code 29801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 231.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2020
Transaction ID : SA11AI.113507
 Amount of Each Receipt this Period
 5.52
 Memo Item

C. BONETTO, MARTA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 AVALON CV
 City LAGUNA NIGUEL State CA Zip Code 92677
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 221.52

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2020
Transaction ID : SA11AI.113516
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	36.04
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

A. BONNET, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11300 NORTH CENTRAL EXPRESSWAY#100
 City DALLAS State TX Zip Code 75243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EMS Occupation (for Individual) INSURANCE SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 09 / 2020
Transaction ID : SA11AI.113531
 Amount of Each Receipt this Period 25.00
 Memo Item

B. BONNET, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11300 NORTH CENTRAL EXPRESSWAY#100
 City DALLAS State TX Zip Code 75243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EMS Occupation (for Individual) INSURANCE SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 25 / 2020
Transaction ID : SA11AI.113532
 Amount of Each Receipt this Period 25.00
 Memo Item

C. BOULDEN, MIMI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4698 SE WATERFORD DR
 City STUART State FL Zip Code 34997
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 01 / 2020
Transaction ID : SA11AI.113580
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

A. BOYD, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13 FIELDSTONE RD.
 City ELKTON State MD Zip Code 21921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 05 / 21 / 2020
Transaction ID : SA11AI.113637
 Amount of Each Receipt this Period 20.00
 Memo Item

B. BOYLE, PHILLIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 TOWN PLZ 307
 City DURANGO State CO Zip Code 81301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADVANCE FIRE SYSTEMS, INC Occupation (for Individual) SELF-EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 313.44

Date of Receipt 05 / 26 / 2020
Transaction ID : SA11AI.113653
 Amount of Each Receipt this Period 104.48
 Memo Item

C. BOYLE, PHILLIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 TOWN PLZ 307
 City DURANGO State CO Zip Code 81301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADVANCE FIRE SYSTEMS, INC Occupation (for Individual) SELF-EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 417.92

Date of Receipt 05 / 26 / 2020
Transaction ID : SA11AI.113654
 Amount of Each Receipt this Period 104.48
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	228.96
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 47 OF 404
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. BRADLEY, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 204 LARKIN LN
 City WALLINGFORD State PA Zip Code 19086
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2474.48

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 03 / 2020
Transaction ID : SA11AI.113684
 Amount of Each Receipt this Period
 104.48
 Memo Item

B. BRADLEY, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 204 LARKIN LN
 City WALLINGFORD State PA Zip Code 19086
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2578.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 03 / 2020
Transaction ID : SA11AI.113685
 Amount of Each Receipt this Period
 104.48
 Memo Item

C. BRADLEY, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 204 LARKIN LN
 City WALLINGFORD State PA Zip Code 19086
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2678.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2020
Transaction ID : SA11AI.113686
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	308.96
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 48 OF 404
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. BRADLEY, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 204 LARKIN LN
 City WALLINGFORD State PA Zip Code 19086
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2778.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2020
Transaction ID : SA11AI.113687
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. BRADLEY, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 204 LARKIN LN
 City WALLINGFORD State PA Zip Code 19086
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2878.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2020
Transaction ID : SA11AI.113688
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. BRADLEY, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 204 LARKIN LN
 City WALLINGFORD State PA Zip Code 19086
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2978.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2020
Transaction ID : SA11AI.113689
 Amount of Each Receipt this Period
 100.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. BRADLEY, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 204 LARKIN LN
 City WALLINGFORD State PA Zip Code 19086
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3013.96

Date of Receipt 05 / 18 / 2020
Transaction ID : SA11AI.113690
 Amount of Each Receipt this Period 35.00
 Memo Item

B. BRADLEY, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 204 LARKIN LN
 City WALLINGFORD State PA Zip Code 19086
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3113.96

Date of Receipt 05 / 21 / 2020
Transaction ID : SA11AI.113691
 Amount of Each Receipt this Period 100.00
 Memo Item

C. BRADLEY, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 204 LARKIN LN
 City WALLINGFORD State PA Zip Code 19086
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3213.96

Date of Receipt 05 / 31 / 2020
Transaction ID : SA11AI.113692
 Amount of Each Receipt this Period 100.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. BRENNAN, BERNARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 133 SPENCER DR
 City AMHERST State MA Zip Code 01004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 21 / 2020
Transaction ID : SA11AI.113792
 Amount of Each Receipt this Period 100.00
 Memo Item

B. BRESNIK, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2224 24TH ST
 City SANTA MONICA State CA Zip Code 90405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 22 / 2020
Transaction ID : SA11AI.113800
 Amount of Each Receipt this Period 50.00
 Memo Item

C. BREWER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10401 VINYARD BLVD APT 153
 City OKLAHOMA CITY State OK Zip Code 73120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 05 / 25 / 2020
Transaction ID : SA11AI.113814
 Amount of Each Receipt this Period 120.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. BRIDGES, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 275 FARENHOLT AVE
 STE G
 City BARRIGADA State GU Zip Code 96913
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BJ PET Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.98

Date of Receipt 05 / 23 / 2020
Transaction ID : SA11AI.113822
 Amount of Each Receipt this Period 4.99
 Memo Item

B. BRIDGES, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 275 FARENHOLT AVE
 STE G
 City BARRIGADA State GU Zip Code 96913
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BJ PET Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.98

Date of Receipt 05 / 23 / 2020
Transaction ID : SA11AI.113823
 Amount of Each Receipt this Period 5.00
 Memo Item

C. BRIGHT, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 528 EAST DUNCAN AVE
 City ALEXANDRIA State VA Zip Code 22301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 05 / 04 / 2020
Transaction ID : SA11AI.113829
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	59.99
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. BRIGHT, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 528 EAST DUNCAN AVE
 City ALEXANDRIA State VA Zip Code 22301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2020
Transaction ID : SA11AI.113830
 Amount of Each Receipt this Period 5.00
 Memo Item

B. BRIGHT, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 528 EAST DUNCAN AVE
 City ALEXANDRIA State VA Zip Code 22301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2020
Transaction ID : SA11AI.113831
 Amount of Each Receipt this Period 25.00
 Memo Item

C. BROOKS, GAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 505 E LAKE DR
 City TAYLOR State TX Zip Code 76574
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2020
Transaction ID : SA11AI.113872
 Amount of Each Receipt this Period 35.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. BROUDO, GABE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7430 GRANVILLE DR
 City TAMARAC State FL Zip Code 33321
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 202.00

Date of Receipt 05 / 11 / 2020
Transaction ID : SA11AI.113898
 Amount of Each Receipt this Period 101.00
 Memo Item

B. BROWN, CINDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2212 MANORDALE DR
 City EXPORT State PA Zip Code 15632
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE GOVERNMENT Occupation (for Individual) FINANCIAL CLERK
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 209.60

Date of Receipt 05 / 19 / 2020
Transaction ID : SA11AI.113925
 Amount of Each Receipt this Period 52.40
 Memo Item

C. BROWN, CINDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2212 MANORDALE DR
 City EXPORT State PA Zip Code 15632
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATE GOVERNMENT Occupation (for Individual) FINANCIAL CLERK
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 259.60

Date of Receipt 05 / 28 / 2020
Transaction ID : SA11AI.113926
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	203.40
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. BRUNNER, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 70 BLACKHAWK DR
 City PARK FOREST State IL Zip Code 60466
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 03 / 2020
Transaction ID : SA11AI.114013
 Amount of Each Receipt this Period 35.00
 Memo Item

B. BRUNNER, FRANK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 70 BLACKHAWK DR
 City PARK FOREST State IL Zip Code 60466
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 05 / 29 / 2020
Transaction ID : SA11AI.114014
 Amount of Each Receipt this Period 35.00
 Memo Item

C. BULLOCK, PAMELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1304 HAMILTON AVE
 City TYRONE State PA Zip Code 16686
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 219.98

Date of Receipt 05 / 23 / 2020
Transaction ID : SA11AI.114094
 Amount of Each Receipt this Period 50.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 55 OF 404
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. BULMAN, BARTON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11599 GOLDENROD RD

City CALEDONIA	State MN	Zip Code 55921
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2020

Transaction ID : SA11AI.114097

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 6335 SUNBRIAR DRIVE

City CUMMING	State GA	Zip Code 30040
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		18		2020

Transaction ID : SA11AI.114107

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 21805 TEGLEY

City MISSION VIEJO	State CA	Zip Code 92692
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) THE BURGESS ENGINEERING GROUP	Occupation (for Individual) CONSULTING ENGINEER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		16		2020

Transaction ID : SA11AI.114123

Amount of Each Receipt this Period
50.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

A. BURTON, LOIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1628 S ALICIA
 City MESA State AZ Zip Code 85209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 25 / 2020
Transaction ID : SA11AI.114184
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. BUSSA, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15151 FORD RD APT 114
 City DEARBORN State MI Zip Code 48126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2020
Transaction ID : SA11AI.114204
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. BUSSA, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15151 FORD RD APT 114
 City DEARBORN State MI Zip Code 48126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 20 / 2020
Transaction ID : SA11AI.114205
 Amount of Each Receipt this Period
 35.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 4065 TANGELO AVE

City COCOA	State FL	Zip Code 32926
---------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		29		2020

Transaction ID : SA11AI.114207

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 4065 TANGELO AVE

City COCOA	State FL	Zip Code 32926
---------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		29		2020

Transaction ID : SA11AI.114208

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 11569 HEATHERWOOD CT

City SHELBY CHARTER TOWNSHIP	State MI	Zip Code 48315
---------------------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
227.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		23		2020

Transaction ID : SA11AI.114219

Amount of Each Receipt this Period
60.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	560.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 58 OF 404
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. BUTLER, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7031 BOYCE DR
 City BATON ROUGE State LA Zip Code 70809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.73

Date of Receipt 05 / 14 / 2020
Transaction ID : SA11AI.114221
 Amount of Each Receipt this Period 260.73
 Memo Item

B. BYRNES, TIM, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 696 SLATER DR
 City FAIRBANKS State AK Zip Code 99701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KINROSS INC. Occupation (for Individual) TRUCK DRIVER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 05 / 22 / 2020
Transaction ID : SA11AI.114259
 Amount of Each Receipt this Period 50.00
 Memo Item

C. CALDERON, ERNESTINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 146 ROCK HILL CHURCH RD
 City STAFFORD State VA Zip Code 22556
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DON Occupation (for Individual) LOG MGMT SPECIALIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 29 / 2020
Transaction ID : SA11AI.114286
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	410.73
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 59 OF 404
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. CAMP, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1615 HANDY RD
 City NEWNAN State GA Zip Code 30263
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 05 / 2020
Transaction ID : SA11AI.114323
 Amount of Each Receipt this Period 100.00
 Memo Item

B. CAMPBELL, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3861 BOCA BAY DRIVE
 City DALLAS State TX Zip Code 75244
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TEXAS INSTRUMENTS Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 11 / 2020
Transaction ID : SA11AI.114334
 Amount of Each Receipt this Period 50.00
 Memo Item

C. CANN, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1811 OCEAN PKWY #3J
 City BROOKLYN State NY Zip Code 11223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAIMONIDES MEDICAL CENTER Occupation (for Individual) PHARMACIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 202.00

Date of Receipt 05 / 06 / 2020
Transaction ID : SA11AI.114347
 Amount of Each Receipt this Period 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 155.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. CANN, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1811 OCEAN PKWY #3J
 City BROOKLYN State NY Zip Code 11223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAIMONIDES MEDICAL CENTER Occupation (for Individual) PHARMACIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.00

Date of Receipt 05 / 26 / 2020
Transaction ID : SA11AI.114348
 Amount of Each Receipt this Period 50.00
 Memo Item

B. CARIDAD, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 368 SPEYSIDE LN
 City APOPKA State FL Zip Code 32712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 05 / 20 / 2020
Transaction ID : SA11AI.114416
 Amount of Each Receipt this Period 50.00
 Memo Item

C. CARL, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 622 GRAND ISLAND DR
 City LAKE HAVASU CITY State AZ Zip Code 86403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 07 / 2020
Transaction ID : SA11AI.114421
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	305.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. CARLSON, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 960 CAPE MARCO DR #904
 City MARCO ISLAND State FL Zip Code 34145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 26 / 2020
Transaction ID : SA11AI.114426
 Amount of Each Receipt this Period 100.00
 Memo Item

B. CARRUTHERS, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2649 EARLY LIGHT DR
 City LAS VEGAS State NV Zip Code 89142
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 07 / 2020
Transaction ID : SA11AI.114477
 Amount of Each Receipt this Period 50.00
 Memo Item

C. CHERNYAK, MARINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35935 KING EDWARD DR
 City FARMINGTON HILLS State MI Zip Code 48331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) 1001SHOPS.COM Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 16 / 2020
Transaction ID : SA11AI.114701
 Amount of Each Receipt this Period 100.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 62 OF 404
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. CHIAVAROLI, JOYCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15353 BURBANK DR #6

City BROOKSVILLE State FL Zip Code 34604

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 462.00

Date of Receipt 05 / 13 / 2020
Transaction ID : SA11AI.114710

Amount of Each Receipt this Period 50.00

Memo Item

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

Mailing Address 15353 BURBANK DR #6

City BROOKSVILLE State FL Zip Code 34604

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 487.00

Date of Receipt 05 / 15 / 2020
Transaction ID : SA11AI.114711

Amount of Each Receipt this Period 25.00

Memo Item

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

Mailing Address 7515 REESE RD

City SACRAMENTO State CA Zip Code 95828

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

Name of Employer (for Individual) SPANDA INDUSTRIAL DEVELOPMENT INC. Occupation (for Individual) INDUSTRIAL GENERAL BUILDING CO

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 14 / 2020
Transaction ID : SA11AI.114755

Amount of Each Receipt this Period 500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 575.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 63 OF 404
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. CHRISTOFERSON, OWEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 79 NOTTINGHAM TER
 City BUFFALO State NY Zip Code 14216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 05 / 25 / 2020
Transaction ID : SA11AI.114758
 Amount of Each Receipt this Period 500.00
 Memo Item

B. CLARK, CONNIE, Y, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 29213 SEMINOLE RD
 City TOLLHOUSE State CA Zip Code 93667-9715
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 07 / 2020
Transaction ID : SA11AI.114807
 Amount of Each Receipt this Period 50.00
 Memo Item

C. CLARK, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 517 E MAIN ST
 City LAKE CITY State SC Zip Code 29560
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 05 / 11 / 2020
Transaction ID : SA11AI.114817
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	575.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. CLARK, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 517 E MAIN ST
 City LAKE CITY State SC Zip Code 29560
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2020
Transaction ID : SA11AI.114818
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. CLARK, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 517 E MAIN ST
 City LAKE CITY State SC Zip Code 29560
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2020
Transaction ID : SA11AI.114819
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. CLAYBAUGH, WILLIAM, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 56641 858TH RD
 City CARROLL State NE Zip Code 68723
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TWJ FARMS Occupation (for Individual) FARMER/RANCHER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 208.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2020
Transaction ID : SA11AI.114851
 Amount of Each Receipt this Period
 104.48
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	164.48
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. CLAYBURN, TERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1808 NORTH HIGH AVE
 City FAYETTEVILLE State AR Zip Code 72704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CLAYBURN HVAC Occupation (for Individual) TECH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt 05 / 01 / 2020
Transaction ID : SA11AI.114852
 Amount of Each Receipt this Period 100.00
 Memo Item

B. COATES, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7370 SW GRIDLEY RD
 City STEWARTSVILLE State MO Zip Code 64490
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 29 / 2020
Transaction ID : SA11AI.114907
 Amount of Each Receipt this Period 100.00
 Memo Item

C. COATNEY, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 130 CYPRESS POINT COURT
 City APTOS State CA Zip Code 95003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 05 / 12 / 2020
Transaction ID : SA11AI.114908
 Amount of Each Receipt this Period 100.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. COLE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2523 E 2830 S

City SAINT GEORGE	State UT	Zip Code 84790
----------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
258.46

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2020

Transaction ID : SA11AI.114958

Amount of Each Receipt this Period
50.00

Memo Item

B. COLE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2523 E 2830 S

City SAINT GEORGE	State UT	Zip Code 84790
----------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
308.46

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2020

Transaction ID : SA11AI.114959

Amount of Each Receipt this Period
50.00

Memo Item

C. COLE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2523 E 2830 S

City SAINT GEORGE	State UT	Zip Code 84790
----------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
328.46

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2020

Transaction ID : SA11AI.114960

Amount of Each Receipt this Period
20.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 67 OF 404
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. COLE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2523 E 2830 S

City SAINT GEORGE	State UT	Zip Code 84790
----------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
339.19

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 20 / 2020

Transaction ID : SA11AI.114961

Amount of Each Receipt this Period
10.73

Memo Item

B. COLE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2523 E 2830 S

City SAINT GEORGE	State UT	Zip Code 84790
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
349.92

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 20 / 2020

Transaction ID : SA11AI.114962

Amount of Each Receipt this Period
10.73

Memo Item

C. COLE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2523 E 2830 S

City SAINT GEORGE	State UT	Zip Code 84790
----------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
359.92

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2020

Transaction ID : SA11AI.114963

Amount of Each Receipt this Period
10.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	31.46
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 68 OF 404
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. CONNOLLY, CYNTHIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7998 W 111TH AVE
 City WESTMINSTER State CO Zip Code 80021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONNOLLY'S TOWING, INC. Occupation (for Individual) ACCOUNTING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt 05 / 20 / 2020
Transaction ID : SA11AI.115024
 Amount of Each Receipt this Period 100.00
 Memo Item

B. CONSTANTINE, PAUL, , , SR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 49 ST GEORGE PL
 City PALM BEACH GARDENS State FL Zip Code 33418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 30 / 2020
Transaction ID : SA11AI.115035
 Amount of Each Receipt this Period 500.00
 Memo Item

C. CONWAY, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 932 HARVARD RD
 City MONROEVILLE State PA Zip Code 15146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 18 / 2020
Transaction ID : SA11AI.115046
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. COOLEY, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 444 N HORNE
 City MESA State AZ Zip Code 85203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) PLUMBER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 23 / 2020
Transaction ID : SA11AI.115062
 Amount of Each Receipt this Period 45.00
 Memo Item

B. COONEY, ROSEANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 113 VALLEYVIEW CIRCLE
 City PHOENIXVILLE State PA Zip Code 19460
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COONEY PROVISIONS Occupation (for Individual) OFFICE MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 29 / 2020
Transaction ID : SA11AI.115063
 Amount of Each Receipt this Period 100.00
 Memo Item

C. COOP, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1506 N TENNESSEE BLVD
 City MURFREESBORO State TN Zip Code 37130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 16 / 2020
Transaction ID : SA11AI.115064
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	245.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. CORNELL, JEANIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 209 CONGRESS AVE
 35 H
 City AUSTIN State TX Zip Code 78701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2020
Transaction ID : SA11AI.115096
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. CORNWELL, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 359 LEMOINE LN
 City MOREAUVILLE State LA Zip Code 71355
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) FABRICATION AND WELDING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 228.94

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2020
Transaction ID : SA11AI.115103
 Amount of Each Receipt this Period
 104.48
 Memo Item

C. CORNWELL, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 359 LEMOINE LN
 City MOREAUVILLE State LA Zip Code 71355
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) FABRICATION AND WELDING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 333.42

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2020
Transaction ID : SA11AI.115104
 Amount of Each Receipt this Period
 104.48
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	458.96
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. CORNWELL, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 359 LEMOINE LN
 City MOREAUVILLE State LA Zip Code 71355
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) FABRICATION AND WELDING
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 437.90

Date of Receipt 05 / 22 / 2020
Transaction ID : SA11AI.115105
 Amount of Each Receipt this Period 104.48
 Memo Item

B. COWART, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2817 TURNBERRY DR #515
 City ARLINGTON State TX Zip Code 76006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 209.98

Date of Receipt 05 / 13 / 2020
Transaction ID : SA11AI.115152
 Amount of Each Receipt this Period 4.99
 Memo Item

C. CRAIG, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 118 HUMP RD
 City HAGERSTOWN State MD Zip Code 21740
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CPI Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 304.98

Date of Receipt 05 / 28 / 2020
Transaction ID : SA11AI.115182
 Amount of Each Receipt this Period 4.99
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... 114.46
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. CRAIG, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 118 HUMP RD
 City HAGERSTOWN State MD Zip Code 21740
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 CPI PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 449.98

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2020
Transaction ID : SA11AI.115183
 Amount of Each Receipt this Period
 145.00
 Memo Item

B. CRAIN, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2609 PICKWICK LN
 City PLANO State TX Zip Code 75093
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 TSC AVIATION PRESIDENT/CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 04 / 2020
Transaction ID : SA11AI.115189
 Amount of Each Receipt this Period
 75.00
 Memo Item

C. CRIM, JOHN, T, , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1250
 City KILGORE State TX Zip Code 75663
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 RETIRED RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2020
Transaction ID : SA11AI.115225
 Amount of Each Receipt this Period
 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1220.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. CRNICH, PHYLLIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15055 RIDGEWOOD DR
 City OAK FOREST State IL Zip Code 60452
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 05 / 27 / 2020
Transaction ID : SA11AI.115234
 Amount of Each Receipt this Period 35.00
 Memo Item

B. CROUCH, BILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 161866
 City AUSTIN State TX Zip Code 78716
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 05 / 21 / 2020
Transaction ID : SA11AI.115253
 Amount of Each Receipt this Period 100.00
 Memo Item

C. CVITANOVICH, SARAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2418 S SHORE DR
 City BILOXI State MS Zip Code 39532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 201.15

Date of Receipt 05 / 10 / 2020
Transaction ID : SA11AI.115338
 Amount of Each Receipt this Period 26.35
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	161.35
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. DALEO, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 994 N HARWOOD ST
 City ORANGE State CA Zip Code 92867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DALEO ENTERPRISES Occupation (for Individual) PROPERTY MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 18 / 2020
Transaction ID : SA11AI.115378
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. DANIELS, JAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1375 OPAL VALLEY ST
 City HENDERSON State NV Zip Code 89052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 203.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2020
Transaction ID : SA11AI.115411
 Amount of Each Receipt this Period
 4.99
 Memo Item

C. DANIELS, JAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1375 OPAL VALLEY ST
 City HENDERSON State NV Zip Code 89052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 253.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2020
Transaction ID : SA11AI.115412
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	154.99
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. DAUGHERTY, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15802 WINTERBERRY CT
 City HUNTERTOWN State IN Zip Code 46748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 27 / 2020
Transaction ID : SA11AI.115445
 Amount of Each Receipt this Period 100.00
 Memo Item

B. DAVIS, DAVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 GRAND AVE PKWY
 City PFLUGERVILLE State TX Zip Code 78660
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 778.68

Date of Receipt 05 / 16 / 2020
Transaction ID : SA11AI.115479
 Amount of Each Receipt this Period 4.99
 Memo Item

C. DAVIS, DAVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 GRAND AVE PKWY
 City PFLUGERVILLE State TX Zip Code 78660
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 805.03

Date of Receipt 05 / 16 / 2020
Transaction ID : SA11AI.115480
 Amount of Each Receipt this Period 26.35
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	131.34
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 76 OF 404
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. DAVIS, SALLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6019 DEERWOOD RD
 City HOUSTON State TX Zip Code 77057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 202.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2020
Transaction ID : SA11AI.115510
 Amount of Each Receipt this Period
 52.40
 Memo Item

B. DECORDOVA, AUBREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3109 OAK MOUNTAIN TRL
 City SAN ANGELO State TX Zip Code 76904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2020
Transaction ID : SA11AI.115608
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. DEL ROSARIO, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 6333
 City KANEOHE State HI Zip Code 96744
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 416.14

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 04 / 2020
Transaction ID : SA11AI.115638
 Amount of Each Receipt this Period
 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	162.40
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 77 OF 404
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. DEL ROSARIO, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 6333
 City KANEEOHE State HI Zip Code 96744
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 421.14

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2020
Transaction ID : SA11AI.115639
 Amount of Each Receipt this Period 5.00
 Memo Item

B. DEL ROSARIO, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 6333
 City KANEEOHE State HI Zip Code 96744
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 426.14

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2020
Transaction ID : SA11AI.115640
 Amount of Each Receipt this Period 5.00
 Memo Item

C. DEL ROSARIO, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 6333
 City KANEEOHE State HI Zip Code 96744
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 436.87

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2020
Transaction ID : SA11AI.115641
 Amount of Each Receipt this Period 10.73
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 20.73
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. DEL ROSARIO, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 6333
 City KANEEOHE State HI Zip Code 96744
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 447.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2020
Transaction ID : SA11AI.115642
 Amount of Each Receipt this Period 10.73
 Memo Item

B. DEL ROSARIO, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 6333
 City KANEEOHE State HI Zip Code 96744
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 458.33

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2020
Transaction ID : SA11AI.115643
 Amount of Each Receipt this Period 10.73
 Memo Item

C. DEL ROSARIO, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 6333
 City KANEEOHE State HI Zip Code 96744
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 483.33

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2020
Transaction ID : SA11AI.115644
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	46.46
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. DEL ROSARIO, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 6333

City KANEEOHE	State HI	Zip Code 96744
------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
518.33

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2020
Transaction ID : SA11AI.115645

Amount of Each Receipt this Period
 35.00

Memo Item

B. DEL ROSARIO, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 6333

City KANEEOHE	State HI	Zip Code 96744
------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
528.33

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2020
Transaction ID : SA11AI.115646

Amount of Each Receipt this Period
 10.00

Memo Item

C. DEL ROSARIO, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 6333

City KANEEOHE	State HI	Zip Code 96744
------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
533.32

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2020
Transaction ID : SA11AI.115647

Amount of Each Receipt this Period
 4.99

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	49.99
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 80 OF 404
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. DEL ROSARIO, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 6333

City KANEEOHE	State HI	Zip Code 96744
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 585.72

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2020
Transaction ID : SA11AI.115648

Amount of Each Receipt this Period
 52.40

Memo Item

B. DEL ROSARIO, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 6333

City KANEEOHE	State HI	Zip Code 96744
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 638.12

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2020
Transaction ID : SA11AI.115649

Amount of Each Receipt this Period
 52.40

Memo Item

C. DEL ROSARIO, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 6333

City KANEEOHE	State HI	Zip Code 96744
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 663.12

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2020
Transaction ID : SA11AI.115650

Amount of Each Receipt this Period
 25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	129.80
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. DESIMONE, EUGENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16531 CELLINI LN
 City NAPLES State FL Zip Code 34110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 204.48

Date of Receipt **05 / 09 / 2020**
Transaction ID : SA11AI.115748
 Amount of Each Receipt this Period 104.48
 Memo Item

B. DESIMONE, FRANCES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101-15 SHELDRAKE PL
 City MAMARONECK State NY Zip Code 10543
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 249.98

Date of Receipt **05 / 29 / 2020**
Transaction ID : SA11AI.115749
 Amount of Each Receipt this Period 4.99
 Memo Item

C. DESIMONE, FRANCES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101-15 SHELDRAKE PL
 City MAMARONECK State NY Zip Code 10543
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 259.98

Date of Receipt **05 / 31 / 2020**
Transaction ID : SA11AI.115750
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 119.47
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 82 OF 404
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. DIANTONIO, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 CACHE CAY DR
 City VERO BEACH State FL Zip Code 32963
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 05 / 14 / 2020
Transaction ID : SA11AI.115803
 Amount of Each Receipt this Period 100.00
 Memo Item

B. DICKSON, MARJORIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1024 DANCY ST
 City JACKSONVILLE State FL Zip Code 32205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 797.00

Date of Receipt 05 / 01 / 2020
Transaction ID : SA11AI.115846
 Amount of Each Receipt this Period 10.00
 Memo Item

C. DICKSON, MARJORIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1024 DANCY ST
 City JACKSONVILLE State FL Zip Code 32205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 802.00

Date of Receipt 05 / 05 / 2020
Transaction ID : SA11AI.115847
 Amount of Each Receipt this Period 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	115.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. DICKSON, MARJORIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1024 DANCY ST
 City JACKSONVILLE State FL Zip Code 32205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 807.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2020
Transaction ID : SA11AI.115848
 Amount of Each Receipt this Period 5.00
 Memo Item

B. DICKSON, MARJORIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1024 DANCY ST
 City JACKSONVILLE State FL Zip Code 32205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 812.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2020
Transaction ID : SA11AI.115849
 Amount of Each Receipt this Period 5.00
 Memo Item

C. DICKSON, MARJORIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1024 DANCY ST
 City JACKSONVILLE State FL Zip Code 32205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 816.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 10 / 2020
Transaction ID : SA11AI.115850
 Amount of Each Receipt this Period 4.50
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	14.50
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. DICKSON, MARJORIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1024 DANCY ST
 City JACKSONVILLE State FL Zip Code 32205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 821.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 10 / 2020
Transaction ID : SA11AI.115851
 Amount of Each Receipt this Period
 4.50
 Memo Item

B. DICKSON, MARJORIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1024 DANCY ST
 City JACKSONVILLE State FL Zip Code 32205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 826.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 10 / 2020
Transaction ID : SA11AI.115852
 Amount of Each Receipt this Period
 5.00
 Memo Item

C. DICKSON, MARJORIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1024 DANCY ST
 City JACKSONVILLE State FL Zip Code 32205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 837.25

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 10 / 2020
Transaction ID : SA11AI.115853
 Amount of Each Receipt this Period
 11.25
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	20.75
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. DICKSON, MARJORIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1024 DANCY ST
 City JACKSONVILLE State FL Zip Code 32205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 847.25

Date of Receipt **05 / 12 / 2020**
Transaction ID : SA11AI.115854
 Amount of Each Receipt this Period 10.00
 Memo Item

B. DICKSON, MARJORIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1024 DANCY ST
 City JACKSONVILLE State FL Zip Code 32205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 857.25

Date of Receipt **05 / 12 / 2020**
Transaction ID : SA11AI.115855
 Amount of Each Receipt this Period 10.00
 Memo Item

C. DICKSON, MARJORIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1024 DANCY ST
 City JACKSONVILLE State FL Zip Code 32205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 862.25

Date of Receipt **05 / 14 / 2020**
Transaction ID : SA11AI.115856
 Amount of Each Receipt this Period 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 25.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. DICKSON, MARJORIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1024 DANCY ST
 City JACKSONVILLE State FL Zip Code 32205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 867.25

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2020
Transaction ID : SA11AI.115857
 Amount of Each Receipt this Period
 5.00
 Memo Item

B. DICKSON, MARJORIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1024 DANCY ST
 City JACKSONVILLE State FL Zip Code 32205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 872.25

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2020
Transaction ID : SA11AI.115858
 Amount of Each Receipt this Period
 5.00
 Memo Item

C. DICKSON, MARJORIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1024 DANCY ST
 City JACKSONVILLE State FL Zip Code 32205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 893.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2020
Transaction ID : SA11AI.115859
 Amount of Each Receipt this Period
 21.15
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	31.15
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 87 OF 404
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

A. DICKSON, MARJORIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1024 DANCY ST
 City JACKSONVILLE State FL Zip Code 32205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 898.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2020
Transaction ID : SA11AI.115860
 Amount of Each Receipt this Period
 5.00
 Memo Item

B. DICKSON, MARJORIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1024 DANCY ST
 City JACKSONVILLE State FL Zip Code 32205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 903.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2020
Transaction ID : SA11AI.115861
 Amount of Each Receipt this Period
 5.00
 Memo Item

C. DICKSON, MARJORIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1024 DANCY ST
 City JACKSONVILLE State FL Zip Code 32205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 908.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2020
Transaction ID : SA11AI.115862
 Amount of Each Receipt this Period
 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	15.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. DICKSON, MARJORIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1024 DANCY ST
 City JACKSONVILLE State FL Zip Code 32205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 913.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2020
Transaction ID : SA11AI.115863
 Amount of Each Receipt this Period
 5.00
 Memo Item

B. DICKSON, MARJORIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1024 DANCY ST
 City JACKSONVILLE State FL Zip Code 32205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 918.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2020
Transaction ID : SA11AI.115864
 Amount of Each Receipt this Period
 5.00
 Memo Item

C. DICKSON, MARJORIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1024 DANCY ST
 City JACKSONVILLE State FL Zip Code 32205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 923.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2020
Transaction ID : SA11AI.115865
 Amount of Each Receipt this Period
 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	15.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. DICKSON, MARJORIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1024 DANCY ST
 City JACKSONVILLE State FL Zip Code 32205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 928.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2020
Transaction ID : SA11AI.115866
 Amount of Each Receipt this Period
 5.00
 Memo Item

B. DICKSON, MARJORIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1024 DANCY ST
 City JACKSONVILLE State FL Zip Code 32205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 933.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2020
Transaction ID : SA11AI.115867
 Amount of Each Receipt this Period
 5.00
 Memo Item

C. DICKSON, MARJORIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1024 DANCY ST
 City JACKSONVILLE State FL Zip Code 32205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 938.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2020
Transaction ID : SA11AI.115868
 Amount of Each Receipt this Period
 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	15.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. DICKSON, MARJORIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1024 DANCY ST
 City JACKSONVILLE State FL Zip Code 32205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 948.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2020
Transaction ID : SA11AI.115869
 Amount of Each Receipt this Period
 10.00
 Memo Item

B. DICKSON, MARJORIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1024 DANCY ST
 City JACKSONVILLE State FL Zip Code 32205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 958.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2020
Transaction ID : SA11AI.115870
 Amount of Each Receipt this Period
 10.00
 Memo Item

C. DICKSON, MARJORIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1024 DANCY ST
 City JACKSONVILLE State FL Zip Code 32205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 968.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2020
Transaction ID : SA11AI.115871
 Amount of Each Receipt this Period
 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. DIDERRICH, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33610 80TH ST
 City BURLINGTON State WI Zip Code 53105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 KELSO BURNETT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 204.74

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2020
Transaction ID : SA11AI.115878
 Amount of Each Receipt this Period 5.00
 Memo Item

B. DIDERRICH, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33610 80TH ST
 City BURLINGTON State WI Zip Code 53105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 KELSO BURNETT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.47

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2020
Transaction ID : SA11AI.115879
 Amount of Each Receipt this Period 10.73
 Memo Item

C. DIDERRICH, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33610 80TH ST
 City BURLINGTON State WI Zip Code 53105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 KELSO BURNETT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 226.20

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2020
Transaction ID : SA11AI.115880
 Amount of Each Receipt this Period 10.73
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	26.46
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. DIDERRICH, JIM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 33610 80TH ST

City BURLINGTON	State WI	Zip Code 53105
--------------------	-------------	-------------------

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

Name of Employer (for Individual) KELSO BURNETT	Occupation (for Individual) MANAGER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
251.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2020

Transaction ID : SA11AI.115881

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 6744 NW COUNTY LINE RD

City COLEMAN	State MI	Zip Code 48618
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
204.99

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		25		2020

Transaction ID : SA11AI.115910

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 1010 AMERICAN EAGLE BLVD

City SUN CITY CENTER	State FL	Zip Code 33573
-------------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2020

Transaction ID : SA11AI.115927

Amount of Each Receipt this Period
50.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 93 OF 404
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. DISSLY, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6651 LEYLAND PARK DR
 City SAN JOSE State CA Zip Code 95120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLUE PEARL SOFTWARE Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 05 / 08 / 2020
Transaction ID : SA11AI.115943
 Amount of Each Receipt this Period 50.00
 Memo Item

B. DI STEFANO, FELICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 EASTWOOD AVE
 City DALY CITY State CA Zip Code 94015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.73

Date of Receipt 05 / 04 / 2020
Transaction ID : SA11AI.115794
 Amount of Each Receipt this Period 10.73
 Memo Item

C. DI STEFANO, FELICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 EASTWOOD AVE
 City DALY CITY State CA Zip Code 94015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.73

Date of Receipt 05 / 04 / 2020
Transaction ID : SA11AI.115795
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	80.73
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. DI STEFANO, FELICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 EASTWOOD AVE

City DALY CITY	State CA	Zip Code 94015
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
226.73

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2020
Transaction ID : SA11AI.115796

Amount of Each Receipt this Period
 1.00

Memo Item

B. DI STEFANO, FELICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 EASTWOOD AVE

City DALY CITY	State CA	Zip Code 94015
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
246.73

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2020
Transaction ID : SA11AI.115797

Amount of Each Receipt this Period
 20.00

Memo Item

C. DI STEFANO, FELICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 EASTWOOD AVE

City DALY CITY	State CA	Zip Code 94015
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
251.23

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 10 / 2020
Transaction ID : SA11AI.115798

Amount of Each Receipt this Period
 4.50

Memo Item

SUBTOTAL of Receipts This Page (optional).....	25.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 95 OF 404
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. DONATI, CLINTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5550 PEMBROKE AVE
 City SANTA BARBARA State CA Zip Code 93111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 03 / 2020
Transaction ID : SA11AI.116021
 Amount of Each Receipt this Period 100.00
 Memo Item

B. DONNELLY, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8846 S SACRAMENTO AVE
 City EVERGREEN PARK State IL Zip Code 60805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COOK COUNTY OF IL Occupation (for Individual) COMPUTER PROGRAMMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 05 / 21 / 2020
Transaction ID : SA11AI.116031
 Amount of Each Receipt this Period 100.00
 Memo Item

C. DONNELLY, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8846 S SACRAMENTO AVE
 City EVERGREEN PARK State IL Zip Code 60805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COOK COUNTY OF IL Occupation (for Individual) COMPUTER PROGRAMMER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1025.00

Date of Receipt 05 / 21 / 2020
Transaction ID : SA11AI.116032
 Amount of Each Receipt this Period 125.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	325.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. DORAU, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 579 SOUTHERN OAK CIR

City HARTLAND	State WI	Zip Code 53029
------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		01		2020

Transaction ID : SA11AI.116053

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 5215 ZACHARY GROVE
APT 208

City COLORADO SPRINGS	State CO	Zip Code 80919
--------------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
209.99

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		03		2020

Transaction ID : SA11AI.116072

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 6507 GOODNIGHT LN

City AUSTIN	State TX	Zip Code 78757
----------------	-------------	-------------------

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

Name of Employer (for Individual) SCHNEIDER ELECTRIC	Occupation (for Individual) INSTALLATION ENGINEER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		18		2020

Transaction ID : SA11AI.116131

Amount of Each Receipt this Period
100.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. DUGAN, MARSHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7046 5TH AVE

City RIO LINDA	State CA	Zip Code 95673
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
208.69

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 10 / 2020

Transaction ID : SA11AI.116174

Amount of Each Receipt this Period
 26.35

Memo Item

B. DUGAN, MARSHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7046 5TH AVE

City RIO LINDA	State CA	Zip Code 95673
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
209.69

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 18 / 2020

Transaction ID : SA11AI.116175

Amount of Each Receipt this Period
 1.00

Memo Item

C. DUGAN, MARSHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7046 5TH AVE

City RIO LINDA	State CA	Zip Code 95673
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
214.68

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 18 / 2020

Transaction ID : SA11AI.116176

Amount of Each Receipt this Period
 4.99

Memo Item

SUBTOTAL of Receipts This Page (optional).....	32.34
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. DUGAN, MARSHA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7046 5TH AVE

City RIO LINDA	State CA	Zip Code 95673
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
239.68

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		18		2020

Transaction ID : SA11AI.116177

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 7046 5TH AVE

City RIO LINDA	State CA	Zip Code 95673
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
264.68

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		18		2020

Transaction ID : SA11AI.116178

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 7046 5TH AVE

City RIO LINDA	State CA	Zip Code 95673
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
314.68

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		18		2020

Transaction ID : SA11AI.116179

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. DUGAN, MARSHA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7046 5TH AVE
 City RIO LINDA State CA Zip Code 95673
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 419.16

Date of Receipt 05 / 26 / 2020
Transaction ID : SA11AI.116180
 Amount of Each Receipt this Period 104.48
 Memo Item

B. EILERTSON, DANA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 FROST CT
 City LEDGEWOOD State NJ Zip Code 07852
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EXECUTIVE JET MANAGEMENT Occupation (for Individual) CORPORATE PILOT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2020
Transaction ID : SA11AI.116374
 Amount of Each Receipt this Period 250.00
 Memo Item

C. ELDER, BILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 180 CREEKWAY BEND
 City SOUTHLAKE State TX Zip Code 76092
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICAN AIRLINES Occupation (for Individual) PILOT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 30 / 2020
Transaction ID : SA11AI.116390
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	604.48
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. ELGIE, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4663 LAWLER CT
 City LA MESA State CA Zip Code 91941
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt 05 / 29 / 2020
Transaction ID : SA11AI.116397
 Amount of Each Receipt this Period 35.00
 Memo Item

B. ELLIS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 207 E SHIELDS ST
 City FLETCHER State OK Zip Code 73541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CITY OF LAWTON Occupation (for Individual) WWTP PLANT OPERATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1394.35

Date of Receipt 05 / 02 / 2020
Transaction ID : SA11AI.116414
 Amount of Each Receipt this Period 15.00
 Memo Item

C. ELLIS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 207 E SHIELDS ST
 City FLETCHER State OK Zip Code 73541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CITY OF LAWTON Occupation (for Individual) WWTP PLANT OPERATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1399.35

Date of Receipt 05 / 04 / 2020
Transaction ID : SA11AI.116415
 Amount of Each Receipt this Period 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 207 E SHIELDS ST

City FLETCHER	State OK	Zip Code 73541
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CITY OF LAWTON	Occupation (for Individual) WWTP PLANT OPERATOR
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1419.35

Date of Receipt

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

Transaction ID : SA11AI.116416

Amount of Each Receipt this Period
20.00

Memo Item

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

Mailing Address 207 E SHIELDS ST

City FLETCHER	State OK	Zip Code 73541
------------------	-------------	-------------------

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

Name of Employer (for Individual) CITY OF LAWTON	Occupation (for Individual) WWTP PLANT OPERATOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1454.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		06		2020

Transaction ID : SA11AI.116417

Amount of Each Receipt this Period
35.00

Memo Item

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

Mailing Address 207 E SHIELDS ST

City FLETCHER	State OK	Zip Code 73541
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CITY OF LAWTON	Occupation (for Individual) WWTP PLANT OPERATOR
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1459.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		07		2020

Transaction ID : SA11AI.116418

Amount of Each Receipt this Period
5.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 207 E SHIELDS ST

City FLETCHER	State OK	Zip Code 73541
------------------	-------------	-------------------

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

Name of Employer (for Individual) CITY OF LAWTON	Occupation (for Individual) WWTP PLANT OPERATOR
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1479.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		07		2020

Transaction ID : SA11AI.116419

Amount of Each Receipt this Period
20.00

Memo Item

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

Mailing Address 207 E SHIELDS ST

City FLETCHER	State OK	Zip Code 73541
------------------	-------------	-------------------

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

Name of Employer (for Individual) CITY OF LAWTON	Occupation (for Individual) WWTP PLANT OPERATOR
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1514.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		09		2020

Transaction ID : SA11AI.116420

Amount of Each Receipt this Period
35.00

Memo Item

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

Mailing Address 207 E SHIELDS ST

City FLETCHER	State OK	Zip Code 73541
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CITY OF LAWTON	Occupation (for Individual) WWTP PLANT OPERATOR
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1549.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2020

Transaction ID : SA11AI.116421

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	90.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 207 E SHIELDS ST

City FLETCHER	State OK	Zip Code 73541
------------------	-------------	-------------------

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

Name of Employer (for Individual) CITY OF LAWTON	Occupation (for Individual) WWTP PLANT OPERATOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1575.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		15		2020

Transaction ID : SA11AI.116422

Amount of Each Receipt this Period
26.35

Memo Item

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

Mailing Address 207 E SHIELDS ST

City FLETCHER	State OK	Zip Code 73541
------------------	-------------	-------------------

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

Name of Employer (for Individual) CITY OF LAWTON	Occupation (for Individual) WWTP PLANT OPERATOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1580.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		18		2020

Transaction ID : SA11AI.116423

Amount of Each Receipt this Period
5.00

Memo Item

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

Mailing Address 207 E SHIELDS ST

City FLETCHER	State OK	Zip Code 73541
------------------	-------------	-------------------

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

Name of Employer (for Individual) CITY OF LAWTON	Occupation (for Individual) WWTP PLANT OPERATOR
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1590.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2020

Transaction ID : SA11AI.116424

Amount of Each Receipt this Period
10.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	41.35
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 207 E SHIELDS ST

City FLETCHER	State OK	Zip Code 73541
------------------	-------------	-------------------

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

Name of Employer (for Individual) CITY OF LAWTON	Occupation (for Individual) WWTP PLANT OPERATOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1615.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		23		2020

Transaction ID : SA11AI.116425

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 207 E SHIELDS ST

City FLETCHER	State OK	Zip Code 73541
------------------	-------------	-------------------

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

Name of Employer (for Individual) CITY OF LAWTON	Occupation (for Individual) WWTP PLANT OPERATOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1635.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		26		2020

Transaction ID : SA11AI.116426

Amount of Each Receipt this Period
20.00

Memo Item

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

Mailing Address 207 E SHIELDS ST

City FLETCHER	State OK	Zip Code 73541
------------------	-------------	-------------------

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

Name of Employer (for Individual) CITY OF LAWTON	Occupation (for Individual) WWTP PLANT OPERATOR
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1660.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		26		2020

Transaction ID : SA11AI.116427

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	70.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 207 E SHIELDS ST

City FLETCHER	State OK	Zip Code 73541
------------------	-------------	-------------------

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

Name of Employer (for Individual) CITY OF LAWTON	Occupation (for Individual) WWTP PLANT OPERATOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1685.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		27		2020

Transaction ID : SA11AI.116428

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 207 E SHIELDS ST

City FLETCHER	State OK	Zip Code 73541
------------------	-------------	-------------------

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

Name of Employer (for Individual) CITY OF LAWTON	Occupation (for Individual) WWTP PLANT OPERATOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1705.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2020

Transaction ID : SA11AI.116429

Amount of Each Receipt this Period
20.00

Memo Item

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

Mailing Address PO BOX 841

City ANCHOR POINT	State AK	Zip Code 99556
----------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		17		2020

Transaction ID : SA11AI.116432

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. EMORY, NYLA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16210 NE EILERS RD
 City AURORA State OR Zip Code 97002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2020
Transaction ID : SA11AI.116455
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. ENCOMIENDA, PAZ, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 4776
 City OAK BROOK State IL Zip Code 60522
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 231.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2020
Transaction ID : SA11AI.116465
 Amount of Each Receipt this Period
 4.99
 Memo Item

C. ENCOMIENDA, PAZ, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 4776
 City OAK BROOK State IL Zip Code 60522
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 236.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2020
Transaction ID : SA11AI.116466
 Amount of Each Receipt this Period
 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	259.99
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 107 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. ENCOMIENDA, PAZ, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 4776

City OAK BROOK	State IL	Zip Code 60522
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
241.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2020
Transaction ID : SA11AI.116467

Amount of Each Receipt this Period
 5.00

Memo Item

B. ENCOMIENDA, PAZ, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 4776

City OAK BROOK	State IL	Zip Code 60522
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
345.98

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2020
Transaction ID : SA11AI.116468

Amount of Each Receipt this Period
 104.48

Memo Item

C. ENCOMIENDA, PAZ, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 4776

City OAK BROOK	State IL	Zip Code 60522
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.46

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2020
Transaction ID : SA11AI.116469

Amount of Each Receipt this Period
 104.48

Memo Item

SUBTOTAL of Receipts This Page (optional).....	213.96
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. ENCOMIENDA, PAZ, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 4776

City OAK BROOK	State IL	Zip Code 60522
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
554.94

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2020
Transaction ID : SA11AI.116470

Amount of Each Receipt this Period
 104.48

Memo Item

B. ENCOMIENDA, PAZ, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 4776

City OAK BROOK	State IL	Zip Code 60522
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
617.75

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 18 / 2020
Transaction ID : SA11AI.116471

Amount of Each Receipt this Period
 62.81

Memo Item

C. ENCOMIENDA, PAZ, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 4776

City OAK BROOK	State IL	Zip Code 60522
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
618.75

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2020
Transaction ID : SA11AI.116472

Amount of Each Receipt this Period
 1.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	168.29
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. ENCOMIENDA, PAZ, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 4776

City OAK BROOK	State IL	Zip Code 60522
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
627.74

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2020

Transaction ID : SA11AI.116473

Amount of Each Receipt this Period
8.99

Memo Item

B. ENCOMIENDA, PAZ, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 4776

City OAK BROOK	State IL	Zip Code 60522
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
680.14

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2020

Transaction ID : SA11AI.116474

Amount of Each Receipt this Period
52.40

Memo Item

C. ENCOMIENDA, PAZ, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 4776

City OAK BROOK	State IL	Zip Code 60522
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
685.13

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2020

Transaction ID : SA11AI.116475

Amount of Each Receipt this Period
4.99

Memo Item

SUBTOTAL of Receipts This Page (optional).....	66.38
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 110 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. ENCOMIENDA, PAZ, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 4776

City OAK BROOK	State IL	Zip Code 60522
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
690.12

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2020
Transaction ID : SA11AI.116476

Amount of Each Receipt this Period
 4.99

Memo Item

B. ENCOMIENDA, PAZ, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 4776

City OAK BROOK	State IL	Zip Code 60522
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
695.12

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2020
Transaction ID : SA11AI.116477

Amount of Each Receipt this Period
 5.00

Memo Item

C. ENCOMIENDA, PAZ, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 4776

City OAK BROOK	State IL	Zip Code 60522
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
700.12

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2020
Transaction ID : SA11AI.116478

Amount of Each Receipt this Period
 5.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	14.99
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 111 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. ENCOMIENDA, PAZ, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 4776

City OAK BROOK	State IL	Zip Code 60522
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
752.52

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2020
Transaction ID : SA11AI.116479

Amount of Each Receipt this Period
 52.40

Memo Item

B. ENCOMIENDA, PAZ, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 4776

City OAK BROOK	State IL	Zip Code 60522
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
804.92

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2020
Transaction ID : SA11AI.116480

Amount of Each Receipt this Period
 52.40

Memo Item

C. ENCOMIENDA, PAZ, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 4776

City OAK BROOK	State IL	Zip Code 60522
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
857.32

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2020
Transaction ID : SA11AI.116481

Amount of Each Receipt this Period
 52.40

Memo Item

SUBTOTAL of Receipts This Page (optional).....	157.20
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 112 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. ENCOMIENDA, PAZ, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 4776

City OAK BROOK	State IL	Zip Code 60522
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
909.72

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2020
Transaction ID : SA11AI.116482

Amount of Each Receipt this Period
 52.40

Memo Item

B. ENCOMIENDA, PAZ, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 4776

City OAK BROOK	State IL	Zip Code 60522
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
939.72

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 25 / 2020
Transaction ID : SA11AI.116483

Amount of Each Receipt this Period
 30.00

Memo Item

C. ENCOMIENDA, PAZ, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 4776

City OAK BROOK	State IL	Zip Code 60522
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
969.72

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 25 / 2020
Transaction ID : SA11AI.116484

Amount of Each Receipt this Period
 30.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	112.40
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 113 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. ENCOMIENDA, PAZ, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 4776

City OAK BROOK	State IL	Zip Code 60522
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1029.72

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2020

Transaction ID : SA11AI.116485

Amount of Each Receipt this Period
60.00

Memo Item

B. ENCOMIENDA, PAZ, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 4776

City OAK BROOK	State IL	Zip Code 60522
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1279.72

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2020

Transaction ID : SA11AI.116486

Amount of Each Receipt this Period
250.00

Memo Item

C. ENCOMIENDA, PAZ, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 4776

City OAK BROOK	State IL	Zip Code 60522
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1529.72

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2020

Transaction ID : SA11AI.116487

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	560.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. ENGSTROM, SHELAGH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7580 SR 13 NORTH

City SAINT AUGUSTINE	State FL	Zip Code 32092
-------------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.98

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		14		2020

Transaction ID : SA11AI.116516

Amount of Each Receipt this Period
8.99

Memo Item

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

Mailing Address 7580 SR 13 NORTH

City SAINT AUGUSTINE	State FL	Zip Code 32092
-------------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
247.96

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		14		2020

Transaction ID : SA11AI.116517

Amount of Each Receipt this Period
41.98

Memo Item

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

Mailing Address 7580 SR 13 NORTH

City SAINT AUGUSTINE	State FL	Zip Code 32092
-------------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
289.94

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		14		2020

Transaction ID : SA11AI.116518

Amount of Each Receipt this Period
41.98

Memo Item

SUBTOTAL of Receipts This Page (optional).....	92.95
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 115 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. ENGSTROM, SHELAGH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7580 SR 13 NORTH

City SAINT AUGUSTINE	State FL	Zip Code 32092
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 331.92	

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2020
Transaction ID : SA11AI.116519

Amount of Each Receipt this Period
 41.98

Memo Item

B. ENGSTROM, SHELAGH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7580 SR 13 NORTH

City SAINT AUGUSTINE	State FL	Zip Code 32092
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 356.92	

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2020
Transaction ID : SA11AI.116520

Amount of Each Receipt this Period
 25.00

Memo Item

C. ENTERPRISE, DANGENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 66 E 55TH ST

City NEW YORK	State NY	Zip Code 10022
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) DANGENE ENTERPRISE	Occupation (for Individual) OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 406.00	

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2020
Transaction ID : SA11AI.116523

Amount of Each Receipt this Period
 100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	166.98
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 116 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

A. ERCOLINI, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 195 BRIDLE PATH
 City NORTH ANDOVER State MA Zip Code 01845
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APPA LLC Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 20 / 2020
Transaction ID : SA11AI.116539
 Amount of Each Receipt this Period 500.00
 Memo Item

B. EWING, PEGGY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2760
 City MESQUITE State NV Zip Code 89024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 487.00

Date of Receipt 05 / 09 / 2020
Transaction ID : SA11AI.116628
 Amount of Each Receipt this Period 1.00
 Memo Item

C. EWING, PEGGY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2760
 City MESQUITE State NV Zip Code 89024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 492.00

Date of Receipt 05 / 09 / 2020
Transaction ID : SA11AI.116629
 Amount of Each Receipt this Period 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	506.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 117 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

A. EWING, PEGGY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2760

City MESQUITE	State NV	Zip Code 89024
------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
517.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 09 / 2020
Transaction ID : SA11AI.116630

Amount of Each Receipt this Period
25.00

Memo Item

B. EWING, PEGGY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2760

City MESQUITE	State NV	Zip Code 89024
------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
558.98

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 09 / 2020
Transaction ID : SA11AI.116631

Amount of Each Receipt this Period
41.98

Memo Item

C. EWING, PEGGY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2760

City MESQUITE	State NV	Zip Code 89024
------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
603.98

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2020
Transaction ID : SA11AI.116632

Amount of Each Receipt this Period
45.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	111.98
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 118 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. FEELEY, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7185 EVAN CT
 City WARRENTON State VA Zip Code 20187
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2020
Transaction ID : SA11AI.116767
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. FELDMAN, DOROTHY, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3332 50TH AVE CT E
 City BRADENTON State FL Zip Code 34203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2020
Transaction ID : SA11AI.116781
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. FIDDYMENT, KARYL, LYNN, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6419 RIO DE ONAR WAY
 City ELK GROVE State CA Zip Code 95757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 445.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2020
Transaction ID : SA11AI.116863
 Amount of Each Receipt this Period
 25.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 119 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. FIDDYMENT, KARYL, LYNN, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6419 RIO DE ONAR WAY

City ELK GROVE	State CA	Zip Code 95757
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
490.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		26		2020

Transaction ID : SA11AI.116864

Amount of Each Receipt this Period
45.00

Memo Item

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

Mailing Address 1442 SEACOAST DR #5

City IMPERIAL BEACH	State CA	Zip Code 91932
------------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		14		2020

Transaction ID : SA11AI.116910

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 1442 SEACOAST DR #5

City IMPERIAL BEACH	State CA	Zip Code 91932
------------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
335.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2020

Transaction ID : SA11AI.116911

Amount of Each Receipt this Period
50.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 120 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. FISCHER, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1442 SEACOAST DR #5
 City IMPERIAL BEACH State CA Zip Code 91932
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt 05 / 22 / 2020
Transaction ID : SA11AI.116912
 Amount of Each Receipt this Period 50.00
 Memo Item

B. FITZGERALD, LYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 733
 City BUENA VISTA State VA Zip Code 24416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 242.70

Date of Receipt 05 / 01 / 2020
Transaction ID : SA11AI.116945
 Amount of Each Receipt this Period 100.00
 Memo Item

C. FITZGERALD, LYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 733
 City BUENA VISTA State VA Zip Code 24416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 243.70

Date of Receipt 05 / 06 / 2020
Transaction ID : SA11AI.116946
 Amount of Each Receipt this Period 1.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	151.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 121 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. FITZGERALD, LYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 733

City BUENA VISTA	State VA	Zip Code 24416
---------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
278.70

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2020
Transaction ID : SA11AI.116947

Amount of Each Receipt this Period
 35.00

Memo Item

B. FITZGERALD, LYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 733

City BUENA VISTA	State VA	Zip Code 24416
---------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
283.70

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 13 / 2020
Transaction ID : SA11AI.116948

Amount of Each Receipt this Period
 5.00

Memo Item

C. FITZGERALD, LYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 733

City BUENA VISTA	State VA	Zip Code 24416
---------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
288.70

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 13 / 2020
Transaction ID : SA11AI.116949

Amount of Each Receipt this Period
 5.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 122 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. FITZGERALD, LYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 733

City BUENA VISTA	State VA	Zip Code 24416
---------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
293.70

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 13 / 2020
Transaction ID : SA11AI.116950

Amount of Each Receipt this Period
 5.00

Memo Item

B. FITZGERALD, LYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 733

City BUENA VISTA	State VA	Zip Code 24416
---------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.05

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2020
Transaction ID : SA11AI.116951

Amount of Each Receipt this Period
 26.35

Memo Item

C. FLEGENHEIMER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 308 LEMONWOOD DR

City FALLBROOK	State CA	Zip Code 92028
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
214.99

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2020
Transaction ID : SA11AI.116973

Amount of Each Receipt this Period
 35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	66.35
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 123 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. FLEGENHEIMER, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 308 LEMONWOOD DR

City FALLBROOK	State CA	Zip Code 92028
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
239.99

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2020

Transaction ID : SA11AI.116974

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 2025 W BALBOA BLVD

City NEWPORT BEACH	State CA	Zip Code 92663
-----------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		16		2020

Transaction ID : SA11AI.117012

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 2 ELMWOOD DR

City TABERNACLE	State NJ	Zip Code 08088
--------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
328.45

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		15		2020

Transaction ID : SA11AI.117033

Amount of Each Receipt this Period
265.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	390.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 124 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. FOLEY, TIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 ELMWOOD DR
 City TABERNACLE State NJ Zip Code 08088
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FOLEY Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 593.45

Date of Receipt 05 / 15 / 2020
Transaction ID : SA11AI.117034
 Amount of Each Receipt this Period 265.00
 Memo Item

B. FORCUM, ANTHONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5605 SHADY ELM CIR
 City PLANO State TX Zip Code 75093
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 31 / 2020
Transaction ID : SA11AI.117063
 Amount of Each Receipt this Period 500.00
 Memo Item

C. FOX, FRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14017 CLEAR WATER LN
 City FORT MYERS State FL Zip Code 33907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 30 / 2020
Transaction ID : SA11AI.117151
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	815.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 125 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. FOXON, KEITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6981 E BROOKS DR
 City TUCSON State AZ Zip Code 85730
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2020
Transaction ID : SA11AI.117164
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. FREYMANN, ELSA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 929 W SUNSET BLVD
 City SAINT GEORGE State UT Zip Code 84770
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 219.89

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2020
Transaction ID : SA11AI.117225
 Amount of Each Receipt this Period
 36.77
 Memo Item

C. FRIESNER, JOEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 56801 WHITE ST
 City OSCEOLA State IN Zip Code 46561
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 216.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 13 / 2020
Transaction ID : SA11AI.117235
 Amount of Each Receipt this Period
 45.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	116.77
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 126 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. FUCHS, ARNOLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14996 SW SUMMERVIEW DR
 City PORTLAND State OR Zip Code 97224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HARRIS Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 286.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2020
Transaction ID : SA11AI.117272
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. FUCHS, ARNOLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14996 SW SUMMERVIEW DR
 City PORTLAND State OR Zip Code 97224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HARRIS Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 321.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2020
Transaction ID : SA11AI.117273
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. FUQUA, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34799 AVE 13 1/2
 City MADERA State CA Zip Code 93636
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2020
Transaction ID : SA11AI.117297
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	160.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 127 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. GADDIS, JANE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10700 SIKES PL
STE 2245

City CHARLOTTE State NC Zip Code 28277

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

Name of Employer (for Individual) ASHOK B CHUDGAR CPA PA Occupation (for Individual) SR ACCOUNTANT/VP OPERATIONS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 386.93

Date of Receipt 05 / 18 / 2020
Transaction ID : SA11AI.117314

Amount of Each Receipt this Period 4.99

Memo Item

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

Mailing Address 10700 SIKES PL
STE 2245

City CHARLOTTE State NC Zip Code 28277

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

Name of Employer (for Individual) ASHOK B CHUDGAR CPA PA Occupation (for Individual) SR ACCOUNTANT/VP OPERATIONS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 391.92

Date of Receipt 05 / 27 / 2020
Transaction ID : SA11AI.117315

Amount of Each Receipt this Period 4.99

Memo Item

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

Mailing Address 24582 N 120TH PL

City SCOTTSDALE State AZ Zip Code 85255

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

Name of Employer (for Individual) GRAFLEX INC Occupation (for Individual) SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 06 / 2020
Transaction ID : SA11AI.117381

Amount of Each Receipt this Period 500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 509.98

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 128 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. GARBER, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 823 COACHWAY
 City ANNAPOLIS State MD Zip Code 21401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.73

Date of Receipt 05 / 08 / 2020
Transaction ID : SA11AI.117387
 Amount of Each Receipt this Period 260.73
 Memo Item

B. GARDNER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5880 N DOUGLAS HWY
 City JUNEAU State AK Zip Code 99801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BARTLETT REGIONAL HOSPITAL Occupation (for Individual) CHIEF CLINICAL OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 15 / 2020
Transaction ID : SA11AI.117417
 Amount of Each Receipt this Period 50.00
 Memo Item

C. GASKINS, RALPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2575 PEACHTREE RD NE 26-E
 City ATLANTA State GA Zip Code 30305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KASOWITZ TORRES BENSON & FRIEDMAN LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 05 / 22 / 2020
Transaction ID : SA11AI.117463
 Amount of Each Receipt this Period 60.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	370.73
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 129 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. GAY, KIM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3303 ABERCORN ST

City SAVANNAH	State GA	Zip Code 31405
------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
532.44

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2020

Transaction ID : SA11AI.117487

Amount of Each Receipt this Period
4.99

Memo Item

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

Mailing Address 5979 HIGHWAY 1

City NAPOLEONVILLE	State LA	Zip Code 70390
-----------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
209.99

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2020

Transaction ID : SA11AI.117542

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 312 S CHADBOURNE AVE

City LOS ANGELES	State CA	Zip Code 90049
---------------------	-------------	-------------------

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

Name of Employer (for Individual) GERSHMAN PROPERTIES LLC	Occupation (for Individual) REAL ESTATE
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
260.73

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		09		2020

Transaction ID : SA11AI.117554

Amount of Each Receipt this Period
260.73

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	365.72
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 130 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. GILBERT, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 WASHINGTON SQUARE VLG
 16H
 City NEW YORK State NY Zip Code 10012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 204.48

Date of Receipt 05 / 18 / 2020
Transaction ID : SA11AI.117617
 Amount of Each Receipt this Period 100.00
 Memo Item

B. GILES, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1950 S BEVERLYE RD
 City DOTHAN State AL Zip Code 36301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.73

Date of Receipt 05 / 29 / 2020
Transaction ID : SA11AI.117632
 Amount of Each Receipt this Period 40.00
 Memo Item

C. GILES, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1400 WAVERLY RD
 City GLADWYNE State PA Zip Code 19035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 01 / 2020
Transaction ID : SA11AI.117636
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	640.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 131 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. GILMORE, JEFFREY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 665 PINE ST #701
 City SAN FRANCISCO State CA Zip Code 94108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ABLE ENGINEERING SERVICES Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 08 / 2020
Transaction ID : SA11AI.117661
 Amount of Each Receipt this Period 100.00
 Memo Item

B. GLENDINNING, ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 340 S US HIGHWAY 1 APT 408
 City JUPITER State FL Zip Code 33477-5930
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 05 / 06 / 2020
Transaction ID : SA11AI.117722
 Amount of Each Receipt this Period 50.00
 Memo Item

C. GLOCKLER, HERRMANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3265 SIERRA CREST WAY
 City RENO State NV Zip Code 89519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 05 / 21 / 2020
Transaction ID : SA11AI.117730
 Amount of Each Receipt this Period 25.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 132 OF 404
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. GLOCKLER, HERRMANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3265 SIERRA CREST WAY
 City RENO State NV Zip Code 89519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 05 / 21 / 2020
Transaction ID : SA11AI.117731
 Amount of Each Receipt this Period 25.00
 Memo Item

B. GLOCKLER, HERRMANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3265 SIERRA CREST WAY
 City RENO State NV Zip Code 89519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 05 / 29 / 2020
Transaction ID : SA11AI.117732
 Amount of Each Receipt this Period 100.00
 Memo Item

C. GLUNT, BETSY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11757 BELMONT DR
 City AULT State CO Zip Code 80610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 05 / 05 / 2020
Transaction ID : SA11AI.117745
 Amount of Each Receipt this Period 100.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 133 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. GOLDBERG, SHERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8317 N RIDGEVIEW DR
 City PARADISE VALLEY State AZ Zip Code 85253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) ADVERTISING AND ART
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 336.46

Date of Receipt 05 / 04 / 2020
Transaction ID : SA11AI.117775
 Amount of Each Receipt this Period 10.73
 Memo Item

B. GOLDBERG, SHERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8317 N RIDGEVIEW DR
 City PARADISE VALLEY State AZ Zip Code 85253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) ADVERTISING AND ART
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 346.46

Date of Receipt 05 / 18 / 2020
Transaction ID : SA11AI.117776
 Amount of Each Receipt this Period 10.00
 Memo Item

C. GOLDBERG, SHERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8317 N RIDGEVIEW DR
 City PARADISE VALLEY State AZ Zip Code 85253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) ADVERTISING AND ART
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 383.23

Date of Receipt 05 / 27 / 2020
Transaction ID : SA11AI.117777
 Amount of Each Receipt this Period 36.77
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	57.50
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 134 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
GONZALO, NELSON, , ,

Mailing Address 2811 SE 5TH CT

City CAPE CORAL	State FL	Zip Code 33904
--------------------	-------------	-------------------

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

Name of Employer (for Individual) ANGE'S AUTO	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
311.34

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2020

Transaction ID : SA11AI.117818

Amount of Each Receipt this Period
 1.00

Memo Item

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

Mailing Address 2811 SE 5TH CT

City CAPE CORAL	State FL	Zip Code 33904
--------------------	-------------	-------------------

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

Name of Employer (for Individual) ANGE'S AUTO	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
332.49

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2020

Transaction ID : SA11AI.117819

Amount of Each Receipt this Period
 21.15

Memo Item

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

Mailing Address 2811 SE 5TH CT

City CAPE CORAL	State FL	Zip Code 33904
--------------------	-------------	-------------------

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

Name of Employer (for Individual) ANGE'S AUTO	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
353.64

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2020

Transaction ID : SA11AI.117820

Amount of Each Receipt this Period
 21.15

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	43.30
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 135 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
GONZALO, NELSON, , ,

Mailing Address **2811 SE 5TH CT**

City CAPE CORAL	State FL	Zip Code 33904
---------------------------	--------------------	--------------------------

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

Name of Employer (for Individual) ANGE'S AUTO	Occupation (for Individual) OWNER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **374.79**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2020

Transaction ID : SA11AI.117821

Amount of Each Receipt this Period

21.15

 Memo Item

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

Mailing Address **2811 SE 5TH CT**

City CAPE CORAL	State FL	Zip Code 33904
---------------------------	--------------------	--------------------------

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

Name of Employer (for Individual) ANGE'S AUTO	Occupation (for Individual) OWNER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **379.78**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2020

Transaction ID : SA11AI.117822

Amount of Each Receipt this Period

4.99

 Memo Item

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

Mailing Address **2811 SE 5TH CT**

City CAPE CORAL	State FL	Zip Code 33904
---------------------------	--------------------	--------------------------

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

Name of Employer (for Individual) ANGE'S AUTO	Occupation (for Individual) OWNER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **406.13**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		14		2020

Transaction ID : SA11AI.117823

Amount of Each Receipt this Period

26.35

 Memo Item

SUBTOTAL of Receipts This Page (optional).....	52.49
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 136 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. GONZALO, NELSON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2811 SE 5TH CT
 City CAPE CORAL State FL Zip Code 33904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANGE'S AUTO Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 432.48

Date of Receipt 05 / 14 / 2020
Transaction ID : SA11AI.117824
 Amount of Each Receipt this Period 26.35
 Memo Item

B. GONZALO, NELSON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2811 SE 5TH CT
 City CAPE CORAL State FL Zip Code 33904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ANGE'S AUTO Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 482.48

Date of Receipt 05 / 20 / 2020
Transaction ID : SA11AI.117825
 Amount of Each Receipt this Period 50.00
 Memo Item

C. GOODELL, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6617 S 107TH CIR
 City OMAHA State NE Zip Code 68127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 18 / 2020
Transaction ID : SA11AI.117840
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	111.35
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 137 OF 404
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. GOODELL, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6617 S 107TH CIR
 City OMAHA State NE Zip Code 68127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 229.99

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2020
Transaction ID : SA11AI.117841
 Amount of Each Receipt this Period 4.99
 Memo Item

B. GOODELL, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6617 S 107TH CIR
 City OMAHA State NE Zip Code 68127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.99

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2020
Transaction ID : SA11AI.117842
 Amount of Each Receipt this Period 5.00
 Memo Item

C. GOODELL, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6617 S 107TH CIR
 City OMAHA State NE Zip Code 68127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 254.99

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2020
Transaction ID : SA11AI.117843
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	29.99
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 138 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. GOODELL, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6617 S 107TH CIR
 City OMAHA State NE Zip Code 68127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 274.99

Date of Receipt 05 / 21 / 2020
Transaction ID : SA11AI.117844
 Amount of Each Receipt this Period 20.00
 Memo Item

B. GOULD, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2625 MAROON BELLS AVE #16
 City COLORADO SPRINGS State CO Zip Code 80918
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 349.69

Date of Receipt 05 / 02 / 2020
Transaction ID : SA11AI.117884
 Amount of Each Receipt this Period 5.00
 Memo Item

C. GOULD, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2625 MAROON BELLS AVE #16
 City COLORADO SPRINGS State CO Zip Code 80918
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 384.69

Date of Receipt 05 / 05 / 2020
Transaction ID : SA11AI.117885
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 139 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. GOULD, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2625 MAROON BELLS AVE #16
 City COLORADO SPRINGS State CO Zip Code 80918
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 395.94

Date of Receipt 05 / 10 / 2020
Transaction ID : SA11AI.117886
 Amount of Each Receipt this Period 11.25
 Memo Item

B. GOULD, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2625 MAROON BELLS AVE #16
 City COLORADO SPRINGS State CO Zip Code 80918
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 407.19

Date of Receipt 05 / 10 / 2020
Transaction ID : SA11AI.117887
 Amount of Each Receipt this Period 11.25
 Memo Item

C. GOULD, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2625 MAROON BELLS AVE #16
 City COLORADO SPRINGS State CO Zip Code 80918
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 437.19

Date of Receipt 05 / 12 / 2020
Transaction ID : SA11AI.117888
 Amount of Each Receipt this Period 30.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	52.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 140 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. GOULD, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2625 MAROON BELLS AVE #16
 City COLORADO SPRINGS State CO Zip Code 80918
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 442.18

Date of Receipt 05 / 14 / 2020
Transaction ID : SA11AI.117889
 Amount of Each Receipt this Period 4.99
 Memo Item

B. GOULD, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2625 MAROON BELLS AVE #16
 City COLORADO SPRINGS State CO Zip Code 80918
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 447.18

Date of Receipt 05 / 14 / 2020
Transaction ID : SA11AI.117890
 Amount of Each Receipt this Period 5.00
 Memo Item

C. GOULD, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2625 MAROON BELLS AVE #16
 City COLORADO SPRINGS State CO Zip Code 80918
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 457.91

Date of Receipt 05 / 14 / 2020
Transaction ID : SA11AI.117891
 Amount of Each Receipt this Period 10.73
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	20.72
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 141 OF 404
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. GOULD, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2625 MAROON BELLS AVE #16
 City COLORADO SPRINGS State CO Zip Code 80918
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 468.64

Date of Receipt 05 / 14 / 2020
Transaction ID : SA11AI.117892
 Amount of Each Receipt this Period 10.73
 Memo Item

B. GOULD, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2625 MAROON BELLS AVE #16
 City COLORADO SPRINGS State CO Zip Code 80918
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 521.04

Date of Receipt 05 / 14 / 2020
Transaction ID : SA11AI.117893
 Amount of Each Receipt this Period 52.40
 Memo Item

C. GOULD, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2625 MAROON BELLS AVE #16
 City COLORADO SPRINGS State CO Zip Code 80918
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 573.44

Date of Receipt 05 / 14 / 2020
Transaction ID : SA11AI.117894
 Amount of Each Receipt this Period 52.40
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 115.53
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 142 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. GRAF, SUZANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 875 ADAMS AVE
 City FRANKLIN SQUARE State NY Zip Code 11010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 28 / 2020
Transaction ID : SA11AI.117898
 Amount of Each Receipt this Period 250.00
 Memo Item

B. GRAHAM, JOHNNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1525 NORTHWAY DR #208
 City ST. CLOUD State MN Zip Code 56303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 05 / 19 / 2020
Transaction ID : SA11AI.117903
 Amount of Each Receipt this Period 35.00
 Memo Item

C. GRANADOS, RODOLFO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2181 JAMIESON AVE UNIT 2009
 City ALEXANDRIA State VA Zip Code 22314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 217.00

Date of Receipt 05 / 13 / 2020
Transaction ID : SA11AI.117913
 Amount of Each Receipt this Period 25.00
 Memo Item

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

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

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

FOR LINE NUMBER: PAGE 143 OF 404
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. GRANADOS, RODOLFO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2181 JAMIESON AVE
 UNIT 2009
 City ALEXANDRIA State VA Zip Code 22314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 252.00

Date of Receipt 05 / 29 / 2020
Transaction ID : SA11AI.117914
 Amount of Each Receipt this Period 35.00
 Memo Item

B. GRANZIN, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1650 MCQUEENEY RD
 City NEW BRAUNFELS State TX Zip Code 78130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GRANZIN MEAT MKT Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 01 / 2020
Transaction ID : SA11AI.117933
 Amount of Each Receipt this Period 100.00
 Memo Item

C. GRANZIN, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1650 MCQUEENEY RD
 City NEW BRAUNFELS State TX Zip Code 78130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GRANZIN MEAT MKT Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 31 / 2020
Transaction ID : SA11AI.117934
 Amount of Each Receipt this Period 100.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 144 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. GRAVES, LEIGH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6400 PRICHARD RD
 City TUNICA State MS Zip Code 38676
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 208.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2020
Transaction ID : SA11AI.117940
 Amount of Each Receipt this Period
 104.48
 Memo Item

B. GREENLAW, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 535
 City FLORAL PARK State NY Zip Code 11002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 18 / 2020
Transaction ID : SA11AI.117987
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. GRIFFIN, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 117 COUNTY ROAD 661
 City ABILENE State TX Zip Code 79606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2020
Transaction ID : SA11AI.118034
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	254.48
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 145 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. GRIMES, CLAIRE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 144 PLEASANT GROVE RD
 City MCDONOUGH State GA Zip Code 30252
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.04

Date of Receipt **05 / 07 / 2020**
Transaction ID : SA11AI.118047
 Amount of Each Receipt this Period 20.00
 Memo Item

B. GRIMES, CLAIRE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 144 PLEASANT GROVE RD
 City MCDONOUGH State GA Zip Code 30252
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 208.04

Date of Receipt **05 / 13 / 2020**
Transaction ID : SA11AI.118048
 Amount of Each Receipt this Period 1.00
 Memo Item

C. GRIMES, CLAIRE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 144 PLEASANT GROVE RD
 City MCDONOUGH State GA Zip Code 30252
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 218.04

Date of Receipt **05 / 13 / 2020**
Transaction ID : SA11AI.118049
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	31.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 146 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. GRIMES, CLAIRE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 144 PLEASANT GROVE RD

City MCDONOUGH	State GA	Zip Code 30252
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
229.29

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		14		2020

Transaction ID : SA11AI.118050

Amount of Each Receipt this Period
11.25

Memo Item

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

Mailing Address 144 PLEASANT GROVE RD

City MCDONOUGH	State GA	Zip Code 30252
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.54

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		14		2020

Transaction ID : SA11AI.118051

Amount of Each Receipt this Period
11.25

Memo Item

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

Mailing Address 144 PLEASANT GROVE RD

City MCDONOUGH	State GA	Zip Code 30252
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
246.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		17		2020

Transaction ID : SA11AI.118052

Amount of Each Receipt this Period
5.52

Memo Item

SUBTOTAL of Receipts This Page (optional).....	28.02
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 147 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. GRIMES, CLAIRE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 144 PLEASANT GROVE RD

City MCDONOUGH	State GA	Zip Code 30252
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
256.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		29		2020

Transaction ID : SA11AI.118053

Amount of Each Receipt this Period
10.00

Memo Item

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

Mailing Address 144 PLEASANT GROVE RD

City MCDONOUGH	State GA	Zip Code 30252
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
286.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		29		2020

Transaction ID : SA11AI.118054

Amount of Each Receipt this Period
30.00

Memo Item

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

Mailing Address 144 PLEASANT GROVE RD

City MCDONOUGH	State GA	Zip Code 30252
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
296.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2020

Transaction ID : SA11AI.118055

Amount of Each Receipt this Period
10.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	50.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 148 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. GROFF, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1127 DRY POWDER CIR
 City MECHANICSBURG State PA Zip Code 17050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 05 / 20 / 2020
Transaction ID : SA11AI.118086
 Amount of Each Receipt this Period 35.00
 Memo Item

B. GRUNDHOFER, JERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1776 PARK AVE 4-131
 City PARK CITY State UT Zip Code 84060
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3041.98

Date of Receipt 05 / 20 / 2020
Transaction ID : SA11AI.118127
 Amount of Each Receipt this Period 1041.98
 Memo Item

C. GUERRERO, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 190632
 City HAWI State HI Zip Code 96719
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 25 / 2020
Transaction ID : SA11AI.118146
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1126.98
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 149 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. HAAS, GLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 880 OPEN SKY CT
 City ALLEN State TX Zip Code 75013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARAGIO SOLUTIONS Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2020
Transaction ID : SA11AI.118193
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. HAGEMAN, DEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 173
 City HERON State MT Zip Code 59844
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2020
Transaction ID : SA11AI.118231
 Amount of Each Receipt this Period
 1.00
 Memo Item

C. HAGEMAN, DEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 173
 City HERON State MT Zip Code 59844
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 402.11

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2020
Transaction ID : SA11AI.118232
 Amount of Each Receipt this Period
 21.15
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	122.15
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 150 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. HAGEMAN, DEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 173
 City HERON State MT Zip Code 59844
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.26

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2020
Transaction ID : SA11AI.118233
 Amount of Each Receipt this Period
 21.15
 Memo Item

B. HALE, SARAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 103 WASHINGTON ST
 City XENIA State OH Zip Code 45385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 13 / 2020
Transaction ID : SA11AI.118280
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. HALL, CHRISTINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2305 NORWAY MAPLE ST
 City LAS VEGAS State NV Zip Code 89117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 208.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2020
Transaction ID : SA11AI.118290
 Amount of Each Receipt this Period
 104.48
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	225.63
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 151 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. HALL, TODD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7335 E 17TH AVE
 City DENVER State CO Zip Code 80220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.73

Date of Receipt 05 / 08 / 2020
Transaction ID : SA11AI.118301
 Amount of Each Receipt this Period 260.73
 Memo Item

B. HAMILTON, EARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 105 WINTER FOREST DR APT 102
 City CANDLER State NC Zip Code 28715
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 28 / 2020
Transaction ID : SA11AI.118331
 Amount of Each Receipt this Period 100.00
 Memo Item

C. HAMILTON, EARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 105 WINTER FOREST DR APT 102
 City CANDLER State NC Zip Code 28715
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 05 / 29 / 2020
Transaction ID : SA11AI.118332
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	460.73
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 152 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. HAMMOND, PHILIP, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2440 BORDER LINKS DR
 City VISALIA State CA Zip Code 93291
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 05 / 05 / 2020
Transaction ID : SA11AI.118355
 Amount of Each Receipt this Period 500.00
 Memo Item

B. HARANG, GORDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1517 SAWMILL CREEK RD
 City SITKA State AK Zip Code 99835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARROWHEAD TRANS. INC. Occupation (for Individual) CORP. OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 05 / 11 / 2020
Transaction ID : SA11AI.118398
 Amount of Each Receipt this Period 100.00
 Memo Item

C. HARDAWAY, DEBRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 139 SADDLEHORN DR
 City WARNER ROBINS State GA Zip Code 31088
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 20 / 2020
Transaction ID : SA11AI.118399
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 153 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. HARDY, KARIN, S, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1590 KELLOGG BAY RD

City VERGENNES	State VT	Zip Code 05491-9070
-------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
222.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		09		2020

Transaction ID : SA11AI.118425

Amount of Each Receipt this Period
50.00

Memo Item

B. HARDY, KARIN, S, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1590 KELLOGG BAY RD

City VERGENNES	State VT	Zip Code 05491-9070
-------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
272.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		09		2020

Transaction ID : SA11AI.118426

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 7830 MANASOTA KEY ROAD

City ENGLEWOOD	State FL	Zip Code 34223
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
05		14		2020

Transaction ID : SA11AI.118435

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 154 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. HARRIS, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 38
 City LAKEBAY State WA Zip Code 98349
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NW FORWARDING Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 25 / 2020
Transaction ID : SA11AI.118474
 Amount of Each Receipt this Period 50.00
 Memo Item

B. HARRIS, DONNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1961 GARDENA PL
 City SAN DIEGO State CA Zip Code 92110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 18 / 2020
Transaction ID : SA11AI.118475
 Amount of Each Receipt this Period 100.00
 Memo Item

C. HARTMAN, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 800 SAND DAB DR
 City LAKE HAVASU CITY State AZ Zip Code 86404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 13 / 2020
Transaction ID : SA11AI.118512
 Amount of Each Receipt this Period 100.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 155 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

A. HARTNER, GARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 602 COLLEGE AVE

City LUTHERVILLE TIMONIUM	State MD	Zip Code 21093
------------------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		26		2020

Transaction ID : SA11AI.118522

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 16222 MONTEREY LN

City HUNTINGTON BEACH	State CA	Zip Code 92649
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
258.96

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		15		2020

Transaction ID : SA11AI.118559

Amount of Each Receipt this Period
104.48

Memo Item

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

Mailing Address 1901 QUAIL MEADOW RD

City LOS ALTOS	State CA	Zip Code 94024
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		17		2020

Transaction ID : SA11AI.118571

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	179.48
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 156 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. HAU, ADA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1901 QUAIL MEADOW RD
 City LOS ALTOS State CA Zip Code 94024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 05 / 21 / 2020
Transaction ID : SA11AI.118572
 Amount of Each Receipt this Period 25.00
 Memo Item

B. HAUG, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 725 9TH AVE #2506 SKYLINE
 City SEATTLE State WA Zip Code 98104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 19 / 2020
Transaction ID : SA11AI.118575
 Amount of Each Receipt this Period 100.00
 Memo Item

C. HAUSER, RAYMOND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 ARBON CT
 City CRETE State IL Zip Code 60417
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HAUSER, IZZO, PETRARCA, GLEASON AND ST Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 19 / 2020
Transaction ID : SA11AI.118581
 Amount of Each Receipt this Period 50.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 157 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. HAWKINS, GREGG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 113 SHADOW LAKE DRIVE
 City BUCKHEAD State GA Zip Code 30625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE SILVER MOON Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2020
Transaction ID : SA11AI.118589
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. HAWORTH, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 8435
 City HOBE SOUND State FL Zip Code 33475
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2020
Transaction ID : SA11AI.118604
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. HAYES, BEVERLY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31 RITCHIE RD
 City FULTON State NY Zip Code 13069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2020
Transaction ID : SA11AI.118608
 Amount of Each Receipt this Period
 50.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 158 OF 404
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. HAYS, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10008 POLO TRAIL AVE
 City BAKERSFIELD State CA Zip Code 93312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 29 / 2020
Transaction ID : SA11AI.118624
 Amount of Each Receipt this Period 100.00
 Memo Item

B. HEIRMAN, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 143 JUMPING BROOK RD
 City LINCROFT State NJ Zip Code 07738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 28 / 2020
Transaction ID : SA11AI.118674
 Amount of Each Receipt this Period 50.00
 Memo Item

C. HENNING, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3601 WYNGATE RD
 City DOVER State PA Zip Code 17315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DAHC Occupation (for Individual) IT SPECIALIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 17 / 2020
Transaction ID : SA11AI.118710
 Amount of Each Receipt this Period 50.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 159 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. HERMANN, DOUG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3315 FLATCREEK CIR
 City WICHITA State KS Zip Code 67205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 12 / 2020
Transaction ID : SA11AI.118748
 Amount of Each Receipt this Period 500.00
 Memo Item

B. HESS, ELAINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9647 S MOZART AVE
 City EVERGREEN PARK State IL Zip Code 60805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 214.64

Date of Receipt 05 / 14 / 2020
Transaction ID : SA11AI.118807
 Amount of Each Receipt this Period 30.00
 Memo Item

C. HESS, ELAINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9647 S MOZART AVE
 City EVERGREEN PARK State IL Zip Code 60805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 219.64

Date of Receipt 05 / 15 / 2020
Transaction ID : SA11AI.118808
 Amount of Each Receipt this Period 5.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 160 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. HESS, ELAINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9647 S MOZART AVE

City EVERGREEN PARK	State IL	Zip Code 60805
------------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
224.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		15		2020

Transaction ID : SA11AI.118809

Amount of Each Receipt this Period
5.00

Memo Item

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

Mailing Address 9647 S MOZART AVE

City EVERGREEN PARK	State IL	Zip Code 60805
------------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
249.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		15		2020

Transaction ID : SA11AI.118810

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 9647 S MOZART AVE

City EVERGREEN PARK	State IL	Zip Code 60805
------------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
274.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		15		2020

Transaction ID : SA11AI.118811

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	55.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 161 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. HESS, ELAINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9647 S MOZART AVE

City EVERGREEN PARK	State IL	Zip Code 60805
------------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.99

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		15		2020

Transaction ID : SA11AI.118812

Amount of Each Receipt this Period
26.35

Memo Item

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

Mailing Address 9647 S MOZART AVE

City EVERGREEN PARK	State IL	Zip Code 60805
------------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
327.34

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		15		2020

Transaction ID : SA11AI.118813

Amount of Each Receipt this Period
26.35

Memo Item

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

Mailing Address 4115 GUARDIAN ST

City SIMI VALLEY	State CA	Zip Code 93063
---------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
308.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		01		2020

Transaction ID : SA11AI.118850

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	152.70
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 162 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. HITCHCOCK, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4642 RIDGEWOOD CT
 City MORADA State CA Zip Code 95212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt 05 / 26 / 2020
Transaction ID : SA11AI.118923
 Amount of Each Receipt this Period 100.00
 Memo Item

B. HODGE, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2180 IDLEWILD RD
 City PALM BEACH GARDENS State FL Zip Code 33410-2598
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE WAYS BOATYARD LLC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 05 / 07 / 2020
Transaction ID : SA11AI.118948
 Amount of Each Receipt this Period 75.00
 Memo Item

C. HOLINKA, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14411 SHELTER LN
 City HAYMARKET State VA Zip Code 20169
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 05 / 05 / 2020
Transaction ID : SA11AI.119000
 Amount of Each Receipt this Period 150.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	325.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 163 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. HOLLIONOM, BOBBIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 450
 City CLIFF State NM Zip Code 88028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) RANCHER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2020
Transaction ID : SA11AI.119024
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. HOLLOWAY, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 921 MILL POND CT
 City NORTHVILLE State MI Zip Code 48167
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2020
Transaction ID : SA11AI.119030
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. HONG, HOWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 301 MAPLE AVE APT 222
 City NORTH PLAINFIELD State NJ Zip Code 07060
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2020
Transaction ID : SA11AI.119068
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 164 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 245 VINEYARD DR

City SALISBURY	State NC	Zip Code 28146
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.73

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	01	/	2020

Transaction ID : SA11AI.119134

Amount of Each Receipt this Period
260.73

Memo Item

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

Mailing Address 8 FLEETWOOD CIR

City MOON	State VA	Zip Code 23119
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MCKWITT LLC	Occupation (for Individual) MANAGER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	29	/	2020

Transaction ID : SA11AI.119143

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 276 MOUNT LUCAS RD

City PRINCETON	State NJ	Zip Code 08540
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SKYLINE TECHNOLOGY USA LLC	Occupation (for Individual) FOUNDER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
256.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	02	/	2020

Transaction ID : SA11AI.119197

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	410.73
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 165 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. HU, MARK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 276 MOUNT LUCAS RD

City PRINCETON	State NJ	Zip Code 08540
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SKYLINE TECHNOLOGY USA LLC	Occupation (for Individual) FOUNDER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
356.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		16		2020

Transaction ID : SA11AI.119198

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 276 MOUNT LUCAS RD

City PRINCETON	State NJ	Zip Code 08540
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SKYLINE TECHNOLOGY USA LLC	Occupation (for Individual) FOUNDER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
460.48

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		16		2020

Transaction ID : SA11AI.119199

Amount of Each Receipt this Period
104.48

Memo Item

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

Mailing Address 1610 BENT OAK LN

City VERO BEACH	State FL	Zip Code 32963
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2020

Transaction ID : SA11AI.119211

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	304.48
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 166 OF 404
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. HUDSON, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 28 HUDSON LN

City ALAMO	State TN	Zip Code 38001
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
927.00

Date of Receipt

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

Transaction ID : SA11AI.119234

Amount of Each Receipt this Period
45.00

Memo Item

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

Mailing Address 28 HUDSON LN

City ALAMO	State TN	Zip Code 38001
---------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
928.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		06		2020

Transaction ID : SA11AI.119235

Amount of Each Receipt this Period
1.00

Memo Item

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

Mailing Address 28 HUDSON LN

City ALAMO	State TN	Zip Code 38001
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
948.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		06		2020

Transaction ID : SA11AI.119236

Amount of Each Receipt this Period
20.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	66.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 167 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

A. HUDSON, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 28 HUDSON LN

City ALAMO	State TN	Zip Code 38001
---------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
978.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		06		2020

Transaction ID : SA11AI.119237

Amount of Each Receipt this Period
30.00

Memo Item

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

Mailing Address 28 HUDSON LN

City ALAMO	State TN	Zip Code 38001
---------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1013.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		06		2020

Transaction ID : SA11AI.119238

Amount of Each Receipt this Period
35.00

Memo Item

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

Mailing Address 28 HUDSON LN

City ALAMO	State TN	Zip Code 38001
---------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1038.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		09		2020

Transaction ID : SA11AI.119239

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	90.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 168 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. HUDSON, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 28 HUDSON LN

City ALAMO	State TN	Zip Code 38001
---------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1063.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2020

Transaction ID : SA11AI.119240

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 28 HUDSON LN

City ALAMO	State TN	Zip Code 38001
---------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1113.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		14		2020

Transaction ID : SA11AI.119241

Amount of Each Receipt this Period
50.00

Memo Item

C. HUFFMAN, JOHN, G, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 302 PRESQUE ISLE BLVD
UNIT 101

City ERIE	State PA	Zip Code 16505
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1147.35

Date of Receipt

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

Transaction ID : SA11AI.119247

Amount of Each Receipt this Period
20.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 169 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. HUFFMAN, JOHN, G, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 302 PRESQUE ISLE BLVD
 UNIT 101
 City ERIE State PA Zip Code 16505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1247.35

Date of Receipt 05 / 05 / 2020
Transaction ID : SA11AI.119248
 Amount of Each Receipt this Period 100.00
 Memo Item

B. HUFFMAN, JOHN, G, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 302 PRESQUE ISLE BLVD
 UNIT 101
 City ERIE State PA Zip Code 16505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1347.35

Date of Receipt 05 / 06 / 2020
Transaction ID : SA11AI.119249
 Amount of Each Receipt this Period 100.00
 Memo Item

C. HUFFMAN, JOHN, G, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 302 PRESQUE ISLE BLVD
 UNIT 101
 City ERIE State PA Zip Code 16505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1368.50

Date of Receipt 05 / 08 / 2020
Transaction ID : SA11AI.119250
 Amount of Each Receipt this Period 21.15
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	221.15
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 170 OF 404
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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

A. HUFFMAN, JOHN, G, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 302 PRESQUE ISLE BLVD
 UNIT 101
 City ERIE State PA Zip Code 16505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1389.65

Date of Receipt 05 / 08 / 2020
Transaction ID : SA11AI.119251
 Amount of Each Receipt this Period 21.15
 Memo Item

B. HUFFMAN, JOHN, G, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 302 PRESQUE ISLE BLVD
 UNIT 101
 City ERIE State PA Zip Code 16505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1394.65

Date of Receipt 05 / 10 / 2020
Transaction ID : SA11AI.119252
 Amount of Each Receipt this Period 5.00
 Memo Item

C. HUFFMAN, JOHN, G, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 302 PRESQUE ISLE BLVD
 UNIT 101
 City ERIE State PA Zip Code 16505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1400.17

Date of Receipt 05 / 10 / 2020
Transaction ID : SA11AI.119253
 Amount of Each Receipt this Period 5.52
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	31.67
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 171 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 302 PRESQUE ISLE BLVD
UNIT 101

City ERIE	State PA	Zip Code 16505
--------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1405.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2020

Transaction ID : SA11AI.119254

Amount of Each Receipt this Period
5.52

Memo Item

B. HUFFMAN, JOHN, G, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 302 PRESQUE ISLE BLVD
UNIT 101

City ERIE	State PA	Zip Code 16505
--------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1415.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2020

Transaction ID : SA11AI.119255

Amount of Each Receipt this Period
10.00

Memo Item

C. HUFFMAN, JOHN, G, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 302 PRESQUE ISLE BLVD
UNIT 101

City ERIE	State PA	Zip Code 16505
--------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1425.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2020

Transaction ID : SA11AI.119256

Amount of Each Receipt this Period
10.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	25.52
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 172 OF 404
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. HUFFMAN, JOHN, G, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 302 PRESQUE ISLE BLVD
 UNIT 101
 City ERIE State PA Zip Code 16505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1430.69

Date of Receipt 05 / 13 / 2020
Transaction ID : SA11AI.119257
 Amount of Each Receipt this Period 5.00
 Memo Item

B. HUFFMAN, JOHN, G, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 302 PRESQUE ISLE BLVD
 UNIT 101
 City ERIE State PA Zip Code 16505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1435.69

Date of Receipt 05 / 13 / 2020
Transaction ID : SA11AI.119258
 Amount of Each Receipt this Period 5.00
 Memo Item

C. HUFFMAN, JOHN, G, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 302 PRESQUE ISLE BLVD
 UNIT 101
 City ERIE State PA Zip Code 16505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1485.69

Date of Receipt 05 / 14 / 2020
Transaction ID : SA11AI.119259
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 60.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 173 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. HULSE, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 47124 W ESCUDA DR
 City GLENDALE State AZ Zip Code 85308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2020
Transaction ID : SA11AI.119306
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. IGNASIAK, KATHERINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17595 CALLEN AVE
 City KENT CITY State MI Zip Code 49330
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ORCHARD HILL MECHANICAL Occupation (for Individual) OFFICE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2020
Transaction ID : SA11AI.119442
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. IRBY, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 808 W PROSPECT RD #309
 City FORT COLLINS State CO Zip Code 80526
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 03 / 2020
Transaction ID : SA11AI.119463
 Amount of Each Receipt this Period
 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	700.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 174 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. JENSEN, CECELIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 41110 N RIVER BEND RD

City PHOENIX	State AZ	Zip Code 85086
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		25		2020

Transaction ID : SA11AI.119678

Amount of Each Receipt this Period
100.00

Memo Item

B. JOBE, RENEE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8185 E ALAMEDA RD

City SCOTTSDALE	State AZ	Zip Code 85255
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		21		2020

Transaction ID : SA11AI.119704

Amount of Each Receipt this Period
500.00

Memo Item

C. JOHNSON, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5658 34TH AVE SW

City SEATTLE	State WA	Zip Code 98126
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AMERICAN CANCER SOCIETY	Occupation (for Individual) ACCOUNTANT
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
218.31

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		15		2020

Transaction ID : SA11AI.119758

Amount of Each Receipt this Period
26.35

Memo Item

SUBTOTAL of Receipts This Page (optional).....	626.35
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 175 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. JOHNSON, MARY, K, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 908 SAN JOSE DR SE
 City GRAND RAPIDS State MI Zip Code 49506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) ARTWORK
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.73

Date of Receipt 05 / 15 / 2020
Transaction ID : SA11AI.119790
 Amount of Each Receipt this Period 50.00
 Memo Item

B. JOHNSON, MARY, K, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 908 SAN JOSE DR SE
 City GRAND RAPIDS State MI Zip Code 49506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) ARTWORK
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.73

Date of Receipt 05 / 15 / 2020
Transaction ID : SA11AI.119791
 Amount of Each Receipt this Period 50.00
 Memo Item

C. JOHNSON, MARY, K, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 908 SAN JOSE DR SE
 City GRAND RAPIDS State MI Zip Code 49506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) ARTWORK
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.73

Date of Receipt 05 / 15 / 2020
Transaction ID : SA11AI.119792
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	105.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 176 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. JOHNSON, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14621 OLD QUARRY RD
 City EXCELSIOR SPRINGS State MO Zip Code 64024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FLOOR & DECOR Occupation (for Individual) EXEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 13 / 2020
Transaction ID : SA11AI.119803
 Amount of Each Receipt this Period 250.00
 Memo Item

B. JOHNSON, ROBERT, WOOD, , IV
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 610 FIFTH AVE SECOND FL
 City NEW YORK State NY Zip Code 10020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US DEPT OF STATE Occupation (for Individual) US AMBASSADOR TO THE UK
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000000.00

Date of Receipt 05 / 12 / 2020
Transaction ID : SA11AI.119807
 Amount of Each Receipt this Period 1000000.00
 Memo Item

C. JOHNSON, SHEILA, B, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4636 HARLEY AVE
 City FORT WORTH State TX Zip Code 76107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 667.00

Date of Receipt 05 / 01 / 2020
Transaction ID : SA11AI.119818
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1000350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 177 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. JOHNSON, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14343 HARBOUR LINKS CT
 UNIT 22B
 City FORT MYERS State FL Zip Code 33908
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 501.00

Date of Receipt 05 / 18 / 2020
Transaction ID : SA11AI.119823
 Amount of Each Receipt this Period 100.00
 Memo Item

B. JOHNSON, TAMARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2234 E 900 S
 #24
 City SAINT GEORGE State UT Zip Code 84790
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 05 / 15 / 2020
Transaction ID : SA11AI.119824
 Amount of Each Receipt this Period 50.00
 Memo Item

C. JOHNSON, VANESSA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1348 S AVENIDA CONALEA
 City TUCSON State AZ Zip Code 85748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHESTNUT BUILDING & DESIGN Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 13 / 2020
Transaction ID : SA11AI.119828
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 178 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. JOHNSTON, JIMMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 18279

City CORPUS CHRISTI	State TX	Zip Code 78480
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2020
Transaction ID : SA11AI.119835

Amount of Each Receipt this Period
250.00

Memo Item

B. JONES, BARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3800 CLOVERDALE DR

City TYLER	State TX	Zip Code 75701
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2020
Transaction ID : SA11AI.119858

Amount of Each Receipt this Period
250.00

Memo Item

C. JONES, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3151 KINGSTREE CT

City DUBLIN	State OH	Zip Code 43017
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2020
Transaction ID : SA11AI.119890

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 179 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. JORGENSEN, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 SCARBOROUGH ST
 City HARTFORD State CT Zip Code 06105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 208.96

Date of Receipt 05 / 08 / 2020
Transaction ID : SA11AI.119934
 Amount of Each Receipt this Period 104.48
 Memo Item

B. JUREK, FLORENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 8134
 City NEW FAIRFIELD State CT Zip Code 06812
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 368.00

Date of Receipt 05 / 15 / 2020
Transaction ID : SA11AI.119979
 Amount of Each Receipt this Period 5.00
 Memo Item

C. JUREK, FLORENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 8134
 City NEW FAIRFIELD State CT Zip Code 06812
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 373.00

Date of Receipt 05 / 15 / 2020
Transaction ID : SA11AI.119980
 Amount of Each Receipt this Period 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	114.48
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 180 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. JUREK, FLORENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 8134

City NEW FAIRFIELD	State CT	Zip Code 06812
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
378.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2020
Transaction ID : SA11AI.119981

Amount of Each Receipt this Period
 5.00

Memo Item

B. JUSTUS, JARVIS, GUY, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4311 PLEASANT ST

City LA VERNE	State CA	Zip Code 91750
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
-2800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 10 / 2020
Transaction ID : SA11AI.129658

Amount of Each Receipt this Period
 -2800.00

Memo Item
CHARGEBACK

C. KAMATH, DEEPAK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6426 EVANS CREEK DR

City RENO	State NV	Zip Code 89519
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNEMPLOYED	Occupation (for Individual) UNEMPLOYED
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2020
Transaction ID : SA11AI.120001

Amount of Each Receipt this Period
 250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	- 2545.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 181 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. KEHRT, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38 STONEWOOD CREEK CT
 City DALLAS State GA Zip Code 30132
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 515.00

Date of Receipt 05 / 08 / 2020
Transaction ID : SA11AI.120097
 Amount of Each Receipt this Period 25.00
 Memo Item

B. KEHRT, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38 STONEWOOD CREEK CT
 City DALLAS State GA Zip Code 30132
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 05 / 11 / 2020
Transaction ID : SA11AI.120098
 Amount of Each Receipt this Period 35.00
 Memo Item

C. KEHRT, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38 STONEWOOD CREEK CT
 City DALLAS State GA Zip Code 30132
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 585.00

Date of Receipt 05 / 14 / 2020
Transaction ID : SA11AI.120099
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 182 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. KEHRT, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38 STONEWOOD CREEK CT
 City DALLAS State GA Zip Code 30132
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt 05 / 22 / 2020
Transaction ID : SA11AI.120100
 Amount of Each Receipt this Period 10.00
 Memo Item

B. KEHRT, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38 STONEWOOD CREEK CT
 City DALLAS State GA Zip Code 30132
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 620.00

Date of Receipt 05 / 23 / 2020
Transaction ID : SA11AI.120101
 Amount of Each Receipt this Period 25.00
 Memo Item

C. KEHRT, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38 STONEWOOD CREEK CT
 City DALLAS State GA Zip Code 30132
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 630.00

Date of Receipt 05 / 30 / 2020
Transaction ID : SA11AI.120102
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 45.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 183 OF 404
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. KENDT, NORMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1504 HURLINGHAM CT
 City LOUISVILLE State KY Zip Code 20245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 10 / 2020
Transaction ID : SA11AI.120170
 Amount of Each Receipt this Period 100.00
 Memo Item

B. KEOWN, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8856 STONEPOINTE LN
 City JOHNSTON State IA Zip Code 50131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 06 / 2020
Transaction ID : SA11AI.120197
 Amount of Each Receipt this Period 45.00
 Memo Item

C. KETCHUM, WILLIAM, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6260 CHENOWETH RD
 City THE DALLES State OR Zip Code 97058
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 22 / 2020
Transaction ID : SA11AI.120224
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	195.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 184 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. KING, BRENT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1997 ROSALIE LAKE RD
 City LAKE WALES State FL Zip Code 33898
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 21 / 2020
Transaction ID : SA11AI.120292
 Amount of Each Receipt this Period 50.00
 Memo Item

B. KING, JULIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 513 WOODLAND DR
 City HARTSVILLE State SC Zip Code 29550
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 05 / 15 / 2020
Transaction ID : SA11AI.120301
 Amount of Each Receipt this Period 450.00
 Memo Item

C. KISER, RICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2659 OLD GALLANT RD
 City GALLANT State AL Zip Code 35972
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 03 / 2020
Transaction ID : SA11AI.120340
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 185 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. KISTLER, BARNEY, , ,		Date of Receipt MM / DD / YYYY 05 / 02 / 2020 Transaction ID : SA11AI.120343
Mailing Address 1134 LAURELVIEW DR		Amount of Each Receipt this Period 250.00
City LATROBE	State PA	Zip Code 15650
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. KLEIN, MICHAEL, , ,		Date of Receipt MM / DD / YYYY 05 / 29 / 2020 Transaction ID : SA11AI.120357
Mailing Address 5220 KLEES MILL RD		Amount of Each Receipt this Period 500.00
City SYKESVILLE	State MD	Zip Code 21784
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) CHARLES A. KLEIN & SONS INC.	Occupation (for Individual) MECHANICAL CONTRACTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2056.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. KLING, THOMAS, , ,		Date of Receipt MM / DD / YYYY 05 / 18 / 2020 Transaction ID : SA11AI.120379
Mailing Address 8733 E AMELIA AVE #9		Amount of Each Receipt this Period 50.00
City SCOTTSDALE	State AZ	Zip Code 85251
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional).....▶	800.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 186 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. KLISARES, PETE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6634 LOWER LAKE DR
 City WESTERVILLE State OH Zip Code 43082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 284.48

Date of Receipt 05 / 21 / 2020
Transaction ID : SA11AI.120384
 Amount of Each Receipt this Period 90.00
 Memo Item

B. KOFFLER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 131 SKINNER RD
 City INDEPENDENCE State MO Zip Code 64055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GTA Occupation (for Individual) BUS DRIVER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ - 35.00

Date of Receipt 05 / 01 / 2020
Transaction ID : SA11AI.129660
 Amount of Each Receipt this Period - 35.00
 Memo Item
CHARGEBACK

C. KOFFLER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 131 SKINNER RD
 City INDEPENDENCE State MO Zip Code 64055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GTA Occupation (for Individual) BUS DRIVER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ - 135.00

Date of Receipt 05 / 01 / 2020
Transaction ID : SA11AI.129661
 Amount of Each Receipt this Period - 100.00
 Memo Item
CHARGEBACK

SUBTOTAL of Receipts This Page (optional)..... ▶ - 45.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 187 OF 404
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. KOFFLER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 131 SKINNER RD
 City INDEPENDENCE State MO Zip Code 64055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 GTA BUS DRIVER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 - 185.00

Date of Receipt
 05 / 01 / 2020
Transaction ID : SA11AI.129662
 Amount of Each Receipt this Period
 - 50.00
 Memo Item
CHARGEBACK

B. KOFINAS, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 WINSTON DR
 APT PH-HN
 City CLIFFSIDE PARK State NJ Zip Code 07010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 SELF-EMPLOYED PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 725.00

Date of Receipt
 05 / 13 / 2020
Transaction ID : SA11AI.120449
 Amount of Each Receipt this Period
 150.00
 Memo Item

C. KOPMEIER, MARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46 BLUFF VIEW TER
 City CROSSVILLE State TN Zip Code 38558
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 RETIRED RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 05 / 22 / 2020
Transaction ID : SA11AI.120508
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 188 OF 404
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. KOPPEN, ECKHARDT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 124
 City TUCSON State AZ Zip Code 85702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MINING CONTRACTORS Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 05 / 14 / 2020
Transaction ID : SA11AI.120509
 Amount of Each Receipt this Period 100.00
 Memo Item

B. KORNEGAY, GLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 290 CEDAR RIDGE DRIVE
 City MURPHY State NC Zip Code 28906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 589.96

Date of Receipt 05 / 01 / 2020
Transaction ID : SA11AI.120510
 Amount of Each Receipt this Period 4.99
 Memo Item

C. KORNEGAY, GLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 290 CEDAR RIDGE DRIVE
 City MURPHY State NC Zip Code 28906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 619.96

Date of Receipt 05 / 10 / 2020
Transaction ID : SA11AI.120511
 Amount of Each Receipt this Period 30.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	134.99
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 189 OF 404
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. KORNEGAY, GLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 290 CEDAR RIDGE DRIVE
 City MURPHY State NC Zip Code 28906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 620.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2020
Transaction ID : SA11AI.120512
 Amount of Each Receipt this Period
 1.00
 Memo Item

B. KORNEGAY, GLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 290 CEDAR RIDGE DRIVE
 City MURPHY State NC Zip Code 28906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2020
Transaction ID : SA11AI.120513
 Amount of Each Receipt this Period
 5.00
 Memo Item

C. KORNEGAY, GLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 290 CEDAR RIDGE DRIVE
 City MURPHY State NC Zip Code 28906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 652.31

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2020
Transaction ID : SA11AI.120514
 Amount of Each Receipt this Period
 26.35
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 32.35
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 190 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. KORNEGAY, GLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 290 CEDAR RIDGE DRIVE
 City MURPHY State NC Zip Code 28906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 678.66

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2020
Transaction ID : SA11AI.120515
 Amount of Each Receipt this Period 26.35
 Memo Item

B. KORNEGAY, GLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 290 CEDAR RIDGE DRIVE
 City MURPHY State NC Zip Code 28906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 705.01

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2020
Transaction ID : SA11AI.120516
 Amount of Each Receipt this Period 26.35
 Memo Item

C. KORNEGAY, GLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 290 CEDAR RIDGE DRIVE
 City MURPHY State NC Zip Code 28906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 706.01

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2020
Transaction ID : SA11AI.120517
 Amount of Each Receipt this Period 1.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	53.70
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 191 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. KORNEGAY, GLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 290 CEDAR RIDGE DRIVE
 City MURPHY State NC Zip Code 28906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 711.00

Date of Receipt 05 / 24 / 2020
Transaction ID : SA11AI.120518
 Amount of Each Receipt this Period 4.99
 Memo Item

B. KORNEGAY, GLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 290 CEDAR RIDGE DRIVE
 City MURPHY State NC Zip Code 28906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 716.00

Date of Receipt 05 / 24 / 2020
Transaction ID : SA11AI.120519
 Amount of Each Receipt this Period 5.00
 Memo Item

C. KORNEGAY, GLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 290 CEDAR RIDGE DRIVE
 City MURPHY State NC Zip Code 28906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 737.15

Date of Receipt 05 / 24 / 2020
Transaction ID : SA11AI.120520
 Amount of Each Receipt this Period 21.15
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	31.14
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 192 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. KORNEGAY, GLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 290 CEDAR RIDGE DRIVE
 City MURPHY State NC Zip Code 28906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 762.15

Date of Receipt 05 / 24 / 2020
Transaction ID : SA11AI.120521
 Amount of Each Receipt this Period 25.00
 Memo Item

B. KORNEGAY, GLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 290 CEDAR RIDGE DRIVE
 City MURPHY State NC Zip Code 28906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 787.15

Date of Receipt 05 / 24 / 2020
Transaction ID : SA11AI.120522
 Amount of Each Receipt this Period 25.00
 Memo Item

C. KORNEGAY, GLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 290 CEDAR RIDGE DRIVE
 City MURPHY State NC Zip Code 28906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 812.15

Date of Receipt 05 / 24 / 2020
Transaction ID : SA11AI.120523
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 193 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. KOSTYRA, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10 SEAGATE DR

City NAPLES	State FL	Zip Code 34103
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
226.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2020

Transaction ID : SA11AI.120531

Amount of Each Receipt this Period
26.35

Memo Item

B. KOTCH, PAUL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1305 PENNY LN

City KELLER	State TX	Zip Code 76248
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PS DEVELOPMENT	Occupation (for Individual) PRESIDENT
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2020

Transaction ID : SA11AI.120534

Amount of Each Receipt this Period
250.00

Memo Item

C. KRAFVE, ALLAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1088 STATE RD 128

City GLENWOOD CITY	State WI	Zip Code 54013
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
206.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		07		2020

Transaction ID : SA11AI.120557

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	326.35
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 194 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. KRISTEDJA, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12142 AFTON LN
 City NORTH TUSTIN State CA Zip Code 92705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KPRS Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 16 / 2020
Transaction ID : SA11AI.120575
 Amount of Each Receipt this Period 100.00
 Memo Item

B. KRUSE, RALPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 812 OREGON WAY
 City WOODBURN State OR Zip Code 97071
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 20 / 2020
Transaction ID : SA11AI.120594
 Amount of Each Receipt this Period 100.00
 Memo Item

C. KULLIJIAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5803 BRIDLEWOOD DR
 City RICHMOND State TX Zip Code 77469
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1246.15

Date of Receipt 05 / 10 / 2020
Transaction ID : SA11AI.120634
 Amount of Each Receipt this Period 21.15
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	221.15
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 195 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. KULLIJIAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5803 BRIDLEWOOD DR
 City RICHMOND State TX Zip Code 77469
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1267.30

Date of Receipt 05 / 10 / 2020
Transaction ID : SA11AI.120635
 Amount of Each Receipt this Period 21.15
 Memo Item

B. KULLIJIAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5803 BRIDLEWOOD DR
 City RICHMOND State TX Zip Code 77469
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1277.30

Date of Receipt 05 / 11 / 2020
Transaction ID : SA11AI.120636
 Amount of Each Receipt this Period 10.00
 Memo Item

C. KUMARAN, SAM, K, CAPT,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7907 S GESSNER RD
 City HOUSTON State TX Zip Code 77036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 411.42

Date of Receipt 05 / 19 / 2020
Transaction ID : SA11AI.129663
 Amount of Each Receipt this Period - 10.00
 Memo Item
CHARGEBACK

SUBTOTAL of Receipts This Page (optional).....	21.15
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 196 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. KUMARAN, SAM, K, CAPT,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7907 S GESSNER RD

City HOUSTON	State TX	Zip Code 77036
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
401.42

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2020

Transaction ID : SA11AI.129664

Amount of Each Receipt this Period
 - 10.00

Memo Item
CHARGEBACK

B. KUMARAN, SAM, K, CAPT,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7907 S GESSNER RD

City HOUSTON	State TX	Zip Code 77036
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
392.42

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2020

Transaction ID : SA11AI.129665

Amount of Each Receipt this Period
 - 9.00

Memo Item
CHARGEBACK

C. KUMARAN, SAM, K, CAPT,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7907 S GESSNER RD

City HOUSTON	State TX	Zip Code 77036
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
383.42

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2020

Transaction ID : SA11AI.129666

Amount of Each Receipt this Period
 - 9.00

Memo Item
CHARGEBACK

SUBTOTAL of Receipts This Page (optional).....	- 28.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 197 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. KUMARAN, SAM, K, CAPT,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7907 S GESSNER RD

City HOUSTON	State TX	Zip Code 77036
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
374.42

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2020

Transaction ID : SA11AI.129667

Amount of Each Receipt this Period

- 9.00

Memo Item
CHARGEBACK

B. KUMARAN, SAM, K, CAPT,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7907 S GESSNER RD

City HOUSTON	State TX	Zip Code 77036
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
365.42

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2020

Transaction ID : SA11AI.129668

Amount of Each Receipt this Period

- 9.00

Memo Item
CHARGEBACK

C. KUMARAN, SAM, K, CAPT,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7907 S GESSNER RD

City HOUSTON	State TX	Zip Code 77036
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
356.42

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2020

Transaction ID : SA11AI.129669

Amount of Each Receipt this Period

- 9.00

Memo Item
CHARGEBACK

SUBTOTAL of Receipts This Page (optional).....▶	- 27.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 198 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. KUMARAN, SAM, K, CAPT,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7907 S GESSNER RD

City HOUSTON	State TX	Zip Code 77036
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
347.42

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2020

Transaction ID : SA11AI.129670

Amount of Each Receipt this Period
- 9.00

Memo Item
CHARGEBACK

B. KUMARAN, SAM, K, CAPT,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7907 S GESSNER RD

City HOUSTON	State TX	Zip Code 77036
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
338.42

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2020

Transaction ID : SA11AI.129671

Amount of Each Receipt this Period
- 9.00

Memo Item
CHARGEBACK

C. KUMARAN, SAM, K, CAPT,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7907 S GESSNER RD

City HOUSTON	State TX	Zip Code 77036
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
329.42

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2020

Transaction ID : SA11AI.129672

Amount of Each Receipt this Period
- 9.00

Memo Item
CHARGEBACK

SUBTOTAL of Receipts This Page (optional).....▶	- 27.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 199 OF 404
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. KUMARAN, SAM, K, CAPT,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7907 S GESSNER RD
 City HOUSTON State TX Zip Code 77036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.42

Date of Receipt 05 / 19 / 2020
Transaction ID : SA11AI.129673
 Amount of Each Receipt this Period - 9.00
 Memo Item
CHARGEBACK

B. KUMARAN, SAM, K, CAPT,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7907 S GESSNER RD
 City HOUSTON State TX Zip Code 77036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 311.43

Date of Receipt 05 / 19 / 2020
Transaction ID : SA11AI.129674
 Amount of Each Receipt this Period - 8.99
 Memo Item
CHARGEBACK

C. KUMARAN, SAM, K, CAPT,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7907 S GESSNER RD
 City HOUSTON State TX Zip Code 77036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 306.43

Date of Receipt 05 / 19 / 2020
Transaction ID : SA11AI.129675
 Amount of Each Receipt this Period - 5.00
 Memo Item
CHARGEBACK

SUBTOTAL of Receipts This Page (optional)..... ▶ - 22.99
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 200 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. KUMARAN, SAM, K, CAPT,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7907 S GESSNER RD

City HOUSTON	State TX	Zip Code 77036
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
301.43

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2020

Transaction ID : SA11AI.129676

Amount of Each Receipt this Period
 - 5.00

Memo Item
CHARGEBACK

B. KUMARAN, SAM, K, CAPT,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7907 S GESSNER RD

City HOUSTON	State TX	Zip Code 77036
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
296.43

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2020

Transaction ID : SA11AI.129677

Amount of Each Receipt this Period
 - 5.00

Memo Item
CHARGEBACK

C. KUMARAN, SAM, K, CAPT,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7907 S GESSNER RD

City HOUSTON	State TX	Zip Code 77036
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
291.43

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2020

Transaction ID : SA11AI.129678

Amount of Each Receipt this Period
 - 5.00

Memo Item
CHARGEBACK

SUBTOTAL of Receipts This Page (optional).....	- 15.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 201 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. KUMARAN, SAM, K, CAPT,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7907 S GESSNER RD

City HOUSTON	State TX	Zip Code 77036
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
286.43

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2020

Transaction ID : SA11AI.129679

Amount of Each Receipt this Period
- 5.00

Memo Item
CHARGEBACK

B. KUMARAN, SAM, K, CAPT,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7907 S GESSNER RD

City HOUSTON	State TX	Zip Code 77036
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
281.43

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2020

Transaction ID : SA11AI.129680

Amount of Each Receipt this Period
- 5.00

Memo Item
CHARGEBACK

C. KUMARAN, SAM, K, CAPT,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7907 S GESSNER RD

City HOUSTON	State TX	Zip Code 77036
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
276.43

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2020

Transaction ID : SA11AI.129681

Amount of Each Receipt this Period
- 5.00

Memo Item
CHARGEBACK

SUBTOTAL of Receipts This Page (optional).....▶	- 15.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 202 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. KUMARAN, SAM, K, CAPT,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7907 S GESSNER RD

City HOUSTON	State TX	Zip Code 77036
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.43

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2020

Transaction ID : SA11AI.129682

Amount of Each Receipt this Period
- 1.00

Memo Item
CHARGEBACK

B. KUMARAN, SAM, K, CAPT,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7907 S GESSNER RD

City HOUSTON	State TX	Zip Code 77036
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
274.43

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2020

Transaction ID : SA11AI.129683

Amount of Each Receipt this Period
- 1.00

Memo Item
CHARGEBACK

C. KUMARAN, SAM, K, CAPT,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7907 S GESSNER RD

City HOUSTON	State TX	Zip Code 77036
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
273.43

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2020

Transaction ID : SA11AI.129684

Amount of Each Receipt this Period
- 1.00

Memo Item
CHARGEBACK

SUBTOTAL of Receipts This Page (optional).....▶	- 3.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 203 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. KUMARAN, SAM, K, CAPT,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7907 S GESSNER RD

City HOUSTON	State TX	Zip Code 77036
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
272.43

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2020

Transaction ID : SA11AI.129685

Amount of Each Receipt this Period
- 1.00

Memo Item
CHARGEBACK

B. KUMARAN, SAM, K, CAPT,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7907 S GESSNER RD

City HOUSTON	State TX	Zip Code 77036
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
271.43

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2020

Transaction ID : SA11AI.129686

Amount of Each Receipt this Period
- 1.00

Memo Item
CHARGEBACK

C. KUMARAN, SAM, K, CAPT,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7907 S GESSNER RD

City HOUSTON	State TX	Zip Code 77036
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
260.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2020

Transaction ID : SA11AI.129687

Amount of Each Receipt this Period
- 10.73

Memo Item
CHARGEBACK

SUBTOTAL of Receipts This Page (optional).....▶	- 12.73
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 204 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. KUMARAN, SAM, K, CAPT,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7907 S GESSNER RD

City HOUSTON	State TX	Zip Code 77036
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
249.97

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2020

Transaction ID : SA11AI.129688

Amount of Each Receipt this Period
- 10.73

Memo Item
CHARGEBACK

B. KUMARAN, SAM, K, CAPT,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7907 S GESSNER RD

City HOUSTON	State TX	Zip Code 77036
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
239.24

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2020

Transaction ID : SA11AI.129689

Amount of Each Receipt this Period
- 10.73

Memo Item
CHARGEBACK

C. KUMARAN, SAM, K, CAPT,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7907 S GESSNER RD

City HOUSTON	State TX	Zip Code 77036
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
228.52

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2020

Transaction ID : SA11AI.129690

Amount of Each Receipt this Period
- 10.72

Memo Item
CHARGEBACK

SUBTOTAL of Receipts This Page (optional).....▶	- 32.18
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 205 OF 404
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. KUMARAN, SAM, K, CAPT,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7907 S GESSNER RD

City HOUSTON	State TX	Zip Code 77036
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
217.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2020

Transaction ID : SA11AI.129691

Amount of Each Receipt this Period

- 10.72

Memo Item
CHARGEBACK

B. KUMARAN, SAM, K, CAPT,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7907 S GESSNER RD

City HOUSTON	State TX	Zip Code 77036
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
207.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2020

Transaction ID : SA11AI.129692

Amount of Each Receipt this Period

- 10.00

Memo Item
CHARGEBACK

C. KYTLE, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1313 MEADOW LN

City SULPHUR	State LA	Zip Code 70663
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
223.59

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		26		2020

Transaction ID : SA11AI.120683

Amount of Each Receipt this Period

30.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	9.28
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 206 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. LACOUR, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 SAGINAW TRL
 City SHELTON State CT Zip Code 06484
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 05 / 11 / 2020
Transaction ID : SA11AI.120699
 Amount of Each Receipt this Period 35.00
 Memo Item

B. LAHA, IRMA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8214 PEPPERVINE CT
 City CONROE State TX Zip Code 77385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 22 / 2020
Transaction ID : SA11AI.120722
 Amount of Each Receipt this Period 50.00
 Memo Item

C. LA MONTE, CLIFFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7840 EL CAJON BLVD
 City LA MESA State CA Zip Code 91942
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) C.W. LA MONTE CO, INC Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 30 / 2020
Transaction ID : SA11AI.120684
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 207 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. LANNERT, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 106 SHORE OAKS CT
 City LAKEWAY State TX Zip Code 78738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2020
Transaction ID : SA11AI.120835
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. LCKE, ZELDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7807 TINA CT
 City LOS MOLINOS State CA Zip Code 96055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2020
Transaction ID : SA11AI.120955
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. LEACH, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2485 RUE DU JARDIN
 City NAPLES State FL Zip Code 34105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2020
Transaction ID : SA11AI.120977
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 208 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. LEE, ELEANOR, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1930 W RIVER BEND CT

City MEQUON	State WI	Zip Code 53092
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1050.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		05		2020

Transaction ID : SA11AI.121014

Amount of Each Receipt this Period
250.00

Memo Item

B. LEE, ELEANOR, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1930 W RIVER BEND CT

City MEQUON	State WI	Zip Code 53092
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2020

Transaction ID : SA11AI.121015

Amount of Each Receipt this Period
100.00

Memo Item

C. LEE, ELEANOR, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1930 W RIVER BEND CT

City MEQUON	State WI	Zip Code 53092
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		14		2020

Transaction ID : SA11AI.121016

Amount of Each Receipt this Period
200.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 209 OF 404
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. LEHN, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5393 W FAIRVIEW BLVD #4
 City LOS ANGELES State CA Zip Code 90056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 05 / 04 / 2020
Transaction ID : SA11AI.121044
 Amount of Each Receipt this Period 50.00
 Memo Item

B. LENERVILLE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4929 W 134TH ST
 City ADELANTO State CA Zip Code 90250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 03 / 2020
Transaction ID : SA11AI.121081
 Amount of Each Receipt this Period 100.00
 Memo Item

C. LEWIS, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6130 MUNCASTER MILL RD
 City DERWOOD State MD Zip Code 20855
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 06 / 2020
Transaction ID : SA11AI.121184
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 210 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. LILLY, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3507 WOODLAND POINTE DR
 City SAINT JOSEPH State MO Zip Code 64506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ST JOSEPH BEVERAGE Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 25 / 2020
Transaction ID : SA11AI.121232
 Amount of Each Receipt this Period 100.00
 Memo Item

B. LINDAHL, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 502 RIVER POINTE DR
 City CONROE State TX Zip Code 77304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 05 / 13 / 2020
Transaction ID : SA11AI.121260
 Amount of Each Receipt this Period 25.00
 Memo Item

C. LINDSLEY, SHIRLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9718 THERRELL DR
 City HOUSTON State TX Zip Code 77064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 238.98

Date of Receipt 05 / 01 / 2020
Transaction ID : SA11AI.121279
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 211 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LINDSLEY, SHIRLEY, , ,

Mailing Address **9718 THERRELL DR**

City HOUSTON	State TX	Zip Code 77064
------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
338.98

Date of Receipt
05 / 01 / 2020

Transaction ID : SA11AI.121280

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LINDSLEY, SHIRLEY, , ,

Mailing Address **9718 THERRELL DR**

City HOUSTON	State TX	Zip Code 77064
------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
438.98

Date of Receipt
05 / 01 / 2020

Transaction ID : SA11AI.121281

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LINDSLEY, SHIRLEY, , ,

Mailing Address **9718 THERRELL DR**

City HOUSTON	State TX	Zip Code 77064
------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
538.98

Date of Receipt
05 / 01 / 2020

Transaction ID : SA11AI.121282

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 212 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. LINDSLEY, SHIRLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9718 THERRELL DR
 City HOUSTON State TX Zip Code 77064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 638.98

Date of Receipt 05 / 01 / 2020
Transaction ID : SA11AI.121283
 Amount of Each Receipt this Period 100.00
 Memo Item

B. LINDSTROM, KEITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 438 DEER RUN DR
 City CENTRAL SQUARE State NY Zip Code 13036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 512.00

Date of Receipt 05 / 09 / 2020
Transaction ID : SA11AI.121285
 Amount of Each Receipt this Period 25.00
 Memo Item

C. LOBNER, KEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5420 SAINT ANTON CT
 City CARMICHAEL State CA Zip Code 95608
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 14 / 2020
Transaction ID : SA11AI.121346
 Amount of Each Receipt this Period 45.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	170.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 213 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. LORANGER, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4804 199TH ST NE
 City ARLINGTON State WA Zip Code 98223-6364
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNIVERSITY OF WASHINGTON Occupation (for Individual) SOFTWARE ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 05 / 23 / 2020
Transaction ID : SA11AI.121407
 Amount of Each Receipt this Period 40.00
 Memo Item

B. LORENZO, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 740 E WALKER ST
 City ORLAND State CA Zip Code 95963
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 05 / 22 / 2020
Transaction ID : SA11AI.121414
 Amount of Each Receipt this Period 100.00
 Memo Item

C. LOSCHIAVO, JON, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 31181
 City FORT GREELY State AK Zip Code 99731
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DOD Occupation (for Individual) PROGRAM ANALYST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 02 / 2020
Transaction ID : SA11AI.121419
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	640.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 214 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. LOZANO, JOSE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2422 S MYSTIC MEADOW
 City HOUSTON State TX Zip Code 77021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2020
Transaction ID : SA11AI.121468
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. LUCH, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 194
 City CARMEL BY THE SEA State CA Zip Code 93921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 236.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2020
Transaction ID : SA11AI.121477
 Amount of Each Receipt this Period
 5.00
 Memo Item

C. LUCH, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 194
 City CARMEL BY THE SEA State CA Zip Code 93921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 336.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2020
Transaction ID : SA11AI.121478
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	155.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 215 OF 404
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. LUCH, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 194
 City CARMEL BY THE SEA State CA Zip Code 93921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 436.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2020
Transaction ID : SA11AI.121479
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. LUCH, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 194
 City CARMEL BY THE SEA State CA Zip Code 93921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 440.99

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2020
Transaction ID : SA11AI.121480
 Amount of Each Receipt this Period
 4.99
 Memo Item

C. LUCH, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 194
 City CARMEL BY THE SEA State CA Zip Code 93921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 445.98

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2020
Transaction ID : SA11AI.121481
 Amount of Each Receipt this Period
 4.99
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 109.98
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 216 OF 404
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. LUCH, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 194
 City CARMEL BY THE SEA State CA Zip Code 93921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.98

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2020
Transaction ID : SA11AI.121482
 Amount of Each Receipt this Period 5.00
 Memo Item

B. LUCH, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 194
 City CARMEL BY THE SEA State CA Zip Code 93921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 455.98

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2020
Transaction ID : SA11AI.121483
 Amount of Each Receipt this Period 5.00
 Memo Item

C. LUCH, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 194
 City CARMEL BY THE SEA State CA Zip Code 93921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 490.98

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2020
Transaction ID : SA11AI.121484
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 45.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 217 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. LUCH, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 194
 City CARMEL BY THE SEA State CA Zip Code 93921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.98

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2020
Transaction ID : SA11AI.121485
 Amount of Each Receipt this Period 35.00
 Memo Item

B. LUCH, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 194
 City CARMEL BY THE SEA State CA Zip Code 93921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.98

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2020
Transaction ID : SA11AI.121486
 Amount of Each Receipt this Period 50.00
 Memo Item

C. LUCH, WARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 194
 City CARMEL BY THE SEA State CA Zip Code 93921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.98

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2020
Transaction ID : SA11AI.121487
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 218 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. LUHR, BEULAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 141

City PETERSBURG	State AK	Zip Code 99833
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 18 / 2020
Transaction ID : SA11AI.121495

Amount of Each Receipt this Period
50.00

Memo Item

B. LUMANLAN, ORLANDO, O, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 BRIGHTON DR

City VALLEJO	State CA	Zip Code 94591
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.85

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2020
Transaction ID : SA11AI.121499

Amount of Each Receipt this Period
21.15

Memo Item

C. LUMANLAN, ORLANDO, O, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 BRIGHTON DR

City VALLEJO	State CA	Zip Code 94591
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
322.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2020
Transaction ID : SA11AI.121500

Amount of Each Receipt this Period
21.15

Memo Item

SUBTOTAL of Receipts This Page (optional).....	92.30
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 219 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LUMANLAN, ORLANDO, O, ,

Mailing Address 36 BRIGHTON DR

City VALLEJO	State CA	Zip Code 94591
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
343.15

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 10 / 2020

Transaction ID : SA11AI.121501

Amount of Each Receipt this Period
21.15

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LUMANLAN, ORLANDO, O, ,

Mailing Address 36 BRIGHTON DR

City VALLEJO	State CA	Zip Code 94591
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
347.65

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2020

Transaction ID : SA11AI.121502

Amount of Each Receipt this Period
4.50

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LUMANLAN, ORLANDO, O, ,

Mailing Address 36 BRIGHTON DR

City VALLEJO	State CA	Zip Code 94591
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
352.15

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2020

Transaction ID : SA11AI.121503

Amount of Each Receipt this Period
4.50

Memo Item

SUBTOTAL of Receipts This Page (optional).....	30.15
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 220 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LUMANLAN, ORLANDO, O, ,

Mailing Address 36 BRIGHTON DR

City VALLEJO	State CA	Zip Code 94591
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
378.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	11	/	2020

Transaction ID : SA11AI.121504

Amount of Each Receipt this Period
26.35

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LUMANLAN, ORLANDO, O, ,

Mailing Address 36 BRIGHTON DR

City VALLEJO	State CA	Zip Code 94591
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
403.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	15	/	2020

Transaction ID : SA11AI.121505

Amount of Each Receipt this Period
25.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LUMANLAN, ORLANDO, O, ,

Mailing Address 36 BRIGHTON DR

City VALLEJO	State CA	Zip Code 94591
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
424.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	16	/	2020

Transaction ID : SA11AI.121506

Amount of Each Receipt this Period
21.15

Memo Item

SUBTOTAL of Receipts This Page (optional).....	72.50
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 221 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. LUMANLAN, ORLANDO, O, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 BRIGHTON DR
 City VALLEJO State CA Zip Code 94591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 430.17

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2020
Transaction ID : SA11AI.121507
 Amount of Each Receipt this Period
 5.52
 Memo Item

B. LUNDQUIST, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6277 N OCEAN BLVD
 City BOYNTON BEACH State FL Zip Code 33435
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2020
Transaction ID : SA11AI.121519
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. LUONG, ANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 7
 City HITCHCOCK State TX Zip Code 77563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) SELF-EMPLOYED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2020
Transaction ID : SA11AI.121528
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	355.52
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 222 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. MACDOWELL, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 WINDSOR CT
 City DELMAR State NY Zip Code 12054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 20 / 2020
Transaction ID : SA11AI.121609
 Amount of Each Receipt this Period 100.00
 Memo Item

B. MAGINAS, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3404 25TH STREET
 City ROCK ISLAND State IL Zip Code 61201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BITCO INSURANCE COMPANIES Occupation (for Individual) LAWYER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 05 / 13 / 2020
Transaction ID : SA11AI.121671
 Amount of Each Receipt this Period 250.00
 Memo Item

C. MALOY, LAUREL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 925 GLENLAKE DR
 City EDMOND State OK Zip Code 73013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 01 / 2020
Transaction ID : SA11AI.121740
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 223 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. MANNING, ALBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 383 MEIRBELLE DR
 City PENSACOLA State FL Zip Code 32514
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 19 / 2020
Transaction ID : SA11AI.121768
 Amount of Each Receipt this Period 35.00
 Memo Item

B. MANWARING, MADELINE, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7734 RETREAT LN
 City WARRENTON State VA Zip Code 20186
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 226.00

Date of Receipt 05 / 21 / 2020
Transaction ID : SA11AI.121776
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MARNICH, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 625 ELLFRED CT
 City SANTA PAULA State CA Zip Code 93060
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TIDWELL EXCAVATION Occupation (for Individual) PLANNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt 05 / 20 / 2020
Transaction ID : SA11AI.121831
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	185.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 224 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. MARTIN, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1310 E SWAIN RD
 City STOCKTON State CA Zip Code 95210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 18 / 2020
Transaction ID : SA11AI.121861
 Amount of Each Receipt this Period 100.00
 Memo Item

B. MARTINSON, RODNEY, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13531 W SKY HAWK DR
 City SUN CITY WEST State AZ Zip Code 85375-5832
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 271.00

Date of Receipt 05 / 02 / 2020
Transaction ID : SA11AI.121894
 Amount of Each Receipt this Period 35.00
 Memo Item

C. MARTINSON, RODNEY, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13531 W SKY HAWK DR
 City SUN CITY WEST State AZ Zip Code 85375-5832
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 296.00

Date of Receipt 05 / 03 / 2020
Transaction ID : SA11AI.121895
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	160.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 225 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. MARTINSON, RODNEY, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13531 W SKY HAWK DR
 City SUN CITY WEST State AZ Zip Code 85375-5832
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 316.00

Date of Receipt 05 / 06 / 2020
Transaction ID : SA11AI.121896
 Amount of Each Receipt this Period 20.00
 Memo Item

B. MARTINSON, RODNEY, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13531 W SKY HAWK DR
 City SUN CITY WEST State AZ Zip Code 85375-5832
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 317.00

Date of Receipt 05 / 07 / 2020
Transaction ID : SA11AI.121897
 Amount of Each Receipt this Period 1.00
 Memo Item

C. MARTINSON, RODNEY, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13531 W SKY HAWK DR
 City SUN CITY WEST State AZ Zip Code 85375-5832
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 362.00

Date of Receipt 05 / 28 / 2020
Transaction ID : SA11AI.121898
 Amount of Each Receipt this Period 45.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	66.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 226 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. MARTINSON, RODNEY, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13531 W SKY HAWK DR
 City SUN CITY WEST State AZ Zip Code 85375-5832
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 387.00

Date of Receipt 05 / 31 / 2020
Transaction ID : SA11AI.121899
 Amount of Each Receipt this Period 25.00
 Memo Item

B. MASSON, DIANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 222179
 City CARMEL State CA Zip Code 93922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 31 / 2020
Transaction ID : SA11AI.121930
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. MATHIS, DENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 402 N EVERGREEN AVE
 City ARLINGTON HEIGHTS State IL Zip Code 60004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 05 / 15 / 2020
Transaction ID : SA11AI.121950
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 227 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. MATZ, SCOTT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3010 BIG FLAT RD

City MISSOULA	State MT	Zip Code 59804
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) CHIROPRACTOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2020

Transaction ID : SA11AI.121968

Amount of Each Receipt this Period
500.00

Memo Item

B. MCALLISTER, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10326 W BOLIVAR DR

City SUN CITY	State AZ	Zip Code 85351
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CHAD'S VIDEOS LLC	Occupation (for Individual) INTERNET MARKETER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
211.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		21		2020

Transaction ID : SA11AI.122021

Amount of Each Receipt this Period
35.00

Memo Item

C. MCCANN, WILLIAM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 515 W MAPLE ST

City CALDWELL	State ID	Zip Code 83605
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		15		2020

Transaction ID : SA11AI.122052

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	560.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 228 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. MCCANN, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 515 W MAPLE ST
 City CALDWELL State ID Zip Code 83605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2020
Transaction ID : SA11AI.122053
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. MCCORKLE, ANN, G, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 8152
 City SOUTH CHARLESTON State WV Zip Code 25303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 238.46

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 25 / 2020
Transaction ID : SA11AI.122072
 Amount of Each Receipt this Period
 8.99
 Memo Item

C. MCCORKLE, ANN, G, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 8152
 City SOUTH CHARLESTON State WV Zip Code 25303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 263.46

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 25 / 2020
Transaction ID : SA11AI.122073
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	58.99
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 229 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. MCCORKLE, ANN, G, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 8152

City SOUTH CHARLESTON	State WV	Zip Code 25303
--------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
353.46

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 25 / 2020

Transaction ID : SA11AI.122074

Amount of Each Receipt this Period
 90.00

Memo Item

B. MCCORKLE, ANN, G, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 8152

City SOUTH CHARLESTON	State WV	Zip Code 25303
--------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
457.94

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 25 / 2020

Transaction ID : SA11AI.122075

Amount of Each Receipt this Period
 104.48

Memo Item

C. MCDOWELL, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1325 FIELDWOOD DR

City KNOXVILLE	State TN	Zip Code 37918
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) US POSTAL SERVICE	Occupation (for Individual) CLERK
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 20 / 2020

Transaction ID : SA11AI.122110

Amount of Each Receipt this Period
 45.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	239.48
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 230 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. MCMAHON, LINDA, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1055 WASHINGTON BLVD
 City STAMFORD State CT Zip Code 06901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICA FIRST ACTION, INC Occupation (for Individual) CHAIR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1275450.40

Date of Receipt 05 / 13 / 2020
Transaction ID : SA11AI.122234
 Amount of Each Receipt this Period 1000000.00
 Memo Item

B. MCQUADE, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3675 RONSTADT RD
 City THOMPSON'S STATION State TN Zip Code 37179
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) CONSULTING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 05 / 2020
Transaction ID : SA11AI.122263
 Amount of Each Receipt this Period 100.00
 Memo Item

C. MCREYNOLDS, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 BRICKLE SPRINGS RD
 City CAVE CITY State AR Zip Code 72521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) TRUCKING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 05 / 22 / 2020
Transaction ID : SA11AI.122289
 Amount of Each Receipt this Period 300.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1000400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 231 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. MEDVE, JAKOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3401 LEE PKWY
 2203
 City DALLAS State TX Zip Code 75219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE MEDVE GROUP, INC. Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 13 / 2020
Transaction ID : SA11AI.122335
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. MEIGS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 49 LINE RD
 City MALVERN State PA Zip Code 19355
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 232.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2020
Transaction ID : SA11AI.122348
 Amount of Each Receipt this Period
 5.00
 Memo Item

C. MEIGS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 49 LINE RD
 City MALVERN State PA Zip Code 19355
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 267.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2020
Transaction ID : SA11AI.122349
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	140.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 232 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. MEIGS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 49 LINE RD
 City MALVERN State PA Zip Code 19355
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 272.00

Date of Receipt 05 / 13 / 2020
Transaction ID : SA11AI.122350
 Amount of Each Receipt this Period 5.00
 Memo Item

B. MEIGS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 49 LINE RD
 City MALVERN State PA Zip Code 19355
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.00

Date of Receipt 05 / 13 / 2020
Transaction ID : SA11AI.122351
 Amount of Each Receipt this Period 35.00
 Memo Item

C. MEIGS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 49 LINE RD
 City MALVERN State PA Zip Code 19355
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 317.00

Date of Receipt 05 / 15 / 2020
Transaction ID : SA11AI.122352
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	50.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 233 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. MEIGS, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 49 LINE RD

City MALVERN	State PA	Zip Code 19355
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
352.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		18		2020

Transaction ID : SA11AI.122353

Amount of Each Receipt this Period
35.00

Memo Item

B. MEIGS, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 49 LINE RD

City MALVERN	State PA	Zip Code 19355
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
362.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		25		2020

Transaction ID : SA11AI.122354

Amount of Each Receipt this Period
10.00

Memo Item

C. MEIGS, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 49 LINE RD

City MALVERN	State PA	Zip Code 19355
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
363.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		27		2020

Transaction ID : SA11AI.122355

Amount of Each Receipt this Period
1.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	46.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 234 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. MEIGS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 49 LINE RD
 City MALVERN State PA Zip Code 19355
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 368.00

Date of Receipt 05 / 27 / 2020
Transaction ID : SA11AI.122356
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MEIGS, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 49 LINE RD
 City MALVERN State PA Zip Code 19355
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 418.00

Date of Receipt 05 / 27 / 2020
Transaction ID : SA11AI.122357
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MEINEN, JANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27715 BERING CROSSING DR
 City KATY State TX Zip Code 77494
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 15 / 2020
Transaction ID : SA11AI.122358
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 235 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. MELBY, MARYANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20322 92ND AVE S
 City KENT State WA Zip Code 98031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 05 / 21 / 2020
Transaction ID : SA11AI.122371
 Amount of Each Receipt this Period 250.00
 Memo Item

B. MELZER, VIRGINIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9428 ALMAR PL
 City PITTSBURGH State PA Zip Code 15237
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 07 / 2020
Transaction ID : SA11AI.122400
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MERRILL, LAVERNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 N TIETJEN ST
 City RAMAH State NM Zip Code 87321
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 326.00

Date of Receipt 05 / 15 / 2020
Transaction ID : SA11AI.122440
 Amount of Each Receipt this Period 65.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	365.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 236 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. MILHOAN, RANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1114
 City VAIL State CO Zip Code 81658
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MILHOAN STUDIOS, LLC Occupation (for Individual) ARTIST/DESIGNER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **- 35.00**

Date of Receipt **05 / 04 / 2020**
Transaction ID : SA11AI.129726
 Amount of Each Receipt this Period **- 35.00**
 Memo Item
CHARGEBACK

B. MILLER, JOAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10901 176TH CIR NE #4527
 City REDMOND State WA Zip Code 98052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **300.00**

Date of Receipt **05 / 29 / 2020**
Transaction ID : SA11AI.122566
 Amount of Each Receipt this Period **50.00**
 Memo Item

C. MILLIRON, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1120 BUCYRUS RD
 City GALION State OH Zip Code 44833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) FINANCIAL ADVISOR
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **300.00**

Date of Receipt **05 / 26 / 2020**
Transaction ID : SA11AI.122609
 Amount of Each Receipt this Period **100.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	115.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 237 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. MINAH, CAROLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1824 E SEADRIFT DR
 City WINDSOR State CO Zip Code 80550
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 24 / 2020
Transaction ID : SA11AI.122627
 Amount of Each Receipt this Period 100.00
 Memo Item

B. MINER, B, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5386 GARDENBROOK BLVD
 City MILTON State FL Zip Code 32570
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 204.49

Date of Receipt 05 / 05 / 2020
Transaction ID : SA11AI.122636
 Amount of Each Receipt this Period 4.00
 Memo Item

C. MINER, B, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5386 GARDENBROOK BLVD
 City MILTON State FL Zip Code 32570
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 208.49

Date of Receipt 05 / 05 / 2020
Transaction ID : SA11AI.122637
 Amount of Each Receipt this Period 4.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	108.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 238 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. MINER, B, J, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5386 GARDENBROOK BLVD

City MILTON	State FL	Zip Code 32570
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
209.49

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		06		2020

Transaction ID : SA11AI.122638

Amount of Each Receipt this Period

9.00

 Memo Item

B. MINER, B, J, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5386 GARDENBROOK BLVD

City MILTON	State FL	Zip Code 32570
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
212.49

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		06		2020

Transaction ID : SA11AI.122639

Amount of Each Receipt this Period

3.00

 Memo Item

C. MINER, B, J, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5386 GARDENBROOK BLVD

City MILTON	State FL	Zip Code 32570
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
217.49

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2020

Transaction ID : SA11AI.122640

Amount of Each Receipt this Period

5.00

 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	9.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 239 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. MINER, B, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5386 GARDENBROOK BLVD
 City MILTON State FL Zip Code 32570
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 221.97

Date of Receipt 05 / 14 / 2020
Transaction ID : SA11AI.122641
 Amount of Each Receipt this Period 4.48
 Memo Item

B. MINER, B, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5386 GARDENBROOK BLVD
 City MILTON State FL Zip Code 32570
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 226.45

Date of Receipt 05 / 14 / 2020
Transaction ID : SA11AI.122642
 Amount of Each Receipt this Period 4.48
 Memo Item

C. MINER, B, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5386 GARDENBROOK BLVD
 City MILTON State FL Zip Code 32570
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 231.45

Date of Receipt 05 / 14 / 2020
Transaction ID : SA11AI.122643
 Amount of Each Receipt this Period 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	13.96
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 240 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. MINER, B, J, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5386 GARDENBROOK BLVD

City MILTON	State FL	Zip Code 32570
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
236.45

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		14		2020

Transaction ID : SA11AI.122644

Amount of Each Receipt this Period
5.00

Memo Item

B. MINER, B, J, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5386 GARDENBROOK BLVD

City MILTON	State FL	Zip Code 32570
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
241.45

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		14		2020

Transaction ID : SA11AI.122645

Amount of Each Receipt this Period
5.00

Memo Item

C. MINER, B, J, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5386 GARDENBROOK BLVD

City MILTON	State FL	Zip Code 32570
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
246.45

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		14		2020

Transaction ID : SA11AI.122646

Amount of Each Receipt this Period
5.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	15.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 241 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. MINER, B, J, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5386 GARDENBROOK BLVD

City MILTON	State FL	Zip Code 32570
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
251.45

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		14		2020

Transaction ID : SA11AI.122647

Amount of Each Receipt this Period
5.00

Memo Item

B. MINER, B, J, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5386 GARDENBROOK BLVD

City MILTON	State FL	Zip Code 32570
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
256.97

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		14		2020

Transaction ID : SA11AI.122648

Amount of Each Receipt this Period
5.52

Memo Item

C. MINER, B, J, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5386 GARDENBROOK BLVD

City MILTON	State FL	Zip Code 32570
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
262.49

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		14		2020

Transaction ID : SA11AI.122649

Amount of Each Receipt this Period
5.52

Memo Item

SUBTOTAL of Receipts This Page (optional).....	16.04
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 242 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. MINER, B, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5386 GARDENBROOK BLVD
 City MILTON State FL Zip Code 32570
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 268.01

Date of Receipt 05 / 14 / 2020
Transaction ID : SA11AI.122650
 Amount of Each Receipt this Period 5.52
 Memo Item

B. MINER, B, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5386 GARDENBROOK BLVD
 City MILTON State FL Zip Code 32570
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 274.01

Date of Receipt 05 / 14 / 2020
Transaction ID : SA11AI.122651
 Amount of Each Receipt this Period 6.00
 Memo Item

C. MINER, B, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5386 GARDENBROOK BLVD
 City MILTON State FL Zip Code 32570
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 279.01

Date of Receipt 05 / 17 / 2020
Transaction ID : SA11AI.122652
 Amount of Each Receipt this Period 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	16.52
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 243 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. MITCHELL, FRANCES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3203 POWDER MILL PL SE
 City MARIETTA State GA Zip Code 30067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **05 / 03 / 2020**
Transaction ID : SA11AI.122673
 Amount of Each Receipt this Period 100.00
 Memo Item

B. MITSCH, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 CHARLEY LAKE CT
 City SAINT PAUL State MN Zip Code 55127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 256.00

Date of Receipt **05 / 18 / 2020**
Transaction ID : SA11AI.122685
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MIZELL, WALKER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45120 DORMAN PL
 City CALLAHAN State FL Zip Code 32011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **05 / 20 / 2020**
Transaction ID : SA11AI.122688
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 244 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. MONSON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2059 BAYMEADOWS DR
 City PLACENTIA State CA Zip Code 92870
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2020
Transaction ID : SA11AI.122740
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. MOODY, BRAXTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 212 SHERWOOD LN
 City CROWLEY State LA Zip Code 70526
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2020
Transaction ID : SA11AI.122767
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. MORDEN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 478
 City HARTWOOD State VA Zip Code 22471
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 25 / 2020
Transaction ID : SA11AI.122837
 Amount of Each Receipt this Period
 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	610.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 245 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. MORDEN, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 478

City HARTWOOD	State VA	Zip Code 22471
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	26	/	2020

Transaction ID : SA11AI.122838

Amount of Each Receipt this Period
25.00

Memo Item

B. MORDEN, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 478

City HARTWOOD	State VA	Zip Code 22471
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
310.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	28	/	2020

Transaction ID : SA11AI.122839

Amount of Each Receipt this Period
10.00

Memo Item

C. MORDEN, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 478

City HARTWOOD	State VA	Zip Code 22471
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
320.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	28	/	2020

Transaction ID : SA11AI.122840

Amount of Each Receipt this Period
10.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	45.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 246 OF 404
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. MORFORD, MARTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 413807
 City KANSAS CITY State MO Zip Code 64141
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.49

Date of Receipt 05 / 30 / 2020
Transaction ID : SA11AI.122855
 Amount of Each Receipt this Period 40.00
 Memo Item

B. MORGAN, MILDRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 792 SWEETGUM RD
 City DU QUOIN State IL Zip Code 62832
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 21 / 2020
Transaction ID : SA11AI.122872
 Amount of Each Receipt this Period 35.00
 Memo Item

C. MORGENS, NORMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4200 NW 79TH TER APT 3
 City KANSAS CITY State MO Zip Code 64151-4216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 23 / 2020
Transaction ID : SA11AI.122877
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 247 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. MORIARTY, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1909 VIA APPIA
 City WALNUT CREEK State CA Zip Code 94598
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SWINERTON Occupation (for Individual) ARCHITECT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 05 / 2020
Transaction ID : SA11AI.122878
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MORSE, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2010 BOND ST
 City NILES State MI Zip Code 49120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 20 / 2020
Transaction ID : SA11AI.122909
 Amount of Each Receipt this Period 100.00
 Memo Item

C. MUKHERJEE, DOROTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1445 RIVIERA DR
 City KISSIMMEE State FL Zip Code 34744
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) BUSINESS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 30 / 2020
Transaction ID : SA11AI.122993
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 248 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. MULDER, LEON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 310 HUBBARD AVE

City DOON	State IA	Zip Code 51235
--------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MULDER EQUIPMENT SALES INC	Occupation (for Individual) SALES
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		18		2020

Transaction ID : SA11AI.122994

Amount of Each Receipt this Period
100.00

Memo Item

B. MURPHY, ANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19951 COLLIER ST.

City WOODLAND HILLS	State CA	Zip Code 91364
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
363.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		07		2020

Transaction ID : SA11AI.123022

Amount of Each Receipt this Period
5.00

Memo Item

C. MURPHY, ANNE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19951 COLLIER ST.

City WOODLAND HILLS	State CA	Zip Code 91364
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
388.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		07		2020

Transaction ID : SA11AI.123023

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	130.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 250 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. MURPHY, KAREN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9926 W DUBON ST

City WICHITA	State KS	Zip Code 67209
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
232.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		14		2020

Transaction ID : SA11AI.123041

Amount of Each Receipt this Period
5.00

Memo Item

B. MURPHY, KAREN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9926 W DUBON ST

City WICHITA	State KS	Zip Code 67209
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
242.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		15		2020

Transaction ID : SA11AI.123042

Amount of Each Receipt this Period
10.00

Memo Item

C. MURPHY, KAREN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 75642

City WICHITA	State KS	Zip Code 67275
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
206.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		29		2020

Transaction ID : SA11AI.123057

Amount of Each Receipt this Period
20.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	35.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 251 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. MURPHY, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 75642
 City WICHITA State KS Zip Code 67275
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 246.00

Date of Receipt 05 / 29 / 2020
Transaction ID : SA11AI.123058
 Amount of Each Receipt this Period 40.00
 Memo Item

B. MURPHY, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9926 W DUBON ST
 City WICHITA State KS Zip Code 67209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 267.55

Date of Receipt 05 / 30 / 2020
Transaction ID : SA11AI.123059
 Amount of Each Receipt this Period 25.00
 Memo Item

C. MURPHY, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9926 W DUBON ST
 City WICHITA State KS Zip Code 67209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 299.11

Date of Receipt 05 / 30 / 2020
Transaction ID : SA11AI.123060
 Amount of Each Receipt this Period 31.56
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	96.56
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 252 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. MURPHY, KAREN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9926 W DUBON ST

City WICHITA	State KS	Zip Code 67209
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
334.11

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2020

Transaction ID : SA11AI.123061

Amount of Each Receipt this Period
35.00

Memo Item

B. MURPHY, KAREN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9926 W DUBON ST

City WICHITA	State KS	Zip Code 67209
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.46

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2020

Transaction ID : SA11AI.123062

Amount of Each Receipt this Period
26.35

Memo Item

C. MURPHY, KAREN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 75642

City WICHITA	State KS	Zip Code 67275
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
266.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2020

Transaction ID : SA11AI.123063

Amount of Each Receipt this Period
20.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	81.35
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 253 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. MURPHY, THORA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 525 N GILBERT ST
 City ANAHEIM State CA Zip Code 92801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 05 / 04 / 2020
Transaction ID : SA11AI.123073
 Amount of Each Receipt this Period 35.00
 Memo Item

B. MURPHY, THORA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 525 N GILBERT ST
 City ANAHEIM State CA Zip Code 92801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 05 / 07 / 2020
Transaction ID : SA11AI.123074
 Amount of Each Receipt this Period 25.00
 Memo Item

C. NAPIER, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3657 PEAHTREE RD
 City ATLANTA State GA Zip Code 30319
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2020
Transaction ID : SA11AI.123158
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	310.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 254 OF 404
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. NAUMAN, KENT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 168 SPRINGWOOD CIR
 City LONGWOOD State FL Zip Code 32750
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2020
Transaction ID : SA11AI.123186
 Amount of Each Receipt this Period
 350.00
 Memo Item

B. NELSON, BILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 315 CROTON HEIGHTS RD
 City YORKTOWN HEIGHTS State NY Zip Code 10598
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2020
Transaction ID : SA11AI.123244
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. NEWELL, GUY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 732 S 11TH ST
 City NILES State MI Zip Code 49120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LEONARDO DRS Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2020
Transaction ID : SA11AI.123318
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 255 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. NEWMAN, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3918 CLARK AVE
UNIT 23217

City SAN ANTONIO	State TX	Zip Code 78223
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) STOCKS
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 13 / 2020

Transaction ID : SA11AI.123322

Amount of Each Receipt this Period
1000.00

Memo Item

B. NGUYEN, HUONG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8613 AVIARY WOODS WAY

City ELK GROVE	State CA	Zip Code 95624
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
331.25

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2020

Transaction ID : SA11AI.123343

Amount of Each Receipt this Period
5.52

Memo Item

C. NGUYEN, HUONG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8613 AVIARY WOODS WAY

City ELK GROVE	State CA	Zip Code 95624
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
336.77

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2020

Transaction ID : SA11AI.123344

Amount of Each Receipt this Period
5.52

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1011.04
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 256 OF 404
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. NGUYEN, HUONG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8613 AVIARY WOODS WAY
 City ELK GROVE State CA Zip Code 95624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 342.29

Date of Receipt 05 / 15 / 2020
Transaction ID : SA11AI.123345
 Amount of Each Receipt this Period 5.52
 Memo Item

B. NGUYEN, HUONG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8613 AVIARY WOODS WAY
 City ELK GROVE State CA Zip Code 95624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 367.29

Date of Receipt 05 / 31 / 2020
Transaction ID : SA11AI.123346
 Amount of Each Receipt this Period 25.00
 Memo Item

C. NGUYEN, HUONG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8613 AVIARY WOODS WAY
 City ELK GROVE State CA Zip Code 95624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 392.29

Date of Receipt 05 / 31 / 2020
Transaction ID : SA11AI.123347
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 55.52
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 258 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. OLSON, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N77 W22240 WOODED HILLS DR
 City SUSSEX State WI Zip Code 53089
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 314.99

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2020
Transaction ID : SA11AI.123624
 Amount of Each Receipt this Period
 5.00
 Memo Item

B. OLSON, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N77 W22240 WOODED HILLS DR
 City SUSSEX State WI Zip Code 53089
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 349.99

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2020
Transaction ID : SA11AI.123625
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. OLSON, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N77 W22240 WOODED HILLS DR
 City SUSSEX State WI Zip Code 53089
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 384.99

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2020
Transaction ID : SA11AI.123626
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 259 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. ONEY, TRUMAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 640

City SCOTTSVILLE	State TX	Zip Code 75688
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) QCS	Occupation (for Individual) WELDING INSPECTOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
231.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		03		2020

Transaction ID : SA11AI.123649

Amount of Each Receipt this Period
50.00

Memo Item

B. ORTEGO, ROY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6979 FOX MEADOW DR NE

City ROCKFORD	State MI	Zip Code 49341
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2020

Transaction ID : SA11AI.123694

Amount of Each Receipt this Period
50.00

Memo Item

C. OVERMAN, STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 312124

City NEW BRAUNFELS	State TX	Zip Code 78131
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1520.98

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		13		2020

Transaction ID : SA11AI.123755

Amount of Each Receipt this Period
1041.98

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1141.98
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 260 OF 404
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. OVERMAN, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 312124
 City NEW BRAUNFELS State TX Zip Code 78131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2562.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 13 / 2020
Transaction ID : SA11AI.123756
 Amount of Each Receipt this Period
 1041.98
 Memo Item

B. P'POOL, MELINDA, GAIL, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3316 NE 42ND CT
 City FORT LAUDERDALE State FL Zip Code 33308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2020
Transaction ID : SA11AI.124511
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. PACE, DAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2020 SPENCER MOUNTAIN RD
 City GASTONIA State NC Zip Code 28054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PT&A Occupation (for Individual) TAX ACCOUNTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 208.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2020
Transaction ID : SA11AI.123777
 Amount of Each Receipt this Period
 104.48
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1246.46
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 261 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. PALMADESSO, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 440 BELMONT BAY DR
 City WOODBRIDGE State VA Zip Code 22191
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 16 / 2020
Transaction ID : SA11AI.123807
 Amount of Each Receipt this Period 250.00
 Memo Item

B. PANEVSKA, MARY ANN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4647 S LAKE DR
 City CUDAHY State WI Zip Code 53110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 05 / 23 / 2020
Transaction ID : SA11AI.123822
 Amount of Each Receipt this Period 250.00
 Memo Item

C. PARSONS, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 453 CARAVELLE DR
 City JUPITER State FL Zip Code 33458
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 21 / 2020
Transaction ID : SA11AI.123905
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 262 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. PASSER, SANFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28400 NORTHWESTERN HWY
 SUITE 130
 City SOUTHFIELD State MI Zip Code 48034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 05 / 02 / 2020
Transaction ID : SA11AI.123920
 Amount of Each Receipt this Period 25.00
 Memo Item

B. PASSER, SANFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28400 NORTHWESTERN HWY
 SUITE 130
 City SOUTHFIELD State MI Zip Code 48034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 05 / 03 / 2020
Transaction ID : SA11AI.123921
 Amount of Each Receipt this Period 35.00
 Memo Item

C. PASSER, SANFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28400 NORTHWESTERN HWY
 SUITE 130
 City SOUTHFIELD State MI Zip Code 48034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt 05 / 19 / 2020
Transaction ID : SA11AI.123922
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 263 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. PASSER, SANFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28400 NORTHWESTERN HWY
 SUITE 130
 City SOUTHFIELD State MI Zip Code 48034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 05 / 20 / 2020
Transaction ID : SA11AI.123923
 Amount of Each Receipt this Period 25.00
 Memo Item

B. PASSER, SANFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28400 NORTHWESTERN HWY
 SUITE 130
 City SOUTHFIELD State MI Zip Code 48034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt 05 / 21 / 2020
Transaction ID : SA11AI.123924
 Amount of Each Receipt this Period 25.00
 Memo Item

C. PAYNE, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 535 SW GLEN CREST WAY
 City STUART State FL Zip Code 34997
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt 05 / 01 / 2020
Transaction ID : SA11AI.123976
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 264 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. PAYNE, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 535 SW GLEN CREST WAY
 City STUART State FL Zip Code 34997
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2020
Transaction ID : SA11AI.123977
 Amount of Each Receipt this Period
 20.00
 Memo Item

B. PAYNE, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 535 SW GLEN CREST WAY
 City STUART State FL Zip Code 34997
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 336.15

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2020
Transaction ID : SA11AI.123978
 Amount of Each Receipt this Period
 21.15
 Memo Item

C. PEEKE, STUART, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 LINDEN ST
 City EXETER State NH Zip Code 03833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 25 / 2020
Transaction ID : SA11AI.124021
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	141.15
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 265 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. PERELMAN, WAYNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4737 SABLE PINE CIR
 City WEST PALM BEACH State FL Zip Code 33417
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 28 / 2020
Transaction ID : SA11AI.124095
 Amount of Each Receipt this Period 100.00
 Memo Item

B. PERRIZO, KATHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6243 PARKHURST DR
 City GOLETA State CA Zip Code 93117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt 05 / 03 / 2020
Transaction ID : SA11AI.124118
 Amount of Each Receipt this Period 35.00
 Memo Item

C. PERRIZO, KATHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6243 PARKHURST DR
 City GOLETA State CA Zip Code 93117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt 05 / 09 / 2020
Transaction ID : SA11AI.124119
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	185.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 266 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. PERRY, JUDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6 MILES RD

City NEWBURGH	State ME	Zip Code 04444
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		21		2020

Transaction ID : SA11AI.124122

Amount of Each Receipt this Period
35.00

Memo Item

B. PERRY, JUDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6 MILES RD

City NEWBURGH	State ME	Zip Code 04444
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2020

Transaction ID : SA11AI.124123

Amount of Each Receipt this Period
10.00

Memo Item

C. PETERSON, LEAH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 19135

City AVON	State CO	Zip Code 81620
--------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) SELF-EMPLOYED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2020

Transaction ID : SA11AI.124160

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	145.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 267 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. PETTIT, PAT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2668 DORSET MEADOWS DR

City POWHATAN	State VA	Zip Code 23139
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
244.99

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		21		2020

Transaction ID : SA11AI.124188

Amount of Each Receipt this Period
50.00

Memo Item

B. PETTIT, PAT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2668 DORSET MEADOWS DR

City POWHATAN	State VA	Zip Code 23139
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
294.99

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		21		2020

Transaction ID : SA11AI.124189

Amount of Each Receipt this Period
50.00

Memo Item

C. PHARES, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 33228 W 12 MILE RD #317

City FARMINGTON	State MI	Zip Code 48334
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
243.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2020

Transaction ID : SA11AI.124227

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 268 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. PHARES, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33228 W 12 MILE RD #317
 City FARMINGTON State MI Zip Code 48334
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 268.00

Date of Receipt 05 / 08 / 2020
Transaction ID : SA11AI.124228
 Amount of Each Receipt this Period 25.00
 Memo Item

B. PHELAN, WYNNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1702 BRUN ST
 City HOUSTON State TX Zip Code 77019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 03 / 2020
Transaction ID : SA11AI.124231
 Amount of Each Receipt this Period 100.00
 Memo Item

C. PHILLIPS, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3001 WEBER PL
 City OAKTON State VA Zip Code 22124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PROMONTORY INTERFINANCIAL Occupation (for Individual) LAWYER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 28 / 2020
Transaction ID : SA11AI.124249
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	375.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 269 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. PHILLIPS, JIM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 BULL ST
 City CHARLESTON State SC Zip Code 29401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) DERMATOPATHOLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 29 / 2020
Transaction ID : SA11AI.124254
 Amount of Each Receipt this Period 100.00
 Memo Item

B. PICKARD, TINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 430 PICKARD RD
 City FORT VALLEY State GA Zip Code 31030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PICKARD SALES CO Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 22 / 2020
Transaction ID : SA11AI.124275
 Amount of Each Receipt this Period 100.00
 Memo Item

C. PIERCE, MARTA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4116 LATIMER LN
 City MOBILE State AL Zip Code 36609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 05 / 15 / 2020
Transaction ID : SA11AI.124301
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	210.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 270 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. POOL, KANDI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3613 THREEAWN TRL
 City SAN ANGELO State TX Zip Code 76904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SAN ANGELO ASSN. OF REALTORS Occupation (for Individual) EVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2020
Transaction ID : SA11AI.124437
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. POPA, MILITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 158 CYPRESS POINT RD
 City HALF MOON BAY State CA Zip Code 94019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2020
Transaction ID : SA11AI.124444
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. POPP, CAROL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 29 RAMAPOO RD
 City RIDGEFIELD State CT Zip Code 06877
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2020
Transaction ID : SA11AI.124448
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 271 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. PORTIER, ELAINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15770 SW TOWHEE LN
 City BEAVERTON State OR Zip Code 97007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 206.00

Date of Receipt **05 / 22 / 2020**
Transaction ID : SA11AI.124463
 Amount of Each Receipt this Period 10.00
 Memo Item

B. POST, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5882 W STERLING LN
 City BOISE State ID Zip Code 83703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **RETIRED** Occupation (for Individual) **RETIRED**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **05 / 08 / 2020**
Transaction ID : SA11AI.124468
 Amount of Each Receipt this Period 65.00
 Memo Item

C. POUBLON, BRIGITTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 491385
 City LOS ANGELES State CA Zip Code 90049
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **RETIRED** Occupation (for Individual) **RETIRED**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **05 / 01 / 2020**
Transaction ID : SA11AI.124483
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 272 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. POWERS, ROGER, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4807 N ARMSTRONG ST
 City WICHITA State KS Zip Code 67204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEECHCRAFT AIRCRAFT Occupation (for Individual) ELECTRICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 216.25

Date of Receipt 05 / 05 / 2020
Transaction ID : SA11AI.124506
 Amount of Each Receipt this Period 25.00
 Memo Item

B. POWERS, ROGER, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4807 N ARMSTRONG ST
 City WICHITA State KS Zip Code 67204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEECHCRAFT AIRCRAFT Occupation (for Individual) ELECTRICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 227.50

Date of Receipt 05 / 10 / 2020
Transaction ID : SA11AI.124507
 Amount of Each Receipt this Period 11.25
 Memo Item

C. POWERS, ROGER, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4807 N ARMSTRONG ST
 City WICHITA State KS Zip Code 67204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEECHCRAFT AIRCRAFT Occupation (for Individual) ELECTRICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 238.75

Date of Receipt 05 / 10 / 2020
Transaction ID : SA11AI.124508
 Amount of Each Receipt this Period 11.25
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	47.50
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 273 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. POWERS, ROGER, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4807 N ARMSTRONG ST
 City WICHITA State KS Zip Code 67204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEECHCRAFT AIRCRAFT Occupation (for Individual) ELECTRICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 249.48

Date of Receipt 05 / 14 / 2020
Transaction ID : SA11AI.124509
 Amount of Each Receipt this Period 10.73
 Memo Item

B. POWERS, ROGER, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4807 N ARMSTRONG ST
 City WICHITA State KS Zip Code 67204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEECHCRAFT AIRCRAFT Occupation (for Individual) ELECTRICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 264.48

Date of Receipt 05 / 30 / 2020
Transaction ID : SA11AI.124510
 Amount of Each Receipt this Period 15.00
 Memo Item

C. PREISLER, KATHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N2363 COUNTY ROAD T
 City HORTONVILLE State WI Zip Code 54944
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 05 / 31 / 2020
Transaction ID : SA11AI.124525
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	35.73
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 274 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. PRICE, NEIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1110 YELLOWSTONE AVE #193
 City POCATELLO State ID Zip Code 83201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 04 / 2020
Transaction ID : SA11AI.124551
 Amount of Each Receipt this Period 100.00
 Memo Item

B. PRICE, NEIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1110 YELLOWSTONE AVE #193
 City POCATELLO State ID Zip Code 83201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 04 / 2020
Transaction ID : SA11AI.124552
 Amount of Each Receipt this Period 100.00
 Memo Item

C. PRINDLE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1217 EUCALYPTUS AVE
 City VISTA State CA Zip Code 92084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 03 / 2020
Transaction ID : SA11AI.124562
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 275 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. PUCKETT, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2161 PARC MONCEAU DR W
 City TUPELO State MS Zip Code 38804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2020
Transaction ID : SA11AI.124597
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. RAIBLE, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7709 CHARRON CT
 City LOUISVILLE State KY Zip Code 40220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2020
Transaction ID : SA11AI.124712
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. REESE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 DOESKIN HILL
 City GREER State SC Zip Code 29650
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2020
Transaction ID : SA11AI.124859
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	375.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 276 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. REVIE, CHARLES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 720 SUNDOWN CT

City LAS CRUCES	State NM	Zip Code 88011
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		24		2020

Transaction ID : SA11AI.124925

Amount of Each Receipt this Period
250.00

Memo Item

B. REYNOLDS, ERRIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 2188

City EVERETT	State WA	Zip Code 98213
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ALL AMERICAN PROPERTY SERVICES LLC	Occupation (for Individual) PROPERTY SERVICES
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		09		2020

Transaction ID : SA11AI.124934

Amount of Each Receipt this Period
20.00

Memo Item

C. REYNOLDS, ERRIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 2188

City EVERETT	State WA	Zip Code 98213
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ALL AMERICAN PROPERTY SERVICES LLC	Occupation (for Individual) PROPERTY SERVICES
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
221.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		14		2020

Transaction ID : SA11AI.124935

Amount of Each Receipt this Period
20.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	290.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 277 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. RIPAK, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 TAMMI CT

City KINGS PARK	State NY	Zip Code 11754
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 900.00

Date of Receipt
 05 / 04 / 2020
Transaction ID : SA11AI.125098

Amount of Each Receipt this Period
 100.00

Memo Item

B. RIPAK, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 TAMMI CT

City KINGS PARK	State NY	Zip Code 11754
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 05 / 10 / 2020
Transaction ID : SA11AI.125099

Amount of Each Receipt this Period
 100.00

Memo Item

C. RIPAK, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 TAMMI CT

City KINGS PARK	State NY	Zip Code 11754
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 1100.00

Date of Receipt
 05 / 23 / 2020
Transaction ID : SA11AI.125100

Amount of Each Receipt this Period
 100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 278 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. RITCHIE, NORMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2396 GARRETT RD
 APT 1
 City BRANDENBURG State KY Zip Code 40108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 294.92

Date of Receipt 05 / 14 / 2020
Transaction ID : SA11AI.125109
 Amount of Each Receipt this Period 10.00
 Memo Item

B. RITCHIE, NORMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2396 GARRETT RD
 APT 1
 City BRANDENBURG State KY Zip Code 40108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.92

Date of Receipt 05 / 16 / 2020
Transaction ID : SA11AI.125110
 Amount of Each Receipt this Period 1.00
 Memo Item

C. RITCHIE, NORMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2396 GARRETT RD
 APT 1
 City BRANDENBURG State KY Zip Code 40108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.92

Date of Receipt 05 / 16 / 2020
Transaction ID : SA11AI.125111
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	21.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 279 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. RITCHIE, NORMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2396 GARRETT RD
 APT 1
 City BRANDENBURG State KY Zip Code 40108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.92

Date of Receipt 05 / 23 / 2020
Transaction ID : SA11AI.125112
 Amount of Each Receipt this Period 10.00
 Memo Item

B. RIVERS, MIKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 835 E LAMAR BLVD
 #276
 City ARLINGTON State TX Zip Code 76011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 21 / 2020
Transaction ID : SA11AI.125138
 Amount of Each Receipt this Period 250.00
 Memo Item

C. ROBERTSON, JANICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 258 RAINBOW DR
 15815
 City LIVINGSTON State TX Zip Code 77399
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 19 / 2020
Transaction ID : SA11AI.125193
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	310.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 280 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. ROBINS, RIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6621 KIMBERLY AVE
 City BAKERSFIELD State CA Zip Code 93308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 213.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2020
Transaction ID : SA11AI.125196
 Amount of Each Receipt this Period 42.00
 Memo Item

B. ROBINS, RIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6621 KIMBERLY AVE
 City BAKERSFIELD State CA Zip Code 93308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2020
Transaction ID : SA11AI.125197
 Amount of Each Receipt this Period 42.00
 Memo Item

C. ROBINS, RIC, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6621 KIMBERLY AVE
 City BAKERSFIELD State CA Zip Code 93308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 297.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2020
Transaction ID : SA11AI.125198
 Amount of Each Receipt this Period 42.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	126.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 281 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. ROBINS, WALTER, , , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3001 W BINNICKER AVE
 City TAMPA State FL Zip Code 33611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) G4S SECURE SOLUTIONS, INC Occupation (for Individual) SECURITY OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 05 / 14 / 2020
Transaction ID : SA11AI.129735
 Amount of Each Receipt this Period - 50.00
 Memo Item
CHARGEBACK

B. ROBINSON, CHARIECE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1654 E 92ND ST
 City CHICAGO State IL Zip Code 60617
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OSF HEALTHCARE Occupation (for Individual) DOCTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 05 / 02 / 2020
Transaction ID : SA11AI.125207
 Amount of Each Receipt this Period 100.00
 Memo Item

C. RODACK, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16051 COLLINS AVE
 City SUNNY ISLES BEACH State FL Zip Code 33160
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 05 / 18 / 2020
Transaction ID : SA11AI.125254
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 282 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. RODACK, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16051 COLLINS AVE
 City SUNNY ISLES BEACH State FL Zip Code 33160
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 05 / 28 / 2020
Transaction ID : SA11AI.125255
 Amount of Each Receipt this Period 100.00
 Memo Item

B. ROSCHE, ANNA, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 SARA AVE
 City SUNNYVALE State CA Zip Code 94086
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 03 / 2020
Transaction ID : SA11AI.125385
 Amount of Each Receipt this Period 100.00
 Memo Item

C. RUSSO, RICH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8489 CANYON RIM CIR #301
 City ENGLEWOOD State CO Zip Code 80112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DISH TECHNOLOGIES Occupation (for Individual) PROGRAM MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 05 / 11 / 2020
Transaction ID : SA11AI.125605
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	235.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 283 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. SAILER, BECKY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 HIDDEN MEADOWS LN
 City SUPERIOR State MT Zip Code 59872
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 605.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2020
Transaction ID : SA11AI.125695
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. SALIN, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 699 TREASURY LN
 City LEBANON State TN Zip Code 37087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2020
Transaction ID : SA11AI.125716
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. SANCHEZ, PETE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6515 BRIARSTONE LN
 City SPRING State TX Zip Code 77379
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UTEX INDUSTRIES, INC Occupation (for Individual) FINANCE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2020
Transaction ID : SA11AI.125756
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 284 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. SANDERS, SANDRA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3193 COUNTRY CLUB CT NW

City KENNESAW	State GA	Zip Code 30144
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
241.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		06		2020

Transaction ID : SA11AI.125768

Amount of Each Receipt this Period
25.00

Memo Item

B. SANDERS, SANDRA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3193 COUNTRY CLUB CT NW

City KENNESAW	State GA	Zip Code 30144
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
267.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2020

Transaction ID : SA11AI.125769

Amount of Each Receipt this Period
26.35

Memo Item

C. SANDERS, SANDRA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3193 COUNTRY CLUB CT NW

City KENNESAW	State GA	Zip Code 30144
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
277.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		14		2020

Transaction ID : SA11AI.125770

Amount of Each Receipt this Period
10.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	61.35
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 285 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. SANDERS, SANDRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3193 COUNTRY CLUB CT NW
 City KENNESAW State GA Zip Code 30144
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 327.70

Date of Receipt **05 / 30 / 2020**
Transaction ID : SA11AI.125771
 Amount of Each Receipt this Period 50.00
 Memo Item

B. SCALISI, ANTHONY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 204 S MILL ST
 City LAKE MILLS State IA Zip Code 50450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SION-WEST PRAIRIE L.C. Occupation (for Individual) MINISTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 203.00

Date of Receipt **05 / 24 / 2020**
Transaction ID : SA11AI.125878
 Amount of Each Receipt this Period 35.00
 Memo Item

C. SCHMIDT, CARL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 56 WAVE ST
 City BEACHWOOD State NJ Zip Code 08722
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 246.00

Date of Receipt **05 / 27 / 2020**
Transaction ID : SA11AI.125978
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	110.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 286 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. SCHROEDER, MARLA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15657 LITTLEFIELD LN
 City SPRING LAKE State MI Zip Code 49456
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 22 / 2020
Transaction ID : SA11AI.126038
 Amount of Each Receipt this Period 250.00
 Memo Item

B. SCHUFF, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14412 N COTTON LN
 City SURPRISE State AZ Zip Code 85388
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 23 / 2020
Transaction ID : SA11AI.126047
 Amount of Each Receipt this Period 100.00
 Memo Item

C. SCHULER, BETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1004 PEBBLE BROOK
 City NASHVILLE State TN Zip Code 37221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) PET CARE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 05 / 12 / 2020
Transaction ID : SA11AI.126048
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	385.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 287 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. SCHULER, BETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1004 PEBBLE BROOK
 City NASHVILLE State TN Zip Code 37221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) PET CARE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 05 / 21 / 2020
Transaction ID : SA11AI.126049
 Amount of Each Receipt this Period 50.00
 Memo Item

B. SCHULTZ, ALAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 61 RAMONA DR
 City FAIRBORN State OH Zip Code 45324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 05 / 05 / 2020
Transaction ID : SA11AI.126057
 Amount of Each Receipt this Period 25.00
 Memo Item

C. SCHULTZ, ALAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 61 RAMONA DR
 City FAIRBORN State OH Zip Code 45324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 211.00

Date of Receipt 05 / 13 / 2020
Transaction ID : SA11AI.126058
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 288 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. SCHULTZ, ALAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 61 RAMONA DR
 City FAIRBORN State OH Zip Code 45324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 236.00

Date of Receipt 05 / 19 / 2020
Transaction ID : SA11AI.126059
 Amount of Each Receipt this Period 25.00
 Memo Item

B. SCHULZ, REINHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4849 NORTHRIDGE DR
 City SOMIS State CA Zip Code 93066
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 383.40

Date of Receipt 05 / 22 / 2020
Transaction ID : SA11AI.126066
 Amount of Each Receipt this Period 88.85
 Memo Item

C. SEALE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6627 WANITA PL
 City HOUSTON State TX Zip Code 77007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 05 / 04 / 2020
Transaction ID : SA11AI.126130
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	613.85
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 289 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. SEALE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 280 CAMINO SUR
 City PALM SPRINGS State CA Zip Code 92262
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2020
Transaction ID : SA11AI.126129
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. SEE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 4421
 City CARLSBAD State CA Zip Code 92018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2020
Transaction ID : SA11AI.126165
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. SEE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 4421
 City CARLSBAD State CA Zip Code 92018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2020
Transaction ID : SA11AI.126166
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	160.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 290 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. SENKBEIL, KURT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25980 MONROE ST
 City ESPARTO State CA Zip Code 95627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2020
Transaction ID : SA11AI.126206
 Amount of Each Receipt this Period 45.00
 Memo Item

B. SHAI0, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 COOLIDGE RD
 City WINCHESTER State MA Zip Code 01890
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2020
Transaction ID : SA11AI.126243
 Amount of Each Receipt this Period 4000.00
 Memo Item

C. SHAW, STUART, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6009 ELEOS CIR
 City AUSTIN State TX Zip Code 78735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BONNER CARRINGTON Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 220.48

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 09 / 2020
Transaction ID : SA11AI.126284
 Amount of Each Receipt this Period 115.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	4160.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 291 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. SHEDDEN, GERALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3214 ST ANDREWS RD

City FAIRFIELD	State CA	Zip Code 94534
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	21	/	2020

Transaction ID : SA11AI.126291

Amount of Each Receipt this Period
100.00

Memo Item

B. SHOWS, LESA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3299 AVENUE 396

City KINGSBURG	State CA	Zip Code 93631
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) BUS OWNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
254.99

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	13	/	2020

Transaction ID : SA11AI.126388

Amount of Each Receipt this Period
250.00

Memo Item

C. SILVA, ALVARO, J, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 700 SUNSET DR

City CORAL GABLES	State FL	Zip Code 33143
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	12	/	2020

Transaction ID : SA11AI.126435

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 292 OF 404
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. SIMON, ALLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1383 N CRISS ST
 City CHANDLER State AZ Zip Code 85226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 13 / 2020
Transaction ID : SA11AI.126463
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. SMENT, JEFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address W314N390 LARA LN
 City DELAFIELD State WI Zip Code 53018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ISC, INC. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2020
Transaction ID : SA11AI.126573
 Amount of Each Receipt this Period
 200.00
 Memo Item

C. SMITH, EMMA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 106 EDWARD AVE
 City MURRELLS INLET State SC Zip Code 29576
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 18 / 2020
Transaction ID : SA11AI.126619
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 293 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. SMITH, KYLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 62 TUSCARORA AVE
 City BEAUFORT State SC Zip Code 29907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 04 / 2020
Transaction ID : SA11AI.126657
 Amount of Each Receipt this Period 100.00
 Memo Item

B. SMITH, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 691 IONE AVE NE
 City MINNEAPOLIS State MN Zip Code 55432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAXIMUM FIRST AID Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 07 / 2020
Transaction ID : SA11AI.126674
 Amount of Each Receipt this Period 100.00
 Memo Item

C. SMITH, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3159 COTTONWOOD CREEK ROAD
 City CHEWELAH State WA Zip Code 99109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SWIFTWATER CUSTOM HOMES Occupation (for Individual) PROJECT MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 05 / 2020
Transaction ID : SA11AI.126695
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 294 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. SMITH, RORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22512 WITTE RD SE
 City MAPLE VALLEY State WA Zip Code 98038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRI-MED AMBULANCE Occupation (for Individual) CABULANCE DRIVER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 208.96

Date of Receipt 05 / 15 / 2020
Transaction ID : SA11AI.126699
 Amount of Each Receipt this Period 104.48
 Memo Item

B. SMITH, ROY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7566 W DIVISION RD
 City LARWILL State IN Zip Code 46764
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 19 / 2020
Transaction ID : SA11AI.126700
 Amount of Each Receipt this Period 100.00
 Memo Item

C. SMITH, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3615 S GALLOWAY DR
 City MEMPHIS State TN Zip Code 38111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 05 / 2020
Transaction ID : SA11AI.126734
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	304.48
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 295 OF 404
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. SOVERNS, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1357

City ANGELS CAMP	State CA	Zip Code 95222
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 231.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		15		2020

Transaction ID : SA11AI.126848

Amount of Each Receipt this Period

25.00

 Memo Item

B. STALEY, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1255 PONTIAC AVE

City CLOVIS	State CA	Zip Code 93612
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		29		2020

Transaction ID : SA11AI.126955

Amount of Each Receipt this Period

100.00

 Memo Item

C. STARCEVICH, KIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1286 NICOLAS LN

City NORTH LIBERTY	State IA	Zip Code 52317
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) PIZZAS		Occupation (for Individual) DIRECT STORE DELIVERY
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 295.97

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2020

Transaction ID : SA11AI.126993

Amount of Each Receipt this Period

4.99

 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	129.99
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 296 OF 404
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. STARCEVICH, KIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1286 NICOLAS LN
 City NORTH LIBERTY State IA Zip Code 52317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PIZZAS Occupation (for Individual) DIRECT STORE DELIVERY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 345.97

Date of Receipt 05 / 19 / 2020
Transaction ID : SA11AI.126994
 Amount of Each Receipt this Period 50.00
 Memo Item

B. STEENBERGEN, JO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2156 E EMMA AVE
 City SPRINGDALE State AR Zip Code 72764
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AAL Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 03 / 2020
Transaction ID : SA11AI.127033
 Amount of Each Receipt this Period 250.00
 Memo Item

C. STEPHENS, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4408 PRINCE ST
 City BAKERSFIELD State CA Zip Code 93301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 05 / 2020
Transaction ID : SA11AI.127065
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	320.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 297 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. STEPHENS, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4408 PRINCE ST
 City BAKERSFIELD State CA Zip Code 93301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 05 / 05 / 2020
Transaction ID : SA11AI.127066
 Amount of Each Receipt this Period 20.00
 Memo Item

B. STEPHENS, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4408 PRINCE ST
 City BAKERSFIELD State CA Zip Code 93301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 05 / 05 / 2020
Transaction ID : SA11AI.127067
 Amount of Each Receipt this Period 25.00
 Memo Item

C. STEPHENS, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4408 PRINCE ST
 City BAKERSFIELD State CA Zip Code 93301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 05 / 06 / 2020
Transaction ID : SA11AI.127068
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	65.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 298 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. STEPHENS, MARGARET, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4408 PRINCE ST

City BAKERSFIELD	State CA	Zip Code 93301
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
310.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2020

Transaction ID : SA11AI.127069

Amount of Each Receipt this Period
35.00

Memo Item

B. STEVENS, JEANETTE, M, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 513 DEAN CREEK LN

City ORLANDO	State FL	Zip Code 32825
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
281.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2020

Transaction ID : SA11AI.127092

Amount of Each Receipt this Period
100.00

Memo Item

C. STEVENS, LINDA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 150 W HEMLOCK PL

City ELMA	State WA	Zip Code 98541
--------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
278.46

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		03		2020

Transaction ID : SA11AI.127093

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	160.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 299 OF 404
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. STEVENS, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 W HEMLOCK PL
 City ELMA State WA Zip Code 98541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 279.46

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2020
Transaction ID : SA11AI.127094
 Amount of Each Receipt this Period
 1.00
 Memo Item

B. STEVENS, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 W HEMLOCK PL
 City ELMA State WA Zip Code 98541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.81

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2020
Transaction ID : SA11AI.127095
 Amount of Each Receipt this Period
 26.35
 Memo Item

C. STEVENS, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 W HEMLOCK PL
 City ELMA State WA Zip Code 98541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 306.81

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2020
Transaction ID : SA11AI.127096
 Amount of Each Receipt this Period
 1.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	28.35
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 300 OF 404
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. STEVENS, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 W HEMLOCK PL
 City ELMA State WA Zip Code 98541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 333.16

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2020
Transaction ID : SA11AI.127097
 Amount of Each Receipt this Period
 26.35
 Memo Item

B. STEVENS, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 W HEMLOCK PL
 City ELMA State WA Zip Code 98541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 359.51

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2020
Transaction ID : SA11AI.127098
 Amount of Each Receipt this Period
 26.35
 Memo Item

C. STEVENS, LINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 W HEMLOCK PL
 City ELMA State WA Zip Code 98541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.86

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2020
Transaction ID : SA11AI.127099
 Amount of Each Receipt this Period
 26.35
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	79.05
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 301 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. STEVENSON, DIANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 207 WHITE OAK RD
 City MERCER State PA Zip Code 16137
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 20 / 2020
Transaction ID : SA11AI.127106
 Amount of Each Receipt this Period 100.00
 Memo Item

B. STIENEKER, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6284 W M32
 City GAYLORD State MI Zip Code 49735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 29 / 2020
Transaction ID : SA11AI.127131
 Amount of Each Receipt this Period 50.00
 Memo Item

C. STONE, ELLIOT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9990 GLOBAL RD
 City PHILADELPHIA State PA Zip Code 19115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MPL Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 23 / 2020
Transaction ID : SA11AI.127175
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 302 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. STROUP, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 858 GRAND HBR W
 City MIRAMAR BEACH State FL Zip Code 32550
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 05 / 18 / 2020
Transaction ID : SA11AI.127238
 Amount of Each Receipt this Period 100.00
 Memo Item

B. SUDBURY, TOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10225 LAKEVIEW DR
 City PROVIDENCE VILLAGE State TX Zip Code 76227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 05 / 23 / 2020
Transaction ID : SA11AI.127265
 Amount of Each Receipt this Period 50.00
 Memo Item

C. SUMBERA, BROOKE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 209 WILDROSE DR
 City VICTORIA State TX Zip Code 77904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 13 / 2020
Transaction ID : SA11AI.127291
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 303 OF 404
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SWAIN, LINDA, , ,

Mailing Address 12815 S 41ST ST

City PHOENIX State AZ Zip Code 85044

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2020

Transaction ID : SA11AI.127323

Amount of Each Receipt this Period
250.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. SWANSTROM, GORDON, , ,

Mailing Address 5410 ZARA AVE

City RICHMOND State CA Zip Code 94805

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2020

Transaction ID : SA11AI.127334

Amount of Each Receipt this Period
100.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. TABB, MARVIN, , ,

Mailing Address 16440 KELLY COVE DR

City FORT MYERS State FL Zip Code 33908

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
606.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 24 / 2020

Transaction ID : SA11AI.127392

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 304 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. TARAN, OLGA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16130 SE 5TH ST
 City BELLEVUE State WA Zip Code 98008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 343.93

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2020
Transaction ID : SA11AI.127448
 Amount of Each Receipt this Period
 4.99
 Memo Item

B. TAUBE, TAD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 RALSTON AVE
 City BELMONT State CA Zip Code 94002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TAUBE INVESTMENTS, INC. Occupation (for Individual) CHAIRMAN/CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2020
Transaction ID : SA11AI.127479
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. TAYLOR, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7139 OLD MILLSTONE DR
 City MECHANICSVILLE State VA Zip Code 23111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SAP NS2 Occupation (for Individual) IT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2020
Transaction ID : SA11AI.127488
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	354.99
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 305 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. TENNEY, DUNCAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 W CHEYENNE MTN BLVD
 City COLORADO SPRINGS State CO Zip Code 80906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DVE, LLC Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2250.00

Date of Receipt 05 / 16 / 2020
Transaction ID : SA11AI.127527
 Amount of Each Receipt this Period 250.00
 Memo Item

B. TENNEY, DUNCAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 W CHEYENNE MTN BLVD
 City COLORADO SPRINGS State CO Zip Code 80906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DVE, LLC Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 05 / 21 / 2020
Transaction ID : SA11AI.127528
 Amount of Each Receipt this Period 250.00
 Memo Item

C. TEW, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4511 BRETTON BAY LN
 City DALLAS State TX Zip Code 75287
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 23 / 2020
Transaction ID : SA11AI.127552
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 306 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. THEWLIS, NIGEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 609 HAMPSHIRE RD #376
 City WESTLAKE VILLAGE State CA Zip Code 91361
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BANG THE GAVEL Occupation (for Individual) DIRECTOR OF OPERATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 208.96

Date of Receipt 05 / 09 / 2020
Transaction ID : SA11AI.127578
 Amount of Each Receipt this Period 104.48
 Memo Item

B. THIEL, DOUG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15248 THIEL CT
 City CHOWCHILLA State CA Zip Code 93610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THIEL AIR CARE, INC Occupation (for Individual) AGRIBUSINESS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 204.48

Date of Receipt 05 / 30 / 2020
Transaction ID : SA11AI.127588
 Amount of Each Receipt this Period 104.48
 Memo Item

C. THOMAS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 508 MOSE DR
 City SPARTA State TN Zip Code 38583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 200.14

Date of Receipt 05 / 11 / 2020
Transaction ID : SA11AI.127605
 Amount of Each Receipt this Period 4.99
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	213.95
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 307 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. THOMAS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 508 MOSE DR
 City SPARTA State TN Zip Code 38583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.13

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2020
Transaction ID : SA11AI.127606
 Amount of Each Receipt this Period
 4.99
 Memo Item

B. THOMAS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 508 MOSE DR
 City SPARTA State TN Zip Code 38583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.13

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2020
Transaction ID : SA11AI.127607
 Amount of Each Receipt this Period
 5.00
 Memo Item

C. THOMAS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 508 MOSE DR
 City SPARTA State TN Zip Code 38583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.13

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2020
Transaction ID : SA11AI.127608
 Amount of Each Receipt this Period
 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	14.99
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 308 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. THOMAS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 508 MOSE DR
 City SPARTA State TN Zip Code 38583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.13

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2020
Transaction ID : SA11AI.127609
 Amount of Each Receipt this Period 30.00
 Memo Item

B. THOMAS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 508 MOSE DR
 City SPARTA State TN Zip Code 38583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.13

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2020
Transaction ID : SA11AI.127610
 Amount of Each Receipt this Period 30.00
 Memo Item

C. THOMAS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 508 MOSE DR
 City SPARTA State TN Zip Code 38583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.12

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2020
Transaction ID : SA11AI.127611
 Amount of Each Receipt this Period 4.99
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	64.99
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 309 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
THOMAS, DAVID, , ,

Mailing Address 508 MOSE DR

City SPARTA	State TN	Zip Code 38583
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		29		2020

Transaction ID : SA11AI.127612

Amount of Each Receipt this Period
5.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
THOMAS, DAVID, , ,

Mailing Address 508 MOSE DR

City SPARTA	State TN	Zip Code 38583
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		29		2020

Transaction ID : SA11AI.127613

Amount of Each Receipt this Period
5.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
THOMAS, DAVID, , ,

Mailing Address 508 MOSE DR

City SPARTA	State TN	Zip Code 38583
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
310.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		29		2020

Transaction ID : SA11AI.127614

Amount of Each Receipt this Period
20.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	30.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 310 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
THOMAS, DAVID, , ,

Mailing Address 508 MOSE DR

City SPARTA	State TN	Zip Code 38583
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		29		2020

Transaction ID : SA11AI.127615

Amount of Each Receipt this Period
20.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
THOMAS, DAVID, , ,

Mailing Address 508 MOSE DR

City SPARTA	State TN	Zip Code 38583
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		29		2020

Transaction ID : SA11AI.127616

Amount of Each Receipt this Period
20.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
THOMAS, DAVID, , ,

Mailing Address 508 MOSE DR

City SPARTA	State TN	Zip Code 38583
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
375.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		29		2020

Transaction ID : SA11AI.127617

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	65.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 311 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
THOMAS, DAVID, , ,

Mailing Address 508 MOSE DR

City SPARTA	State TN	Zip Code 38583
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
415.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		29		2020

Transaction ID : SA11AI.127618

Amount of Each Receipt this Period
40.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
THOMAS, DAVID, , ,

Mailing Address 508 MOSE DR

City SPARTA	State TN	Zip Code 38583
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
441.47

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2020

Transaction ID : SA11AI.127619

Amount of Each Receipt this Period
26.35

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
THOMAS, DAVID, , ,

Mailing Address 508 MOSE DR

City SPARTA	State TN	Zip Code 38583
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
473.03

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2020

Transaction ID : SA11AI.127620

Amount of Each Receipt this Period
31.56

Memo Item

SUBTOTAL of Receipts This Page (optional).....	97.91
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 312 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. THOMAS, LISA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32447 CHIPPEWA AVE
 City DELAND State FL Zip Code 32720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BAGEL KING Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 206.34

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 03 / 2020
Transaction ID : SA11AI.127633
 Amount of Each Receipt this Period
 20.00
 Memo Item

B. THOMPSON, RICHARD, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 CAMELLIA RD
 City GOOSE CREEK State SC Zip Code 29445
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2020
Transaction ID : SA11AI.127660
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. TILLEY, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 130 WINDERMERE DR
 City PALMYRA State PA Zip Code 17078
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 20 / 2020
Transaction ID : SA11AI.127706
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	220.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 313 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. TINKERIAN, ARMAND, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 135 S STATE COLLEGE BLVD
 STE 200
 City BREAA State CA Zip Code 92821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) ATTORNEY AT LAW
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 500.00

Date of Receipt 05 / 02 / 2020
Transaction ID : SA11AI.127716
 Amount of Each Receipt this Period 500.00
 Memo Item

B. TOWNER, ELEANOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4772 COUNTY RD 140
 City IDER State AL Zip Code 35981
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 256.97

Date of Receipt 05 / 10 / 2020
Transaction ID : SA11AI.127809
 Amount of Each Receipt this Period 5.00
 Memo Item

C. TOWNER, ELEANOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4772 COUNTY RD 140
 City IDER State AL Zip Code 35981
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 306.97

Date of Receipt 05 / 10 / 2020
Transaction ID : SA11AI.127810
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	555.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 314 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
TOWNER, ELEANOR, , ,

Mailing Address **4772 COUNTY RD 140**

City IDER	State AL	Zip Code 35981
---------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **311.96**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2020

Transaction ID : SA11AI.127811

Amount of Each Receipt this Period

4.99

 Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
TOWNER, ELEANOR, , ,

Mailing Address **4772 COUNTY RD 140**

City IDER	State AL	Zip Code 35981
---------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **361.96**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2020

Transaction ID : SA11AI.127812

Amount of Each Receipt this Period

50.00

 Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
TOWNER, ELEANOR, , ,

Mailing Address **4772 COUNTY RD 140**

City IDER	State AL	Zip Code 35981
---------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **411.96**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2020

Transaction ID : SA11AI.127813

Amount of Each Receipt this Period

50.00

 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	104.99
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 315 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
TOWNER, ELEANOR, , ,

Mailing Address **4772 COUNTY RD 140**

City IDER	State AL	Zip Code 35981
---------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **416.95**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2020

Transaction ID : SA11Al.127814

Amount of Each Receipt this Period

4.99

 Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
TOWNER, ELEANOR, , ,

Mailing Address **4772 COUNTY RD 140**

City IDER	State AL	Zip Code 35981
---------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **421.95**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2020

Transaction ID : SA11Al.127815

Amount of Each Receipt this Period

5.00

 Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
TOWNER, ELEANOR, , ,

Mailing Address **4772 COUNTY RD 140**

City IDER	State AL	Zip Code 35981
---------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **446.95**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2020

Transaction ID : SA11Al.127816

Amount of Each Receipt this Period

25.00

 Memo Item

SUBTOTAL of Receipts This Page (optional).....	34.99
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 316 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. TRACY, P, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1025 PARK PL
 City MISHAWAKA State IN Zip Code 46545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 18 / 2020
Transaction ID : SA11AI.127830
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. TRADO, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31 GILBERT ST
 City RIDGEFIELD State CT Zip Code 06877
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 263.81

Date of Receipt 05 / 09 / 2020
Transaction ID : SA11AI.127833
 Amount of Each Receipt this Period 62.81
 Memo Item

C. TRAMMER, JEROME, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7467 MISSION GORGE RD #50
 City SANTEE State CA Zip Code 92071
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 435.00

Date of Receipt 05 / 02 / 2020
Transaction ID : SA11AI.127837
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 1097.81
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 317 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. TRUEMAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22002 FENWAY RD
 City COLD SPRING State MN Zip Code 56320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 17 / 2020
Transaction ID : SA11AI.127921
 Amount of Each Receipt this Period 50.00
 Memo Item

B. URQUHART, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 VILLAGE CMN
 City FISHKILL State NY Zip Code 12524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2800.00

Date of Receipt 05 / 02 / 2020
Transaction ID : SA11AI.128095
 Amount of Each Receipt this Period 2800.00
 Memo Item

C. VANDER ELS, BRUCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 905 CHICKADEE DR
 City PORT ORANGE State FL Zip Code 32127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 371.00

Date of Receipt 05 / 20 / 2020
Transaction ID : SA11AI.128160
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	2900.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 318 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. VAN DIEST, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39239 IDLEMAN ST
 City SANDY State OR Zip Code 97055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 25 / 2020
Transaction ID : SA11AI.128132
 Amount of Each Receipt this Period 100.00
 Memo Item

B. VAUGHAN, CORNELIUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 205 GOLDEN GATE POINT 201
 City SARASOTA State FL Zip Code 34236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 206.15

Date of Receipt 05 / 08 / 2020
Transaction ID : SA11AI.128211
 Amount of Each Receipt this Period 21.15
 Memo Item

C. VAUGHAN, CORNELIUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 205 GOLDEN GATE POINT 201
 City SARASOTA State FL Zip Code 34236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 226.15

Date of Receipt 05 / 09 / 2020
Transaction ID : SA11AI.128212
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	141.15
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 319 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. VAUGHAN, CORNELIUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 205 GOLDEN GATE POINT
 201
 City SARASOTA State FL Zip Code 34236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 231.14

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 10 / 2020
Transaction ID : SA11AI.128213
 Amount of Each Receipt this Period
 4.99
 Memo Item

B. VAUGHAN, CORNELIUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 205 GOLDEN GATE POINT
 201
 City SARASOTA State FL Zip Code 34236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 236.66

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 10 / 2020
Transaction ID : SA11AI.128214
 Amount of Each Receipt this Period
 5.52
 Memo Item

C. VAUGHAN, CORNELIUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 205 GOLDEN GATE POINT
 201
 City SARASOTA State FL Zip Code 34236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 242.18

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 10 / 2020
Transaction ID : SA11AI.128215
 Amount of Each Receipt this Period
 5.52
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	16.03
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 320 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. VAUGHAN, CORNELIUS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 205 GOLDEN GATE POINT
201

City SARASOTA State FL Zip Code 34236

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
247.17

Date of Receipt
05 / 14 / 2020
Transaction ID : SA11AI.128216

Amount of Each Receipt this Period
4.99

Memo Item

B. VAUGHAN, CORNELIUS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 205 GOLDEN GATE POINT
201

City SARASOTA State FL Zip Code 34236

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
278.73

Date of Receipt
05 / 14 / 2020
Transaction ID : SA11AI.128217

Amount of Each Receipt this Period
31.56

Memo Item

C. VAUGHAN, CORNELIUS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 205 GOLDEN GATE POINT
201

City SARASOTA State FL Zip Code 34236

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
299.88

Date of Receipt
05 / 15 / 2020
Transaction ID : SA11AI.128218

Amount of Each Receipt this Period
21.15

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	57.70
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 321 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. VAUGHAN, CORNELIUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 205 GOLDEN GATE POINT
201

City SARASOTA State FL Zip Code 34236

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.88

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 18 / 2020

Transaction ID : SA11AI.128219

Amount of Each Receipt this Period
1.00

Memo Item

B. VAUGHAN, CORNELIUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 205 GOLDEN GATE POINT
201

City SARASOTA State FL Zip Code 34236

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
301.88

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 18 / 2020

Transaction ID : SA11AI.128220

Amount of Each Receipt this Period
1.00

Memo Item

C. VAUGHAN, CORNELIUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 205 GOLDEN GATE POINT
201

City SARASOTA State FL Zip Code 34236

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
306.87

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 18 / 2020

Transaction ID : SA11AI.128221

Amount of Each Receipt this Period
4.99

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	6.99
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 322 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. VAUGHAN, CORNELIUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 205 GOLDEN GATE POINT
201

City SARASOTA State FL Zip Code 34236

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
311.87

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 18 / 2020

Transaction ID : SA11AI.128222

Amount of Each Receipt this Period
5.00

Memo Item

B. VAUGHAN, CORNELIUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 205 GOLDEN GATE POINT
201

City SARASOTA State FL Zip Code 34236

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
336.87

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 18 / 2020

Transaction ID : SA11AI.128223

Amount of Each Receipt this Period
25.00

Memo Item

C. VAUGHAN, CORNELIUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 205 GOLDEN GATE POINT
201

City SARASOTA State FL Zip Code 34236

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
361.87

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2020

Transaction ID : SA11AI.128224

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	55.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 323 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. VAUGHAN, CORNELIUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 205 GOLDEN GATE POINT
 201
 City SARASOTA State FL Zip Code 34236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 386.87

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2020
Transaction ID : SA11AI.128225
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. VAUGHN, MELINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 LICK FORK RD
 City SCARBRO State WV Zip Code 25917
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 424.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2020
Transaction ID : SA11AI.129747
 Amount of Each Receipt this Period
 - 20.00
 Memo Item
CHARGEBACK

C. VAUGHN, MELINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 LICK FORK RD
 City SCARBRO State WV Zip Code 25917
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 404.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2020
Transaction ID : SA11AI.129748
 Amount of Each Receipt this Period
 - 20.00
 Memo Item
CHARGEBACK

SUBTOTAL of Receipts This Page (optional)..... ▶ - 15.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 324 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. VAUGHN, MELINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 LICK FORK RD
 City SCARBRO State WV Zip Code 25917
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 384.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2020
Transaction ID : SA11AI.129749
 Amount of Each Receipt this Period
 - 20.00
 Memo Item
CHARGEBACK

B. VAUGHN, MELINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 LICK FORK RD
 City SCARBRO State WV Zip Code 25917
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 354.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2020
Transaction ID : SA11AI.129750
 Amount of Each Receipt this Period
 - 30.00
 Memo Item
CHARGEBACK

C. VAUGHN, MELINDA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 LICK FORK RD
 City SCARBRO State WV Zip Code 25917
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 334.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2020
Transaction ID : SA11AI.129751
 Amount of Each Receipt this Period
 - 20.00
 Memo Item
CHARGEBACK

SUBTOTAL of Receipts This Page (optional).....▶	- 70.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 325 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. VOKIC, MILICA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 269 UNION AVE

City PATERSON	State NJ	Zip Code 07502
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
204.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		14		2020

Transaction ID : SA11AI.128336

Amount of Each Receipt this Period
52.40

Memo Item

B. VOKIC, MILICA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 269 UNION AVE

City PATERSON	State NJ	Zip Code 07502
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
254.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2020

Transaction ID : SA11AI.128337

Amount of Each Receipt this Period
50.00

Memo Item

C. WAKEFIELD, BRYAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4929 SAND HILL DR

City COLORADO SPRINGS	State CO	Zip Code 80923
--------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ASRC	Occupation (for Individual) PROGRAM MANAGER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2020

Transaction ID : SA11AI.128419

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	127.40
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 326 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. WALL, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1219 PRESTWICK CT
 City GRANBURY State TX Zip Code 76048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) 112TH JUDICIAL DISTRICT Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 08 / 2020
Transaction ID : SA11AI.128445
 Amount of Each Receipt this Period 100.00
 Memo Item

B. WALLACE, CARENE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 W CHURCH RD
 City SADDLE RIVER State NJ Zip Code 07458
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GCS SOFTWARE Occupation (for Individual) OPERATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 05 / 14 / 2020
Transaction ID : SA11AI.128448
 Amount of Each Receipt this Period 250.00
 Memo Item

C. WEBER, SHIRLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7578 CYPRESS AVE
 City FONTANA State CA Zip Code 92336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 621.00

Date of Receipt 05 / 14 / 2020
Transaction ID : SA11AI.128670
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	360.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 327 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. WEBER, SHIRLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7578 CYPRESS AVE
 City FONTANA State CA Zip Code 92336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 656.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2020
Transaction ID : SA11AI.128671
 Amount of Each Receipt this Period
 35.00
 Memo Item

B. WEBER, SHIRLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7578 CYPRESS AVE
 City FONTANA State CA Zip Code 92336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 806.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2020
Transaction ID : SA11AI.128672
 Amount of Each Receipt this Period
 150.00
 Memo Item

C. WEIDNER GOLDSTEIN, JEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 990 BLVD OF THE ARTS #601
 City SARASOTA State FL Zip Code 34236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 04 / 2020
Transaction ID : SA11AI.128686
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	285.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 328 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. WHEELER, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 306 N GARFIELD ST

City HINSDALE	State IL	Zip Code 60521
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.73

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		01		2020

Transaction ID : SA11AI.128791

Amount of Each Receipt this Period
260.73

Memo Item

B. WHEELER, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 306 N GARFIELD ST

City HINSDALE	State IL	Zip Code 60521
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
521.46

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		01		2020

Transaction ID : SA11AI.128792

Amount of Each Receipt this Period
260.73

Memo Item

C. WHEELER, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1221 GULF SHORE BLVD N #3502

City NAPLES	State FL	Zip Code 34102
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		01		2020

Transaction ID : SA11AI.128793

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	556.46
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 329 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. WHEELER, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1221 GULF SHORE BLVD N #3502
 City NAPLES State FL Zip Code 34102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt **05 / 12 / 2020**
Transaction ID : SA11AI.128794
 Amount of Each Receipt this Period 25.00
 Memo Item

B. WHEELER, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1221 GULF SHORE BLVD N #3502
 City NAPLES State FL Zip Code 34102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt **05 / 26 / 2020**
Transaction ID : SA11AI.128795
 Amount of Each Receipt this Period 35.00
 Memo Item

C. WHEELER, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1221 GULF SHORE BLVD N #3502
 City NAPLES State FL Zip Code 34102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt **05 / 27 / 2020**
Transaction ID : SA11AI.128796
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 330 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. WHEELER, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1221 GULF SHORE BLVD N #3502
 City NAPLES State FL Zip Code 34102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 05 / 31 / 2020
Transaction ID : SA11AI.128797
 Amount of Each Receipt this Period 35.00
 Memo Item

B. WHITE, CATHERINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8812 STAMPS RD
 City DOWNEY State CA Zip Code 90240
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CALIFORNIA CUSTOM FRUITS & FLAVORS, IN Occupation (for Individual) DIRECTOR OF FINANCE & HR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 208.96

Date of Receipt 05 / 15 / 2020
Transaction ID : SA11AI.128824
 Amount of Each Receipt this Period 104.48
 Memo Item

C. WHITESIDE, BRET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3048 VALLEY OF HEARTS DELIGHT PL
 City SAN JOSE State CA Zip Code 95136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) ENGINEERING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 29 / 2020
Transaction ID : SA11AI.128858
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	239.48
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 331 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. WHYTE, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 42 OVERLOOK RD
 City MORGANTOWN State PA Zip Code 19543
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 12 / 2020
Transaction ID : SA11AI.128883
 Amount of Each Receipt this Period 50.00
 Memo Item

B. WIEGAND, LIGIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3802 NE 207TH ST
 City AVENTURA State FL Zip Code 33180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 14 / 2020
Transaction ID : SA11AI.128902
 Amount of Each Receipt this Period 500.00
 Memo Item

C. WIEGAND, LIGIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3802 NE 207TH ST
 City AVENTURA State FL Zip Code 33180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 14 / 2020
Transaction ID : SA11AI.128903
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 332 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. WIGGERS, LOWE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7687 PARKTOWN DR
 City WEST CHESTER State OH Zip Code 45069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 19 / 2020
Transaction ID : SA11AI.128918
 Amount of Each Receipt this Period 45.00
 Memo Item

B. WILKINSON, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5789 CESSNA DR
 City MONTGOMERY State TX Zip Code 77316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 331.00

Date of Receipt 05 / 01 / 2020
Transaction ID : SA11AI.128941
 Amount of Each Receipt this Period 50.00
 Memo Item

C. WILSON, MARGARET, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 206
 City EDDY State TX Zip Code 76524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) SMALL BUSINESS/INVESTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 30 / 2020
Transaction ID : SA11AI.129068
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	595.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 333 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. WIMER, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 DOE RUN LN
 City LANCASTER CITY State PA Zip Code 17603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 29 / 2020
Transaction ID : SA11AI.129083
 Amount of Each Receipt this Period 100.00
 Memo Item

B. WINDEMULLER, DEBRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 522 24TH AVE
 City HUDSONVILLE State MI Zip Code 49426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 11 / 2020
Transaction ID : SA11AI.129092
 Amount of Each Receipt this Period 500.00
 Memo Item

C. WINDEMULLER, DEBRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 522 24TH AVE
 City HUDSONVILLE State MI Zip Code 49426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 11 / 2020
Transaction ID : SA11AI.129093
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 334 OF 404
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. WOLFF, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3407 PRINCEWOOD CT
 City ARLINGTON State TX Zip Code 76016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UT ARLINGTON Occupation (for Individual) MATH ADJUNCT PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 401.00

Date of Receipt 05 / 19 / 2020
Transaction ID : SA11AI.129177
 Amount of Each Receipt this Period 100.00
 Memo Item

B. WOODALL, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 282 BRANKLEY FARM RD
 City CLARKSVILLE State VA Zip Code 23927
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FINANCIAL SECURITY GROUP Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 30 / 2020
Transaction ID : SA11AI.129207
 Amount of Each Receipt this Period 500.00
 Memo Item

C. WOODBURY, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38401 S SKYLINE DR
 City SADDLEBROOKE State AZ Zip Code 85739
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 05 / 2020
Transaction ID : SA11AI.129214
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 650.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 335 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. WOODBURY, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38401 S SKYLINE DR
 City SADDLEBROOKE State AZ Zip Code 85739
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 05 / 14 / 2020
Transaction ID : SA11AI.129215
 Amount of Each Receipt this Period 50.00
 Memo Item

B. WOODHOUSE, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 650 RAMBLEWOOD RD
 City HOUSTON State TX Zip Code 77079
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2100.00

Date of Receipt 05 / 29 / 2020
Transaction ID : SA11AI.129217
 Amount of Each Receipt this Period 250.00
 Memo Item

C. WRIGHT, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4423 BAYBERRY ROW
 City SAN ANTONIO State TX Zip Code 78249
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 802.00

Date of Receipt 05 / 23 / 2020
Transaction ID : SA11AI.129250
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 336 OF 404
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. YBARRA, VICTOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1649 SINALOA AVE
 City PASADENA State CA Zip Code 91104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2020
Transaction ID : SA11AI.129328
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. YORK, SHELIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 130 PORTLAND CIR
 City ARAGON State GA Zip Code 30104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2020
Transaction ID : SA11AI.129368
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. YOUNG, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 465
 City WHITESBORO State TX Zip Code 76273
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2020
Transaction ID : SA11AI.129381
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 337 OF 404
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. YOUNG, MAUREEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 155 LONGWOOD DR
 City JONESBORO State GA Zip Code 30236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 22 / 2020
Transaction ID : SA11AI.129395
 Amount of Each Receipt this Period 500.00
 Memo Item

B. ZACHA, ROBIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6605 W 80TH ST
 City LOS ANGELES State CA Zip Code 90045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 454.35

Date of Receipt 05 / 08 / 2020
Transaction ID : SA11AI.129414
 Amount of Each Receipt this Period 26.35
 Memo Item

C. ZEIDMAN, SHULAMIT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6254 RANCHITO AVE
 City VAN NUYS State CA Zip Code 91401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BEVERLY HILLS QUALITY Occupation (for Individual) ADMINISTRATOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 04 / 2020
Transaction ID : SA11AI.129451
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	776.35
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 338 OF 404
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ZINN, DAVID, , ,

Mailing Address **720 E 6TH ST**

City **ANNISTON** State **AL** Zip Code **36207**

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) **NEPHROLOGY & HYPERTENSION CONSULTANTS** Occupation (for Individual) **PHYSICIAN**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
05 / 19 / 2020

Transaction ID : SA11AL129505

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	2161294.54

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 340 OF 404
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. STRIPE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1661.37

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		05		2020

Transaction ID : SA15.129537

Amount of Each Receipt this Period
0.35

Memo Item
VENDOR REFUND: FEE REVERSAL

B. STRIPE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1661.72

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		06		2020

Transaction ID : SA15.129538

Amount of Each Receipt this Period
0.35

Memo Item
VENDOR REFUND: FEE REVERSAL

C. STRIPE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1661.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		06		2020

Transaction ID : SA15.129539

Amount of Each Receipt this Period
0.18

Memo Item
VENDOR REFUND: FEE REVERSAL

SUBTOTAL of Receipts This Page (optional).....▶	0.88
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 341 OF 404
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1661.93

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2020

Transaction ID : SA15.129540

Amount of Each Receipt this Period
0.03

Memo Item
VENDOR REFUND: FEE REVERSAL

B. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1662.28

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2020

Transaction ID : SA15.129541

Amount of Each Receipt this Period
0.35

Memo Item
VENDOR REFUND: FEE REVERSAL

C. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1662.63

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2020

Transaction ID : SA15.129542

Amount of Each Receipt this Period
0.35

Memo Item
VENDOR REFUND: FEE REVERSAL

SUBTOTAL of Receipts This Page (optional).....▶	0.73
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 342 OF 404
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1667.77

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2020

Transaction ID : SA15.129543

Amount of Each Receipt this Period
5.14

Memo Item
VENDOR REFUND: FEE REVERSAL

B. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1667.98

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		13		2020

Transaction ID : SA15.129544

Amount of Each Receipt this Period
0.21

Memo Item
VENDOR REFUND: FEE REVERSAL

C. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1668.19

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		13		2020

Transaction ID : SA15.129545

Amount of Each Receipt this Period
0.21

Memo Item
VENDOR REFUND: FEE REVERSAL

SUBTOTAL of Receipts This Page (optional).....▶	5.56
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 343 OF 404
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. STRIPE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1668.26

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		14		2020

Transaction ID : SA15.129546

Amount of Each Receipt this Period
0.07

Memo Item
VENDOR REFUND: FEE REVERSAL

B. STRIPE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1668.33

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		14		2020

Transaction ID : SA15.129547

Amount of Each Receipt this Period
0.07

Memo Item
VENDOR REFUND: FEE REVERSAL

C. STRIPE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1668.68

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		14		2020

Transaction ID : SA15.129548

Amount of Each Receipt this Period
0.35

Memo Item
VENDOR REFUND: FEE REVERSAL

SUBTOTAL of Receipts This Page (optional).....	0.49
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 344 OF 404
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1673.82

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		14		2020

Transaction ID : SA15.129549

Amount of Each Receipt this Period
5.14

Memo Item
VENDOR REFUND: FEE REVERSAL

B. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1678.97

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		16		2020

Transaction ID : SA15.129550

Amount of Each Receipt this Period
5.15

Memo Item
VENDOR REFUND: FEE REVERSAL

C. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1684.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		16		2020

Transaction ID : SA15.129551

Amount of Each Receipt this Period
5.15

Memo Item
VENDOR REFUND: FEE REVERSAL

SUBTOTAL of Receipts This Page (optional).....▶	15.44
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 345 OF 404
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1684.37

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		18		2020

Transaction ID : SA15.129552

Amount of Each Receipt this Period
0.25

Memo Item
VENDOR REFUND: FEE REVERSAL

B. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1684.38

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2020

Transaction ID : SA15.129553

Amount of Each Receipt this Period
0.01

Memo Item
VENDOR REFUND: FEE REVERSAL

C. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1684.39

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2020

Transaction ID : SA15.129554

Amount of Each Receipt this Period
0.01

Memo Item
VENDOR REFUND: FEE REVERSAL

SUBTOTAL of Receipts This Page (optional).....	0.27
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 346 OF 404
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1684.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2020

Transaction ID : SA15.129555

Amount of Each Receipt this Period
0.01

Memo Item
VENDOR REFUND: FEE REVERSAL

B. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1684.41

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2020

Transaction ID : SA15.129556

Amount of Each Receipt this Period
0.01

Memo Item
VENDOR REFUND: FEE REVERSAL

C. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1684.42

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2020

Transaction ID : SA15.129557

Amount of Each Receipt this Period
0.01

Memo Item
VENDOR REFUND: FEE REVERSAL

SUBTOTAL of Receipts This Page (optional).....▶	0.03
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 347 OF 404
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1684.45

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 19 / 2020

Transaction ID : SA15.129558

Amount of Each Receipt this Period
0.03

Memo Item
VENDOR REFUND: FEE REVERSAL

B. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1684.49

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 19 / 2020

Transaction ID : SA15.129559

Amount of Each Receipt this Period
0.04

Memo Item
VENDOR REFUND: FEE REVERSAL

C. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1684.53

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 19 / 2020

Transaction ID : SA15.129560

Amount of Each Receipt this Period
0.04

Memo Item
VENDOR REFUND: FEE REVERSAL

SUBTOTAL of Receipts This Page (optional).....▶	0.11
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 348 OF 404
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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A. STRIPE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1684.57

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2020

Transaction ID : SA15.129561

Amount of Each Receipt this Period
0.04

Memo Item
VENDOR REFUND: FEE REVERSAL

B. STRIPE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1684.61

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2020

Transaction ID : SA15.129562

Amount of Each Receipt this Period
0.04

Memo Item
VENDOR REFUND: FEE REVERSAL

C. STRIPE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1684.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2020

Transaction ID : SA15.129563

Amount of Each Receipt this Period
0.04

Memo Item
VENDOR REFUND: FEE REVERSAL

SUBTOTAL of Receipts This Page (optional).....▶	0.12
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 349 OF 404
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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A. STRIPE

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City SAN FRANCISCO	State CA	Zip Code 94110
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1684.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2020

Transaction ID : SA15.129564

Amount of Each Receipt this Period
0.04

Memo Item
VENDOR REFUND: FEE REVERSAL

B. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1684.73

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2020

Transaction ID : SA15.129565

Amount of Each Receipt this Period
0.04

Memo Item
VENDOR REFUND: FEE REVERSAL

C. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1684.79

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2020

Transaction ID : SA15.129566

Amount of Each Receipt this Period
0.06

Memo Item
VENDOR REFUND: FEE REVERSAL

SUBTOTAL of Receipts This Page (optional).....▶	0.14
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 350 OF 404
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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AMERICA FIRST ACTION, INC.

A. STRIPE

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City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1684.85

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2020

Transaction ID : SA15.129567

Amount of Each Receipt this Period
0.06

Memo Item
VENDOR REFUND: FEE REVERSAL

B. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1684.91

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2020

Transaction ID : SA15.129568

Amount of Each Receipt this Period
0.06

Memo Item
VENDOR REFUND: FEE REVERSAL

C. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1684.97

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2020

Transaction ID : SA15.129569

Amount of Each Receipt this Period
0.06

Memo Item
VENDOR REFUND: FEE REVERSAL

SUBTOTAL of Receipts This Page (optional).....▶	0.18
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 351 OF 404
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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A. STRIPE

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Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1685.03

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2020

Transaction ID : SA15.129570

Amount of Each Receipt this Period
0.06

Memo Item
VENDOR REFUND: FEE REVERSAL

B. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1685.09

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2020

Transaction ID : SA15.129571

Amount of Each Receipt this Period
0.06

Memo Item
VENDOR REFUND: FEE REVERSAL

C. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1685.15

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2020

Transaction ID : SA15.129572

Amount of Each Receipt this Period
0.06

Memo Item
VENDOR REFUND: FEE REVERSAL

SUBTOTAL of Receipts This Page (optional).....	0.18
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 352 OF 404
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. STRIPE

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Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1685.21

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2020

Transaction ID : SA15.129573

Amount of Each Receipt this Period
0.06

Memo Item
VENDOR REFUND: FEE REVERSAL

B. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1685.27

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2020

Transaction ID : SA15.129574

Amount of Each Receipt this Period
0.06

Memo Item
VENDOR REFUND: FEE REVERSAL

C. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1685.33

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2020

Transaction ID : SA15.129575

Amount of Each Receipt this Period
0.06

Memo Item
VENDOR REFUND: FEE REVERSAL

SUBTOTAL of Receipts This Page (optional).....▶	0.18
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 353 OF 404
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
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Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1685.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2020

Transaction ID : SA15.129576

Amount of Each Receipt this Period
0.07

Memo Item
VENDOR REFUND: FEE REVERSAL

B. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1685.47

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2020

Transaction ID : SA15.129577

Amount of Each Receipt this Period
0.07

Memo Item
VENDOR REFUND: FEE REVERSAL

C. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1685.51

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2020

Transaction ID : SA15.129578

Amount of Each Receipt this Period
0.04

Memo Item
VENDOR REFUND: FEE REVERSAL

SUBTOTAL of Receipts This Page (optional).....	0.18
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 354 OF 404
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
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A. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

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City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1685.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2020

Transaction ID : SA15.129579

Amount of Each Receipt this Period
0.18

Memo Item
VENDOR REFUND: FEE REVERSAL

B. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1686.39

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		21		2020

Transaction ID : SA15.129580

Amount of Each Receipt this Period
0.70

Memo Item
VENDOR REFUND: FEE REVERSAL

C. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1686.42

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		23		2020

Transaction ID : SA15.129581

Amount of Each Receipt this Period
0.03

Memo Item
VENDOR REFUND: FEE REVERSAL

SUBTOTAL of Receipts This Page (optional).....	0.91
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 355 OF 404
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
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A. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1686.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	25	/	2020

Transaction ID : SA15.129582

Amount of Each Receipt this Period
0.18

Memo Item
VENDOR REFUND: FEE REVERSAL

B. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1686.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	27	/	2020

Transaction ID : SA15.129583

Amount of Each Receipt this Period
0.04

Memo Item
VENDOR REFUND: FEE REVERSAL

C. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1691.78

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	27	/	2020

Transaction ID : SA15.129584

Amount of Each Receipt this Period
5.14

Memo Item
VENDOR REFUND: FEE REVERSAL

SUBTOTAL of Receipts This Page (optional).....	5.36
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 356 OF 404
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1692.13

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2020

Transaction ID : SA15.129585

Amount of Each Receipt this Period
0.35

Memo Item
VENDOR REFUND: FEE REVERSAL

B. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1692.14

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2020

Transaction ID : SA15.129586

Amount of Each Receipt this Period
0.01

Memo Item
VENDOR REFUND: FEE REVERSAL

C. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1692.15

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2020

Transaction ID : SA15.129587

Amount of Each Receipt this Period
0.01

Memo Item
VENDOR REFUND: FEE REVERSAL

SUBTOTAL of Receipts This Page (optional).....	0.37
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 357 OF 404
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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City SAN FRANCISCO	State CA	Zip Code 94110
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1692.16

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2020

Transaction ID : SA15.129588

Amount of Each Receipt this Period
0.01

Memo Item
VENDOR REFUND: FEE REVERSAL

B. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1692.17

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2020

Transaction ID : SA15.129589

Amount of Each Receipt this Period
0.01

Memo Item
VENDOR REFUND: FEE REVERSAL

C. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1692.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2020

Transaction ID : SA15.129590

Amount of Each Receipt this Period
0.03

Memo Item
VENDOR REFUND: FEE REVERSAL

SUBTOTAL of Receipts This Page (optional).....	0.05
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 358 OF 404
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1692.23

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2020

Transaction ID : SA15.129591

Amount of Each Receipt this Period
0.03

Memo Item
VENDOR REFUND: FEE REVERSAL

B. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1692.26

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2020

Transaction ID : SA15.129592

Amount of Each Receipt this Period
0.03

Memo Item
VENDOR REFUND: FEE REVERSAL

C. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1692.29

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2020

Transaction ID : SA15.129593

Amount of Each Receipt this Period
0.03

Memo Item
VENDOR REFUND: FEE REVERSAL

SUBTOTAL of Receipts This Page (optional).....▶	0.09
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 359 OF 404
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1692.32

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	28	/	2020

Transaction ID : SA15.129594

Amount of Each Receipt this Period
0.03

Memo Item
VENDOR REFUND: FEE REVERSAL

B. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1692.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	28	/	2020

Transaction ID : SA15.129595

Amount of Each Receipt this Period
0.03

Memo Item
VENDOR REFUND: FEE REVERSAL

C. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1692.38

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	28	/	2020

Transaction ID : SA15.129596

Amount of Each Receipt this Period
0.03

Memo Item
VENDOR REFUND: FEE REVERSAL

SUBTOTAL of Receipts This Page (optional).....▶	0.09
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 360 OF 404
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1692.42

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2020

Transaction ID : SA15.129597

Amount of Each Receipt this Period
0.04

Memo Item
VENDOR REFUND: FEE REVERSAL

B. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1692.46

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2020

Transaction ID : SA15.129598

Amount of Each Receipt this Period
0.04

Memo Item
VENDOR REFUND: FEE REVERSAL

C. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1692.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2020

Transaction ID : SA15.129599

Amount of Each Receipt this Period
0.04

Memo Item
VENDOR REFUND: FEE REVERSAL

SUBTOTAL of Receipts This Page (optional).....▶	0.12
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 361 OF 404
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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A. STRIPE

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Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1692.54

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2020

Transaction ID : SA15.129600

Amount of Each Receipt this Period
0.04

Memo Item
VENDOR REFUND: FEE REVERSAL

B. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1692.58

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2020

Transaction ID : SA15.129601

Amount of Each Receipt this Period
0.04

Memo Item
VENDOR REFUND: FEE REVERSAL

C. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1692.62

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2020

Transaction ID : SA15.129602

Amount of Each Receipt this Period
0.04

Memo Item
VENDOR REFUND: FEE REVERSAL

SUBTOTAL of Receipts This Page (optional).....	0.12
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 362 OF 404
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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A. STRIPE

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City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1692.66

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	28	/	2020

Transaction ID : SA15.129603

Amount of Each Receipt this Period
0.04

Memo Item
VENDOR REFUND: FEE REVERSAL

B. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1692.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	28	/	2020

Transaction ID : SA15.129604

Amount of Each Receipt this Period
0.04

Memo Item
VENDOR REFUND: FEE REVERSAL

C. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1692.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	28	/	2020

Transaction ID : SA15.129605

Amount of Each Receipt this Period
0.04

Memo Item
VENDOR REFUND: FEE REVERSAL

SUBTOTAL of Receipts This Page (optional).....▶	0.12
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 363 OF 404
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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A. STRIPE
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Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1692.78

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2020

Transaction ID : SA15.129606

Amount of Each Receipt this Period
0.04

Memo Item
VENDOR REFUND: FEE REVERSAL

B. STRIPE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1692.82

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2020

Transaction ID : SA15.129607

Amount of Each Receipt this Period
0.04

Memo Item
VENDOR REFUND: FEE REVERSAL

C. STRIPE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1692.88

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2020

Transaction ID : SA15.129608

Amount of Each Receipt this Period
0.06

Memo Item
VENDOR REFUND: FEE REVERSAL

SUBTOTAL of Receipts This Page (optional).....	0.14
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 364 OF 404
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1692.94

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2020

Transaction ID : SA15.129609

Amount of Each Receipt this Period
0.06

Memo Item
VENDOR REFUND: FEE REVERSAL

B. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1693.01

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2020

Transaction ID : SA15.129610

Amount of Each Receipt this Period
0.07

Memo Item
VENDOR REFUND: FEE REVERSAL

C. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1693.08

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2020

Transaction ID : SA15.129611

Amount of Each Receipt this Period
0.07

Memo Item
VENDOR REFUND: FEE REVERSAL

SUBTOTAL of Receipts This Page (optional).....▶	0.20
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 365 OF 404
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1693.15

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2020

Transaction ID : SA15.129612

Amount of Each Receipt this Period
0.07

Memo Item
VENDOR REFUND: FEE REVERSAL

B. STRIPE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1693.22

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2020

Transaction ID : SA15.129613

Amount of Each Receipt this Period
0.07

Memo Item
VENDOR REFUND: FEE REVERSAL

C. STRIPE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1693.29

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2020

Transaction ID : SA15.129614

Amount of Each Receipt this Period
0.07

Memo Item
VENDOR REFUND: FEE REVERSAL

SUBTOTAL of Receipts This Page (optional).....▶	0.21
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 366 OF 404
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1693.36

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2020

Transaction ID : SA15.129615

Amount of Each Receipt this Period
0.07

Memo Item
VENDOR REFUND: FEE REVERSAL

B. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1693.43

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2020

Transaction ID : SA15.129616

Amount of Each Receipt this Period
0.07

Memo Item
VENDOR REFUND: FEE REVERSAL

C. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1693.51

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2020

Transaction ID : SA15.129617

Amount of Each Receipt this Period
0.08

Memo Item
VENDOR REFUND: FEE REVERSAL

SUBTOTAL of Receipts This Page (optional).....▶	0.22
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 367 OF 404
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1693.59

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2020

Transaction ID : SA15.129618

Amount of Each Receipt this Period
0.08

Memo Item
VENDOR REFUND: FEE REVERSAL

B. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1693.67

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2020

Transaction ID : SA15.129619

Amount of Each Receipt this Period
0.08

Memo Item
VENDOR REFUND: FEE REVERSAL

C. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1693.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2020

Transaction ID : SA15.129620

Amount of Each Receipt this Period
0.08

Memo Item
VENDOR REFUND: FEE REVERSAL

SUBTOTAL of Receipts This Page (optional).....▶	0.24
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 368 OF 404
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1693.83

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	28	/	2020

Transaction ID : SA15.129621

Amount of Each Receipt this Period
0.08

Memo Item
VENDOR REFUND: FEE REVERSAL

B. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1694.01

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	28	/	2020

Transaction ID : SA15.129622

Amount of Each Receipt this Period
0.18

Memo Item
VENDOR REFUND: FEE REVERSAL

C. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1694.19

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	28	/	2020

Transaction ID : SA15.129623

Amount of Each Receipt this Period
0.18

Memo Item
VENDOR REFUND: FEE REVERSAL

SUBTOTAL of Receipts This Page (optional).....▶	0.44
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 369 OF 404
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1694.37

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2020

Transaction ID : SA15.129624

Amount of Each Receipt this Period
0.18

Memo Item
VENDOR REFUND: FEE REVERSAL

B. STRIPE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3180 18TH STREET

City SAN FRANCISCO	State CA	Zip Code 94110
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1699.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2020

Transaction ID : SA15.129625

Amount of Each Receipt this Period
5.15

Memo Item
VENDOR REFUND: FEE REVERSAL

C.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	5.33
TOTAL This Period (last page this line number only).....	39.76

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 370 OF 404
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. CHAIN BRIDGE BANK
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1445-A LAUGHLIN AVE

City MCLEAN	State VA	Zip Code 22101
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
33779.68

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2020

Transaction ID : SA17.129532

Amount of Each Receipt this Period
0.18

Memo Item
INTEREST

B. CHAIN BRIDGE BANK
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1445-A LAUGHLIN AVE

City MCLEAN	State VA	Zip Code 22101
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
33911.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2020

Transaction ID : SA17.129533

Amount of Each Receipt this Period
131.87

Memo Item
INTEREST

C.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	132.05
TOTAL This Period (last page this line number only).....	132.05

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. 1ST BANKCARD

Mailing Address **COMMERCIAL CARD PAYMENT PROCESSING
P.O. BOX 2818**

City **OMAHA** State **NE** Zip Code **68103-2818**

Purpose of Disbursement
CREDIT CARD PAYMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.11182
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. 1ST BANKCARD

Mailing Address **COMMERCIAL CARD PAYMENT PROCESSING
P.O. BOX 2818**

City **OMAHA** State **NE** Zip Code **68103-2818**

Purpose of Disbursement
CREDIT CARD PAYMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.11182
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. 1ST BANKCARD

Mailing Address **COMMERCIAL CARD PAYMENT PROCESSING
P.O. BOX 2818**

City **OMAHA** State **NE** Zip Code **68103-2818**

Purpose of Disbursement
CREDIT CARD PAYMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.11182
Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. CAPITAL RESEARCH GROUP, LLC		Date of Disbursement MM / DD / YYYY 05 / 04 / 2020
Mailing Address 1220 L STREET NW SUITE 100-467		FEC Identification Number C [REDACTED] Transaction ID : SB21B.11181 Amount of Each Disbursement this Period 7500.00
City WASHINGTON	State DC	Zip Code 20005
Purpose of Disbursement RESEARCH CONSULTING		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. CAPITAL RESEARCH GROUP, LLC		Date of Disbursement MM / DD / YYYY 05 / 26 / 2020
Mailing Address 1220 L STREET NW SUITE 100-467		FEC Identification Number C [REDACTED] Transaction ID : SB21B.11182 Amount of Each Disbursement this Period 7500.00
City WASHINGTON	State DC	Zip Code 20005
Purpose of Disbursement RESEARCH CONSULTING		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. CLOUDFLARE		Date of Disbursement MM / DD / YYYY 05 / 07 / 2020
Mailing Address 101 TOWNSEND ST		FEC Identification Number C [REDACTED] Transaction ID : SB21B.1296 Amount of Each Disbursement this Period 60.00
City SAN FRANCISCO	State CA	Zip Code 94107
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.111825]: SOFTWARE SUBSCRIPTION		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	15000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. CONVERT DIGITAL		Date of Disbursement MM / DD / YYYY 05 / 11 / 2020
Mailing Address 45 NORTH HILL DR. SUITE 100		FEC Identification Number C [REDACTED] Transaction ID : SB21B.11182 Amount of Each Disbursement this Period 42661.04
City WARRENTON	State VA	Zip Code 20186
Purpose of Disbursement DIGITAL FUNDRAISING		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. CONVERT DIGITAL		Date of Disbursement MM / DD / YYYY 05 / 29 / 2020
Mailing Address 45 NORTH HILL DR. SUITE 100		FEC Identification Number C [REDACTED] Transaction ID : SB21B.11182 Amount of Each Disbursement this Period 40075.00
City WARRENTON	State VA	Zip Code 20186
Purpose of Disbursement CONTRIBUTOR COLLATERAL: PUZZLES AND FACE MASKS		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. CORTES, STEVEN, C, ,		Date of Disbursement MM / DD / YYYY 05 / 21 / 2020
Mailing Address 3717 N HERMITAGE		FEC Identification Number C [REDACTED] Transaction ID : SB21B.11182 Amount of Each Disbursement this Period 7500.00
City CHICAGO	State IL	Zip Code 60613
Purpose of Disbursement COMMUNICATIONS CONSULTING		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	90236.04
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. FORMSTACK, LLC		Date of Disbursement MM / DD / YYYY 05 / 01 / 2020
Mailing Address 11671 LANTERN RD #300		FEC Identification Number C [REDACTED] Transaction ID : SB21B.12962 Amount of Each Disbursement this Period 59.00
City FISHERS	State IN	Zip Code 46038
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.111823]: SOFTWARE SUBSCRIPTION		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. JAMS, INC.		Date of Disbursement MM / DD / YYYY 05 / 15 / 2020
Mailing Address 18881 VON KARMAN AVE #350		FEC Identification Number C [REDACTED] Transaction ID : SB21B.11183 Amount of Each Disbursement this Period 15800.00
City IRVINE	State CA	Zip Code 92612
Purpose of Disbursement LEGAL SERVICES		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. JONES DAY		Date of Disbursement MM / DD / YYYY 05 / 13 / 2020
Mailing Address PO BOX 7805 BEN FRANKLIN STATION		FEC Identification Number C [REDACTED] Transaction ID : SB21B.11181 Amount of Each Disbursement this Period 37031.25
City WASHINGTON	State DC	Zip Code 20044
Purpose of Disbursement LEGAL CONSULTING		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	52831.25
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. JONES DAY		Date of Disbursement MM / DD / YYYY 05 / 13 / 2020
Mailing Address PO BOX 7805 BEN FRANKLIN STATION		FEC Identification Number C Transaction ID : SB21B.11181 Amount of Each Disbursement this Period 275.00
City WASHINGTON	State DC	
Purpose of Disbursement LEGAL CONSULTING		Memo Item <input type="checkbox"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. JONES DAY		Date of Disbursement MM / DD / YYYY 05 / 13 / 2020
Mailing Address PO BOX 7805 BEN FRANKLIN STATION		FEC Identification Number C Transaction ID : SB21B.11181 Amount of Each Disbursement this Period 25530.00
City WASHINGTON	State DC	
Purpose of Disbursement LEGAL CONSULTING		Memo Item <input type="checkbox"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. JONES DAY		Date of Disbursement MM / DD / YYYY 05 / 13 / 2020
Mailing Address PO BOX 7805 BEN FRANKLIN STATION		FEC Identification Number C Transaction ID : SB21B.11181 Amount of Each Disbursement this Period 101082.79
City WASHINGTON	State DC	
Purpose of Disbursement LEGAL CONSULTING		Memo Item <input type="checkbox"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	126887.79
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. M&B ANALYTICS

Mailing Address P.O. BOX 2583

City
ALEXANDRIA

State
VA

Zip Code
22301

Purpose of Disbursement
DATA AND ANALYTICS CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	4		2	0	2	0

FEC Identification Number

C

Transaction ID : SB21B.11183

Amount of Each Disbursement this Period

7500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. MINTZ, LEVIN, COHN, FERRIS, GLOVSKY AND POPEO, P.C

Mailing Address 666 THIRD AVENUE

City
NEW YORK

State
NY

Zip Code
10017

Purpose of Disbursement
LEGAL CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	3		2	0	2	0

FEC Identification Number

C

Transaction ID : SB21B.11181

Amount of Each Disbursement this Period

66009.60

Memo Item

Full Name (Last, First, Middle Initial)

C. OLYMPIC MEDIA LLC

Mailing Address 2402 POTOMAC AVE
#102

City
ALEXANDRIA

State
VA

Zip Code
22301

Purpose of Disbursement
EMAIL MARKETING EXPENSE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	4		2	0	2	0

FEC Identification Number

C

Transaction ID : SB21B.11183

Amount of Each Disbursement this Period

1312.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

74821.60

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. ONMESSAGE INC.		Date of Disbursement MM / DD / YYYY 05 / 04 / 2020
Mailing Address 705 MELVIN AVE #105		FEC Identification Number C [] Transaction ID : SB21B.11183
City ANNAPOLIS	State MD	Zip Code 21401
Purpose of Disbursement RESEARCH CONSULTING		Amount of Each Disbursement this Period [] 7500.00
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. OPINION INSIGHT, LLC		Date of Disbursement MM / DD / YYYY 05 / 15 / 2020
Mailing Address 18 VILLAGE COURT		FEC Identification Number C [] Transaction ID : SB21B.11183
City HAZLET	State NJ	Zip Code 07730
Purpose of Disbursement POLLING EXPENSE		Amount of Each Disbursement this Period [] 15000.00
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. OPINION INSIGHT, LLC		Date of Disbursement MM / DD / YYYY 05 / 20 / 2020
Mailing Address 18 VILLAGE COURT		FEC Identification Number C [] Transaction ID : SB21B.11183
City HAZLET	State NJ	Zip Code 07730
Purpose of Disbursement POLLING EXPENSE		Amount of Each Disbursement this Period [] 25960.00
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	[] 48460.00
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. OPINION INSIGHT, LLC		Date of Disbursement MM / DD / YYYY 05 / 21 / 2020	
Mailing Address 18 VILLAGE COURT		FEC Identification Number C [REDACTED] Transaction ID : SB21B.11183 Amount of Each Disbursement this Period 28875.00	
City HAZLET	State NJ	Zip Code 07730	Category/ Type
Purpose of Disbursement POLLING EXPENSE			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. REVV LLC		Date of Disbursement MM / DD / YYYY 05 / 04 / 2020	
Mailing Address 1776 WILSON BLVD STE 530		FEC Identification Number C [REDACTED] Transaction ID : SB21B.12962 Amount of Each Disbursement this Period 49.00	
City ARLINGTON	State VA	Zip Code 22209	Category/ Type
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.111822]: MERCHANT FEE			
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. SHUTTERSTOCK		Date of Disbursement MM / DD / YYYY 05 / 15 / 2020	
Mailing Address 350 FIFTH AVE 21ST FLOOR		FEC Identification Number C [REDACTED] Transaction ID : SB21B.12963 Amount of Each Disbursement this Period 29.00	
City NEW YORK	State NY	Zip Code 10118	Category/ Type
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.111825]:IMAGE RENTAL			
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	28875.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 01 / 2020

FEC Identification Number

C

Transaction ID : SB21B.11183

Amount of Each Disbursement this Period

1050.53

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 04 / 2020

FEC Identification Number

C

Transaction ID : SB21B.11183

Amount of Each Disbursement this Period

889.83

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 05 / 2020

FEC Identification Number

C

Transaction ID : SB21B.11184

Amount of Each Disbursement this Period

574.27

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

2514.63

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 06 / 2020

FEC Identification Number

C
Transaction ID : SB21B.11184
Amount of Each Disbursement this Period
1159.82

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 07 / 2020

FEC Identification Number

C
Transaction ID : SB21B.11184
Amount of Each Disbursement this Period
376.65

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 08 / 2020

FEC Identification Number

C
Transaction ID : SB21B.11184
Amount of Each Disbursement this Period
1276.09

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

2812.56

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 11 / 2020

FEC Identification Number

C

Transaction ID : SB21B.11184
Amount of Each Disbursement this Period

1740.27

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 12 / 2020

FEC Identification Number

C

Transaction ID : SB21B.11184
Amount of Each Disbursement this Period

1593.00

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 13 / 2020

FEC Identification Number

C

Transaction ID : SB21B.11184
Amount of Each Disbursement this Period

4554.53

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

7887.80

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 14 / 2020

FEC Identification Number

C
Transaction ID : SB21B.11184
Amount of Each Disbursement this Period
1132.19

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 15 / 2020

FEC Identification Number

C
Transaction ID : SB21B.11184
Amount of Each Disbursement this Period
1787.18

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 18 / 2020

FEC Identification Number

C
Transaction ID : SB21B.11184
Amount of Each Disbursement this Period
2101.11

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5020.48

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 19 / 2020

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.11185
Amount of Each Disbursement this Period

[REDACTED] 1824.80

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 20 / 2020

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.11185
Amount of Each Disbursement this Period

[REDACTED] 1921.48

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 21 / 2020

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.11185
Amount of Each Disbursement this Period

[REDACTED] 894.16

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 4640.44

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.11185
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.11185
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.11185
Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 28 / 2020

FEC Identification Number

C
Transaction ID : SB21B.11185
Amount of Each Disbursement this Period
3188.60

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 29 / 2020

FEC Identification Number

C
Transaction ID : SB21B.11185
Amount of Each Disbursement this Period
403.39

Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY, LLC

Mailing Address 2311 WILSON BLVD
SUITE 200

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement
DIGITAL CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 07 / 2020

FEC Identification Number

C
Transaction ID : SB21B.11182
Amount of Each Disbursement this Period
7500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

11091.99

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. TARGETED VICTORY, LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	12	/	2020

Mailing Address 2311 WILSON BLVD
SUITE 200

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement
ONLINE ADVERTISING

FEC Identification Number

C []
Transaction ID : SB21B.11182
Amount of Each Disbursement this Period
[] 10750.00

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY, LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	14	/	2020

Mailing Address 2311 WILSON BLVD
SUITE 200

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement
DIGITAL FUNDRAISING

FEC Identification Number

C []
Transaction ID : SB21B.11181!
Amount of Each Disbursement this Period
[] 116927.09

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY, LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	26	/	2020

Mailing Address 2311 WILSON BLVD
SUITE 200

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement
WEBSITE DEVELOPMENT AND HOSTING

FEC Identification Number

C []
Transaction ID : SB21B.1118!
Amount of Each Disbursement this Period
[] 8500.00

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[] 136177.09

[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. THE COEFFICIENT GROUP

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1881 MAIN ST
#305

M M M	/	D D D	/	Y Y Y Y Y
05		08		2020

City KANSAS CITY State MO Zip Code 64108

FEC Identification Number

Purpose of Disbursement
POLLING EXPENSE

C

Transaction ID : SB21B.11185
Amount of Each Disbursement this Period

Candidate Name

Category/
Type

7000.00

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

State: District:

B. XACT DATA DISCOVERY

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 5800 FOXRIDGE DR
STE 406

M M M	/	D D D	/	Y Y Y Y Y
05		28		2020

City MISSION State KS Zip Code 66202

FEC Identification Number

Purpose of Disbursement
DATA ANALYSIS

C

Transaction ID : SB21B.11186
Amount of Each Disbursement this Period

Candidate Name

Category/
Type

552.18

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

State: District:

C.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

M M M	/	D D D	/	Y Y Y Y Y
-------	---	-------	---	-----------

City State Zip Code

FEC Identification Number

Purpose of Disbursement

C

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

--

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

7552.18

TOTAL This Period (last page this line number only)..... ▶

732074.47

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 389 OF 404
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor BULLDOG COMPLIANCE			Nature of Debt (Purpose): COMPLIANCE CONSULTING
Mailing Address 138 CONANT ST 2ND FLOOR			
City BEVERLY	State MA	Zip Code 01915	

Outstanding Balance Beginning This Period	Transaction ID : SD10.121590	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="9850.00"/>	<input type="text" value="0.00"/>	<input type="text" value="9850.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor CAPITAL RESEARCH GROUP, LLC			Nature of Debt (Purpose): RESEARCH CONSULTING
Mailing Address 1220 L STREET NW SUITE 100-467			
City WASHINGTON	State DC	Zip Code 20005	

Outstanding Balance Beginning This Period	Transaction ID : SD10.111768	
<input type="text" value="7500.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="7500.00"/>	<input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor CAPITAL RESEARCH GROUP, LLC			Nature of Debt (Purpose): RESEARCH CONSULTING
Mailing Address 1220 L STREET NW SUITE 100-467			
City WASHINGTON	State DC	Zip Code 20005	

Outstanding Balance Beginning This Period	Transaction ID : SD10.121587	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="7500.00"/>	<input type="text" value="0.00"/>	<input type="text" value="7500.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="17350.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 390 OF 404
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor CONVERT DIGITAL			Nature of Debt (Purpose): DIGITAL FUNDRAISING
Mailing Address 45 NORTH HILL DR. SUITE 100			
City WARRENTON	State VA	Zip Code 20186	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID : SD10.121591	
Amount Incurred This Period <input type="text" value="58933.14"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="58933.14"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor JONES DAY			Nature of Debt (Purpose): LEGAL CONSULTING
Mailing Address PO BOX 7805 BEN FRANKLIN STATION			
City WASHINGTON	State DC	Zip Code 20044	

Outstanding Balance Beginning This Period <input type="text" value="37031.25"/>	Transaction ID : SD10.111715	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="37031.25"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor JONES DAY			Nature of Debt (Purpose): LEGAL CONSULTING
Mailing Address PO BOX 7805 BEN FRANKLIN STATION			
City WASHINGTON	State DC	Zip Code 20044	

Outstanding Balance Beginning This Period <input type="text" value="275.00"/>	Transaction ID : SD10.111716	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="275.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="58933.14"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 391 OF 404
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor JONES DAY			Nature of Debt (Purpose): LEGAL CONSULTING
Mailing Address PO BOX 7805 BEN FRANKLIN STATION			
City WASHINGTON	State DC	Zip Code 20044	

Outstanding Balance Beginning This Period 25530.00	Transaction ID : SD10.111717	
Amount Incurred This Period 0.00	Payment This Period 25530.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor JONES DAY			Nature of Debt (Purpose): LEGAL CONSULTING
Mailing Address PO BOX 7805 BEN FRANKLIN STATION			
City WASHINGTON	State DC	Zip Code 20044	

Outstanding Balance Beginning This Period 101082.79	Transaction ID : SD10.111718	
Amount Incurred This Period 0.00	Payment This Period 101082.79	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor JONES DAY			Nature of Debt (Purpose): LEGAL CONSULTING
Mailing Address PO BOX 7805 BEN FRANKLIN STATION			
City WASHINGTON	State DC	Zip Code 20044	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.121586	
Amount Incurred This Period 101959.16	Payment This Period 0.00	Outstanding Balance at Close of This Period 101959.16

1) SUBTOTALS This Period This Page (optional)..... ▶	101959.16
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 392 OF 404
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor MINTZ, LEVIN, COHN, FERRIS, GLOVSKY AND POPEO, P.C			Nature of Debt (Purpose): LEGAL CONSULTING
Mailing Address 666 THIRD AVENUE			
City NEW YORK	State NY	Zip Code 10017	

Outstanding Balance Beginning This Period 66009.60	Transaction ID : SD10.111719	
Amount Incurred This Period 0.00	Payment This Period 66009.60	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor MINTZ, LEVIN, COHN, FERRIS, GLOVSKY AND POPEO, P.C			Nature of Debt (Purpose): LEGAL CONSULTING
Mailing Address 666 THIRD AVENUE			
City NEW YORK	State NY	Zip Code 10017	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.129895	
Amount Incurred This Period 74177.55	Payment This Period 0.00	Outstanding Balance at Close of This Period 74177.55

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor ONMESSAGE INC.			Nature of Debt (Purpose): POLLING EXPENSE
Mailing Address 705 MELVIN AVE #105			
City ANNAPOLIS	State MD	Zip Code 21401	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.121588	
Amount Incurred This Period 59400.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 59400.00

1) SUBTOTALS This Period This Page (optional)..... ▶	133577.55
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 393 OF 404
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor TARGETED VICTORY, LLC		Nature of Debt (Purpose): DIGITAL FUNDRAISING	
Mailing Address 2311 WILSON BLVD SUITE 200			
City ARLINGTON	State VA	Zip Code 22201	

Outstanding Balance Beginning This Period 116927.09	Transaction ID : SD10.111765	
Amount Incurred This Period 0.00	Payment This Period 116927.09	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor TARGETED VICTORY, LLC		Nature of Debt (Purpose): CREATIVE FEES AND DIGITAL CONSULTING	
Mailing Address 2311 WILSON BLVD SUITE 200			
City ARLINGTON	State VA	Zip Code 22201	

Outstanding Balance Beginning This Period 10750.00	Transaction ID : SD10.111766	
Amount Incurred This Period 0.00	Payment This Period 10750.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor TARGETED VICTORY, LLC		Nature of Debt (Purpose): DIGITAL CONSULTING	
Mailing Address 2311 WILSON BLVD SUITE 200			
City ARLINGTON	State VA	Zip Code 22201	

Outstanding Balance Beginning This Period 7500.00	Transaction ID : SD10.111767	
Amount Incurred This Period 0.00	Payment This Period 7500.00	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional)..... ▶	0.00
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 394 OF 404
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor TARGETED VICTORY, LLC			Nature of Debt (Purpose): ONLINE ADVERTISING
Mailing Address 2311 WILSON BLVD SUITE 200			
City ARLINGTON	State VA	Zip Code 22201	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.121589	
Amount Incurred This Period 205000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 205000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor TARGETED VICTORY, LLC			Nature of Debt (Purpose): CREATIVE FEES AND DIGITAL CONSULTING
Mailing Address 2311 WILSON BLVD SUITE 200			
City ARLINGTON	State VA	Zip Code 22201	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.129897	
Amount Incurred This Period 10750.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 10750.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)..... ▶	215750.00
2) TOTALS This Period (last page this line number only)..... ▶	527569.85
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	527569.85

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.
FEC IDENTIFICATION NUMBER
C C00637512

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee CHECKMATE STRATEGIES, LLC
Mailing Address 5 BANYAN COURT
City JACKSON State NJ Zip Code 08527
Purpose of Expenditure DIRECT MAIL: PRINTING AND POSTAGE
Category/Type
Date of Public Distribution/Dissemination 05 / 04 / 2020
Amount 133616.64
Transaction ID : SE.98320
Date of Disbursement or Obligation 05 / 04 / 2020

Name of Federal Candidate: BIDEN, JOSEPH R JR, ,
Support Oppose
Office Sought: President
House Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 2998677.86
Disbursement For: Primary General 2020
Other (specify)

Full Name of Payee CHECKMATE STRATEGIES, LLC
Mailing Address 5 BANYAN COURT
City JACKSON State NJ Zip Code 08527
Purpose of Expenditure DIRECT MAIL: PRINTING AND POSTAGE
Category/Type
Date of Public Distribution/Dissemination 05 / 13 / 2020
Amount 137537.47
Transaction ID : SE.111723
Date of Disbursement or Obligation 05 / 06 / 2020

Name of Federal Candidate: BIDEN, JOSEPH R JR, ,
Support Oppose
Office Sought: President
House Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 3662572.17
Disbursement For: Primary General 2020
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 271154.11
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

PROCH, JON, ,

[Electronically Filed]

Date

06 / 20 / 2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.
FEC IDENTIFICATION NUMBER
C C00637512

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
CHECKMATE STRATEGIES, LLC
Mailing Address
5 BANYAN COURT
City
JACKSON State
NJ Zip Code
08527
Purpose of Expenditure
DIRECT MAIL: PRINTING AND POSTAGE
Category/Type

Date of Public Distribution/Dissemination
05 / 21 / 2020
Amount
148122.45
Transaction ID : SE.111781
Date of Disbursement or Obligation
05 / 13 / 2020

Name of Federal Candidate:
BIDEN, JOSEPH R JR, , ,
Support
Oppose

Office Sought:
House
Senate
District:
State: PA
Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
CHECKMATE STRATEGIES, LLC
Mailing Address
5 BANYAN COURT
City
JACKSON State
NJ Zip Code
08527
Purpose of Expenditure
DIRECT MAIL: PRINTING AND POSTAGE
Category/Type

Date of Public Distribution/Dissemination
05 / 18 / 2020
Amount
18107.07
Transaction ID : SE.111770
Date of Disbursement or Obligation
05 / 14 / 2020

Name of Federal Candidate:
BIDEN, JOSEPH R JR, , ,
Support
Oppose

Office Sought:
House
Senate
District:
State: PA
Disbursement For:
Primary
General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 166229.52
(b) SUBTOTAL of Unitemized Independent Expenditures.....
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

PROCH, JON, , ,

[Electronically Filed]

Date 06 / 20 / 2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.
FEC IDENTIFICATION NUMBER
C C00637512

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee DEL RAY MEDIA LLC
Mailing Address 1427 LESLIE AVE
City ALEXANDRIA State VA Zip Code 22301
Purpose of Expenditure PLACED MEDIA: TV
Name of Federal Candidate: BIDEN, JOSEPH R JR, , ,
Calendar Year-To-Date Per Election for Office Sought 3525034.70
Disbursement For: Primary

Full Name of Payee DEL RAY MEDIA LLC
Mailing Address 1427 LESLIE AVE
City ALEXANDRIA State VA Zip Code 22301
Purpose of Expenditure PLACED MEDIA: TV
Name of Federal Candidate: BIDEN, JOSEPH R JR, , ,
Calendar Year-To-Date Per Election for Office Sought 4640598.59
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 1504383.26
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature: PROCH, JON, , , [Electronically Filed] Date: 06 / 20 / 2020

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.
FEC IDENTIFICATION NUMBER
C C00637512

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee DEL RAY MEDIA LLC
Mailing Address 1427 LESLIE AVE
City ALEXANDRIA State VA Zip Code 22301
Purpose of Expenditure PLACED MEDIA: TV
Category/Type
Name of Federal Candidate: BIDEN, JOSEPH R JR, , ,
Office Sought: President
Disbursement For: General 2020
Amount 342167.51
Transaction ID: SE.111729

Full Name of Payee DEL RAY MEDIA LLC
Mailing Address 1427 LESLIE AVE
City ALEXANDRIA State VA Zip Code 22301
Purpose of Expenditure PLACED MEDIA: TV
Category/Type
Name of Federal Candidate: BIDEN, JOSEPH R JR, , ,
Office Sought: President
Disbursement For: General 2020
Amount 386129.54
Transaction ID: SE.111736

(a) SUBTOTAL of Itemized Independent Expenditures 728297.05
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

PROCH, JON, , ,

[Electronically Filed]

Date 06 / 20 / 2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.
FEC IDENTIFICATION NUMBER
C C00637512

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee ONMESSAGE INC.
Mailing Address 705 MELVIN AVE #105
City ANNAPOLIS State MD Zip Code 21401
Purpose of Expenditure PRODUCTION COST: VIDEO
Category/Type
Name of Federal Candidate: BIDEN, JOSEPH R JR, , ,
Office Sought: President
Disbursement For: General 2020
Amount 20000.00
Transaction ID: SE.111738
Date of Disbursement or Obligation 05/14/2020
Calendar Year-To-Date Per Election for Office Sought 4128498.27

Full Name of Payee REDPRINT STRATEGY
Mailing Address 1050 JOHNNIE DODDS BLVD UNIT 2414
City MOUNT PLEASANT State SC Zip Code 29465
Purpose of Expenditure PRODUCTION COST: VIDEO
Category/Type
Name of Federal Candidate: BIDEN, JOSEPH R JR, , ,
Office Sought: President
Disbursement For: General 2020
Amount 20000.00
Transaction ID: SE.111731
Date of Disbursement or Obligation 05/12/2020
Calendar Year-To-Date Per Election for Office Sought 3340331.74

(a) SUBTOTAL of Itemized Independent Expenditures 40000.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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PROCH, JON, , ,

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Date 06/20/2020

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.
FEC IDENTIFICATION NUMBER
C C00637512

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: REDPRINT STRATEGY
Mailing Address: 1050 JOHNNIE DODDS BLVD UNIT 2414
City: MOUNT PLEASANT, State: SC, Zip Code: 29465
Purpose of Expenditure: PRODUCTION COST: VIDEO
Category/Type:
Name of Federal Candidate: BIDEN, JOSEPH R JR, , ,
Office Sought: President
Disbursement For: General 2020
Amount: 20000.00
Transaction ID: SE.111793
Date of Disbursement or Obligation: 05/12/2020

Full Name of Payee: SOMETHING ELSE STRATEGIES
Mailing Address: 212 GOLDEN WILLOW COURT
City: EASLEY, State: SC, Zip Code: 29642
Purpose of Expenditure: PRODUCTION COST: VIDEO
Category/Type:
Name of Federal Candidate: BIDEN, JOSEPH R JR, , ,
Office Sought: President
Disbursement For: Primary
Amount: 18675.00
Transaction ID: SE.98314
Date of Disbursement or Obligation: 05/01/2020

(a) SUBTOTAL of Itemized Independent Expenditures 38675.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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PROCH, JON, , ,

[Electronically Filed]

Date

06 / 20 / 2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.
FEC IDENTIFICATION NUMBER
C C00637512

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
SOMETHING ELSE STRATEGIES
Mailing Address
212 GOLDEN WILLOW COURT
City
EASLEY State
SC Zip Code
29642
Purpose of Expenditure
PRODUCTION COST: VIDEO
Category/Type
Date of Public Distribution/Dissemination
05 / 15 / 2020
Amount
20000.00
Transaction ID : SE.111724
Date of Disbursement or Obligation
05 / 13 / 2020

Name of Federal Candidate:
BIDEN, JOSEPH R JR, ,
Support Oppose
Office Sought:
House Senate State: PA
Disbursement For:
Primary General
Other (specify)

Full Name of Payee
SOMETHING ELSE STRATEGIES
Mailing Address
212 GOLDEN WILLOW COURT
City
EASLEY State
SC Zip Code
29642
Purpose of Expenditure
PRODUCTION COST: VIDEO
Category/Type
Date of Public Distribution/Dissemination
05 / 15 / 2020
Amount
17500.00
Transaction ID : SE.111742
Date of Disbursement or Obligation
05 / 14 / 2020

Name of Federal Candidate:
BIDEN, JOSEPH R JR, ,
Support Oppose
Office Sought:
House Senate State: PA
Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures
37500.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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PROCH, JON, ,

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Date 06 / 20 / 2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.
FEC IDENTIFICATION NUMBER
C C00637512

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
SOMETHING ELSE STRATEGIES
Mailing Address
212 GOLDEN WILLOW COURT
City
EASLEY State
SC Zip Code
29642
Purpose of Expenditure
PRODUCTION COST: VIDEO
Category/Type
Date of Public Distribution/Dissemination
06 / 04 / 2020
Amount
20000.00
Transaction ID : SE.111784
Date of Disbursement or Obligation
05 / 20 / 2020

Name of Federal Candidate:
BIDEN, JOSEPH R JR, ,
Support Oppose
Office Sought:
House Senate State:
President
Disbursement For:
Primary General
Other (specify)

Full Name of Payee
STORYTELLERS GROUP LLC
Mailing Address
PO BOX 1832
City
GALLATIN State
TN Zip Code
37066
Purpose of Expenditure
DIRECT MAIL: PRINTING AND POSTAGE
Category/Type
Date of Public Distribution/Dissemination
05 / 20 / 2020
Amount
84710.43
Transaction ID : SE.111775
Date of Disbursement or Obligation
05 / 13 / 2020

Name of Federal Candidate:
BIDEN, JOSEPH R JR, ,
Support Oppose
Office Sought:
House Senate State:
President
Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures
104710.43
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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PROCH, JON, ,

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Date
06 / 20 / 2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.
FEC IDENTIFICATION NUMBER
C C00637512

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
TARGETED VICTORY, LLC
Memo Item

Date of Public Distribution/Dissemination
05 / 15 / 2020

Mailing Address
2311 WILSON BLVD
SUITE 200

Amount
148276.56

City State Zip Code
ARLINGTON VA 22201

Transaction ID : SE.111730
Date of Disbursement or Obligation

Purpose of Expenditure
DIGITAL ADVERTISING
Category/Type

05 / 13 / 2020

Name of Federal Candidate:
BIDEN, JOSEPH R JR, ,
Support Oppose

Office Sought:
House Senate
President State:
Checked: President

Calendar Year-To-Date
Per Election for Office Sought
3894737.84

Disbursement For:
Primary General
Checked: General
Other (specify)

Full Name of Payee
TARGETED VICTORY, LLC
Memo Item

Date of Public Distribution/Dissemination
05 / 15 / 2020

Mailing Address
2311 WILSON BLVD
SUITE 200

Amount
272436.68

City State Zip Code
ARLINGTON VA 22201

Transaction ID : SE.111722
Date of Disbursement or Obligation

Purpose of Expenditure
DIGITAL ADVERTISING
Category/Type

05 / 14 / 2020

Name of Federal Candidate:
BIDEN, JOSEPH R JR, ,
Support Oppose

Office Sought:
House Senate
President State: PA
Checked: President

Calendar Year-To-Date
Per Election for Office Sought
5081157.72

Disbursement For:
Primary General
Checked: Primary
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures
420713.24

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures

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PROCH, JON, ,

[Electronically Filed]

Date 06 / 20 / 2020

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) AMERICA FIRST ACTION, INC.	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00637512 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item TARGETED VICTORY, LLC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 15 / 2020
Mailing Address 2311 WILSON BLVD SUITE 200			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 129050.00 </div>
City ARLINGTON	State VA	Zip Code 22201	Transaction ID : SE.111737 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 14 / 2020
Purpose of Expenditure DIGITAL ADVERTISING		Category/Type 	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose BIDEN, JOSEPH R JR, , ,
Name of Federal Candidate: BIDEN, JOSEPH R JR, , ,		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate	District: _____ State: _____
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> 4108498.27 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item THE STONERIDGE GROUP LLC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 08 / 2020
Mailing Address 960 NORTH POINT PKWY STE 225			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 79748.03 </div>
City ALPHARETTA	State GA	Zip Code 30005	Transaction ID : SE.98325 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 05 / 2020
Purpose of Expenditure DIRECT MAIL: PRINTING AND POSTAGE		Category/Type 	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose BIDEN, JOSEPH R JR, , ,
Name of Federal Candidate: BIDEN, JOSEPH R JR, , ,		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate	District: _____ State: _____
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> 2978164.23 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 208798.03 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> _____ </div>
(c) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 3520460.64 </div>

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Signature PROCH, JON, , , [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 06 / 20 / 2020