

**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

Restoration PAC

ADDRESS (number and street)

1901 Butterfield Road

Ste. 120

Check if different
than previously
reported. (ACC)

Downers Grove

IL

60515

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00571588

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)
(Non-Election
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

C

(d) 30-Day
POST-Election
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

C

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

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

Gaskill, Sherry, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Gaskill, Sherry, , ,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

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

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Restoration PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
07 / 01 / 2019 To: M M / D D / Y Y Y Y Y Y
12 / 31 / 2019

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2019		885254.46
(b) Cash on Hand at Beginning of Reporting Period.....	1031689.82	
(c) Total Receipts (from Line 19)	1611882.81	2619066.07
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	2643572.63	3504320.53
7. Total Disbursements (from Line 31).....	1648030.51	2508778.41
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	995542.12	995542.12
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)	0.00	



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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Restoration PAC

Report Covering the Period:

From:

M M / D D / Y Y Y Y
07 / 01 / 2019

To:

M M / D D / Y Y Y Y
12 / 31 / 2019
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).....

1602220.92

2602620.92

(ii) Unitemized

9208.54

15987.95

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

1611429.46

2618608.87

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

1611429.46

2618608.87

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).....

453.35

457.20

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))

1611882.81

2619066.07

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

1611882.81

2619066.07

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	557018.53	1115736.43
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	557018.53	1115736.43
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)	990848.00	1292848.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	163.98	193.98
(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)).....	163.98	193.98
29. Other Disbursements (Including Non-Federal Donations).....	100000.00	100000.00
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)) ..	1648030.51	2508778.41
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1648030.51	2508778.41

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)	1611429.46	2618608.87
34. Total Contribution Refunds (from Line 28(d))	163.98	193.98
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1611265.48	2618414.89
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	557018.53	1115736.43
37. Offsets to Operating Expenditures (from Line 15, page 3).....	453.35	457.20
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	556565.18	1115279.23

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

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☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

Restoration PAC

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

A. Barosse, Ellen, , ,

Mailing Address 1215 Barley Mill Rd.

City
WilmingtonState
DEZip Code
19807FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Ashland Spring, LLCOccupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	08	2019

Transaction ID : SA11AI.9927

Amount of Each Receipt this Period

100000.00

☐ Memo Item
Contribution

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

B. Gerndt's Green Lawns, LLC

Mailing Address N4077 County Rd. E

City
FreedomState
WIZip Code
54130FEC 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 ▼

250.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
07	30	2019

Transaction ID : SA11AI.9848

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. Grane, Paul, , ,

Mailing Address 3855 Douglas Road

City
Downers GroveState
ILZip Code
60515FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Grane TransportationOccupation (for Individual)
VP

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
12	31	2019

Transaction ID : SA11AI.11177

Amount of Each Receipt this Period

250.00

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

100500.00

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 7 OF 98

(check only one)

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

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NAME OF COMMITTEE (In Full)

Restoration PAC

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

A. Pearman, John, , ,

Mailing Address 503 Turner Avenue

City
Glen Ellyn

State
IL

Zip Code
60137

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Delos Communications

Occupation (for Individual)
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 02 / 2019

Transaction ID : SA11AI.9550

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Pearman, John, , ,

Mailing Address 503 Turner Avenue

City
Glen Ellyn

State
IL

Zip Code
60137

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Delos Communications

Occupation (for Individual)
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

815.92

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 02 / 2019

Transaction ID : SA11AI.9596

Amount of Each Receipt this Period

115.92

☐ Memo Item

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

C. Pearman, John, , ,

Mailing Address 503 Turner Avenue

City
Glen Ellyn

State
IL

Zip Code
60137

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Delos Communications

Occupation (for Individual)
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1065.92

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 18 / 2019

Transaction ID : SA11AI.9714

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

465.92

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

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

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Restoration PAC

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

A. Pearman, John, , ,

Mailing Address 503 Turner Avenue

City
Glen Ellyn

State
IL

Zip Code
60137

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Delos Communications

Occupation (for Individual)
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1255.92

Date of Receipt

08 / 18 / 2019

Transaction ID : SA11AI.9882

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. Pearman, John, , ,

Mailing Address 503 Turner Avenue

City
Glen Ellyn

State
IL

Zip Code
60137

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Delos Communications

Occupation (for Individual)
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1505.92

Date of Receipt

09 / 18 / 2019

Transaction ID : SA11AI.9980

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

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

C. Pearman, John, , ,

Mailing Address 503 Turner Avenue

City
Glen Ellyn

State
IL

Zip Code
60137

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Consultant

Occupation (for Individual)
Delos Communications

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

10 / 18 / 2019

Transaction ID : SA11AI.10690

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

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

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

750.00

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 98
(check only one)

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

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NAME OF COMMITTEE (In Full)
Restoration PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Pearman, John, , ,			Date of Receipt M M / D D / Y Y Y Y Y 11 / 18 / 2019 Transaction ID : SA11AI.10797	
Mailing Address 503 Turner Avenue			Amount of Each Receipt this Period 250.00	
City Glen Ellyn	State IL	Zip Code 60137	☐ Memo Item Contribution	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 1755.92	
Name of Employer (for Individual) Delos Communications			Occupation (for Individual) Consultant	
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼				
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Pearman, John, , ,			Date of Receipt M M / D D / Y Y Y Y Y 11 / 20 / 2019 Transaction ID : SA11AI.10810	
Mailing Address 503 Turner Avenue			Amount of Each Receipt this Period 5.00	
City Glen Ellyn	State IL	Zip Code 60137	☐ Memo Item Contribution	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 1760.92	
Name of Employer (for Individual) Delos Communications			Occupation (for Individual) Consultant	
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼				
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Pearman, John, , ,			Date of Receipt M M / D D / Y Y Y Y Y 12 / 18 / 2019 Transaction ID : SA11AI.11053	
Mailing Address 503 Turner Avenue			Amount of Each Receipt this Period 250.00	
City Glen Ellyn	State IL	Zip Code 60137	☐ Memo Item Contribution	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 2010.92	
Name of Employer (for Individual) Delos Communications			Occupation (for Individual) Consultant	
Receipt For: ☐ Primary ☐ General ☐ Other (specify)				
SUBTOTAL of Receipts This Page (optional).....			505.00	
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 98
(check only one)

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

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NAME OF COMMITTEE (In Full)

Restoration PAC

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

A. Uihlein, Richard, E., ,

Mailing Address 1396 N. Waukegan Rd.

City
Lake Forest

State
IL

Zip Code
60045

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Uline

Occupation (for Individual)

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 16 / 2019

Transaction ID : SA11AI.9926

Amount of Each Receipt this Period

1500000.00

☐ Memo Item
Contribution

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

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

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

1500000.00

1602220.92

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

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

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

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NAME OF COMMITTEE (In Full)

Restoration PAC

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

A. Esplanade at Locust Point I LP

Mailing Address 100 N. Federal Highway
Ste. 400

City

Hallandale Beach

State

FL

Zip Code

33009

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

318.78

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 07 / 2019

Transaction ID : SA15.9930

Amount of Each Receipt this Period

318.78

☐ Memo Item
Rent refund

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

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

318.78

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

318.78

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

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. AlphaGraphics Wheaton

Mailing Address 128 N. Main Street

City
WheatonState
ILZip Code
60187Purpose of Disbursement
Direct mail (design, print, postage)

004

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	8			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11231

Amount of Each Disbursement this Period

8175.42

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. American Association of Political ConsultantsMailing Address 1775 Tysons Blvd
5th FloorCity
McLeanState
VAZip Code
22102Purpose of Disbursement
Award nominations submission fee

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			1	6			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11464

Amount of Each Disbursement this Period

278.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. American Association of Political ConsultantsMailing Address 1775 Tysons Blvd
5th FloorCity
McLeanState
VAZip Code
22102Purpose of Disbursement
Award nominations submission fee

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			1	9			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11465

Amount of Each Disbursement this Period

139.00

☐ Memo Item

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

8592.42

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)

PAGE 13 OF 98

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 0001

City
Los Angeles

State
CA

Zip Code
90096-8000

Purpose of Disbursement
Credit card payment (see below)

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 30 / 2019

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.11237

Amount of Each Disbursement this Period

[REDACTED] 824.95

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Comcast Business

Mailing Address PO Box 3001

City
Southeastern

State
PA

Zip Code
19398-3001

Purpose of Disbursement
Cable, internet, and telephone service

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 22 / 2019

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.11237

Amount of Each Disbursement this Period

[REDACTED] 307.63

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Gooten.com

Mailing Address 135 E 57th St

City
New York

State
NY

Zip Code
10022

Purpose of Disbursement
Office expense

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 27 / 2019

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.11237

Amount of Each Disbursement this Period

[REDACTED] 16.89

☒ Memo Item

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

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

[REDACTED] 824.95

[REDACTED]

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

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Gooten.com

Mailing Address 135 E 57th St

City
New YorkState
NYZip Code
10022Purpose of Disbursement
Office expense

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6				3	0		2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11237

Amount of Each Disbursement this Period

16.89

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Microsoft Corporation

Mailing Address One Microsoft Way

City
RedmondState
WAZip Code
98052Purpose of Disbursement
Software licensing

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				1	0		2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11237

Amount of Each Disbursement this Period

13.28

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Gooten.com

Mailing Address 135 E 57th St

City
New YorkState
NYZip Code
10022Purpose of Disbursement
Office expense

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				1	1		2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11237

Amount of Each Disbursement this Period

4.32

☒ Memo Item

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

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

0.00

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

PAGE 15 OF 98

☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Gooten.com

Mailing Address 135 E 57th St

City
New YorkState
NYZip Code
10022Purpose of Disbursement
Office expense

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	1			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11237

Amount of Each Disbursement this Period

16.49

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Printful

Mailing Address 11025 Westlake Dr

City
CharlotteState
NCZip Code
28273Purpose of Disbursement
Office expense

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	2			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11237

Amount of Each Disbursement this Period

29.01

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Printful

Mailing Address 11025 Westlake Dr

City
CharlotteState
NCZip Code
28273Purpose of Disbursement
Office expense

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	2			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11237

Amount of Each Disbursement this Period

16.27

☒ Memo Item

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

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

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 0001

City
Los AngelesState
CAZip Code
90096-8000Purpose of Disbursement
Annual membership fee

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	2			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11237

Amount of Each Disbursement this Period

95.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address PO Box 0001

City
Los AngelesState
CAZip Code
90096-8000Purpose of Disbursement
Credit card payment (see below)

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	8			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11263

Amount of Each Disbursement this Period

1317.46

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Printful

Mailing Address 11025 Westlake Dr

City
CharlotteState
NCZip Code
28273Purpose of Disbursement
Office expense

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	2			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11263

Amount of Each Disbursement this Period

29.12

☒ Memo Item

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

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

1317.46

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

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☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Printful

Mailing Address 11025 Westlake Dr

City
CharlotteState
NCZip Code
28273Purpose of Disbursement
Office expense

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	4			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11263

Amount of Each Disbursement this Period

23.76

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. FedExMailing Address 3875 Airways, Module H3
Department 4634City
MemphisState
TNZip Code
38116Purpose of Disbursement
Shipping services

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	4			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11263

Amount of Each Disbursement this Period

510.50

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Printful

Mailing Address 11025 Westlake Dr

City
CharlotteState
NCZip Code
28273Purpose of Disbursement
Office expense

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	5			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11263

Amount of Each Disbursement this Period

31.07

☒ Memo Item

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

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

0.00

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

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Printful

Mailing Address 11025 Westlake Dr

City
CharlotteState
NCZip Code
28273Purpose of Disbursement
Office expense

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	6			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11263

Amount of Each Disbursement this Period

48.63

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Printful

Mailing Address 11025 Westlake Dr

City
CharlotteState
NCZip Code
28273Purpose of Disbursement
Office expense

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	6			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11263

Amount of Each Disbursement this Period

30.48

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Printful

Mailing Address 11025 Westlake Dr

City
CharlotteState
NCZip Code
28273Purpose of Disbursement
Office expense

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	6			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11263

Amount of Each Disbursement this Period

42.10

☒ Memo Item

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

0.00

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

☒	21b	☐	22	☐	23	☐	26	☐	27
☐	28a	☐	28b	☐	28c	☐	29	☐	30b

Restoration PAC

24.54

Three digital displays showing the date 07/17/2019 in MM/DD/YYYY format. The first display shows '07' with 'M' labels above the digits. The second display shows '17' with 'D' labels above the digits. The third display shows '2019' with 'Y' labels above each digit. The displays are separated by slashes.

7.04

36.65

0.00

[illegible]

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

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Black Rifle Coffee

Mailing Address 1144 S 500 W

City
Salt Lake CityState
UTZip Code
84101Purpose of Disbursement
Office expense

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	8			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11263

Amount of Each Disbursement this Period

144.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. FedExMailing Address 3875 Airways, Module H3
Department 4634City
MemphisState
TNZip Code
38116Purpose of Disbursement
Shipping services

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	0			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11263

Amount of Each Disbursement this Period

16.57

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Comcast Business

Mailing Address PO Box 3001

City
SoutheasternState
PAZip Code
19398-3001Purpose of Disbursement
Cable, internet, and telephone service

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	2			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11263

Amount of Each Disbursement this Period

307.63

☒ Memo Item

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

0.00

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

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

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☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. FedEx

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	3			2	0	1	9		

Mailing Address 3875 Airways, Module H3
Department 4634City
MemphisState
TNZip Code
38116Purpose of Disbursement
Shipping services

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.11263

Amount of Each Disbursement this Period

14.66

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. FedEx

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	8			2	0	1	9		

Mailing Address 3875 Airways, Module H3
Department 4634City
MemphisState
TNZip Code
38116Purpose of Disbursement
Shipping services

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.11263

Amount of Each Disbursement this Period

17.12

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. FedEx

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	0			2	0	1	9		

Mailing Address 3875 Airways, Module H3
Department 4634City
MemphisState
TNZip Code
38116Purpose of Disbursement
Shipping services

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.11263

Amount of Each Disbursement this Period

27.35

☒ Memo Item

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

0.00

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

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

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Microsoft Corporation

Mailing Address One Microsoft Way

City
RedmondState
WAZip Code
98052Purpose of Disbursement
Software licensing

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	1			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11263

Amount of Each Disbursement this Period

13.28

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Gooten.com

Mailing Address 135 E 57th St

City
New YorkState
NYZip Code
10022Purpose of Disbursement
Refund of office expense

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	4			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11263

Amount of Each Disbursement this Period

- 7.04

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO Box 0001

City
Los AngelesState
CAZip Code
90096-8000Purpose of Disbursement
Credit card payment (see below)

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	7			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11283

Amount of Each Disbursement this Period

2849.57

☐ Memo Item

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

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

2849.57

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

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☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Best Buy

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	7			2	0	1	9		

Mailing Address 1432 Butterfield Rd

FEC Identification Number

C

Transaction ID : SB21B.11283

Amount of Each Disbursement this Period

- 170.64

☒ Memo ItemCity
Downers GroveState
ILZip Code
60515Purpose of Disbursement
Office equipment refund

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. FedEx

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	7			2	0	1	9		

Mailing Address 3875 Airways, Module H3
Department 4634

FEC Identification Number

C

Transaction ID : SB21B.11283

Amount of Each Disbursement this Period

21.62

☒ Memo ItemCity
MemphisState
TNZip Code
38116Purpose of Disbursement
Shipping services

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. FedEx

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	1			2	0	1	9		

Mailing Address 3875 Airways, Module H3
Department 4634

FEC Identification Number

C

Transaction ID : SB21B.11283

Amount of Each Disbursement this Period

14.66

☒ Memo ItemCity
MemphisState
TNZip Code
38116Purpose of Disbursement
Shipping services

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

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

0.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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(check only one)

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Best Buy

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		21		2019

Mailing Address 1432 Butterfield Rd

FEC Identification Number

C

Transaction ID : SB21B.11283

Amount of Each Disbursement this Period

266.74

☒ Memo ItemCity
Downers GroveState
ILZip Code
60515Purpose of Disbursement
Office equipment

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. Comcast Business

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		22		2019

Mailing Address PO Box 3001

FEC Identification Number

C

Transaction ID : SB21B.11283

Amount of Each Disbursement this Period

308.34

☒ Memo ItemCity
SoutheasternState
PAZip Code
19398-3001Purpose of Disbursement
Cable, internet, and telephone service

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. Best Buy

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		23		2019

Mailing Address 1432 Butterfield Rd

FEC Identification Number

C

Transaction ID : SB21B.11283

Amount of Each Disbursement this Period

971.99

☒ Memo ItemCity
Downers GroveState
ILZip Code
60515Purpose of Disbursement
Office equipment

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

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

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

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. FedEx

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2019

Mailing Address 3875 Airways, Module H3
Department 4634City
MemphisState
TNZip Code
38116Purpose of Disbursement
Shipping services

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.11283

Amount of Each Disbursement this Period

14.59

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Amazon.com

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2019

Mailing Address PO Box 81226

City
SeattleState
WAZip Code
98108Purpose of Disbursement
Office equipment

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.11283

Amount of Each Disbursement this Period

165.27

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Amazon.com

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2019

Mailing Address PO Box 81226

City
SeattleState
WAZip Code
98108Purpose of Disbursement
Office equipment

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.11283

Amount of Each Disbursement this Period

7.32

☒ Memo Item

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

0.00

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

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Mitel Cloud Services, Inc.

Mailing Address 28760 Network Place

City
ChicagoState
ILZip Code
60673-1287Purpose of Disbursement
Telephone and internet service

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		06		2019

FEC Identification Number

C

Transaction ID : SB21B.11283

Amount of Each Disbursement this Period

340.81

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Microsoft Corporation

Mailing Address One Microsoft Way

City
RedmondState
WAZip Code
98052Purpose of Disbursement
Software licensing

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		09		2019

FEC Identification Number

C

Transaction ID : SB21B.11283

Amount of Each Disbursement this Period

13.28

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. FedExMailing Address 3875 Airways, Module H3
Department 4634City
MemphisState
TNZip Code
38116Purpose of Disbursement
Shipping services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		15		2019

FEC Identification Number

C

Transaction ID : SB21B.11283

Amount of Each Disbursement this Period

14.66

☒ Memo Item

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

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

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Mitel Cloud Services, Inc.

Mailing Address 28760 Network Place

City
ChicagoState
ILZip Code
60673-1287Purpose of Disbursement
Telephone and internet service

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	6			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11283

Amount of Each Disbursement this Period

657.68

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Best Buy

Mailing Address 1432 Butterfield Rd

City
Downers GroveState
ILZip Code
60515Purpose of Disbursement
Office equipment

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	2			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11283

Amount of Each Disbursement this Period

194.39

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO Box 0001

City
Los AngelesState
CAZip Code
90096-8000Purpose of Disbursement
Credit card payment (see below)

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	1			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11304

Amount of Each Disbursement this Period

1386.31

☐ Memo Item

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

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

1386.31

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

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Vimeo

Mailing Address 555 W 18th St

City
New YorkState
NYZip Code
10011Purpose of Disbursement
Web hosting

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				1	7					2	0	1

FEC Identification Number

C

Transaction ID : SB21B.11304

Amount of Each Disbursement this Period

900.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Comcast Business

Mailing Address PO Box 3001

City
SoutheasternState
PAZip Code
19398-3001Purpose of Disbursement
Cable, internet, and telephone service

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				2	2					2	0	1

FEC Identification Number

C

Transaction ID : SB21B.11304

Amount of Each Disbursement this Period

308.34

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Black Rifle Coffee

Mailing Address 1144 S 500 W

City
Salt Lake CityState
UTZip Code
84101Purpose of Disbursement
Office expense

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				2	5					2	0	1

FEC Identification Number

C

Transaction ID : SB21B.11304

Amount of Each Disbursement this Period

149.99

☒ Memo Item

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

0.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. FedEx

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			0	8			2	0	1	9		

Mailing Address 3875 Airways, Module H3
Department 4634City
MemphisState
TNZip Code
38116Purpose of Disbursement
Shipping services

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.11304

Amount of Each Disbursement this Period

14.70

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Microsoft Corporation

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	0			2	0	1	9		

Mailing Address One Microsoft Way

City
RedmondState
WAZip Code
98052Purpose of Disbursement
Software licensingCategory/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.11304

Amount of Each Disbursement this Period

13.28

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. American Express

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			1	0			2	0	1	9		

Mailing Address PO Box 0001

City
Los AngelesState
CAZip Code
90096-8000Purpose of Disbursement
Credit card payment (see below)

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.11311

Amount of Each Disbursement this Period

2117.97

☐ Memo Item

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

2117.97

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. FedEx

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	5			2	0	1	9		

Mailing Address 3875 Airways, Module H3
Department 4634City
MemphisState
TNZip Code
38116Purpose of Disbursement
Shipping services

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.11310

Amount of Each Disbursement this Period

14.70

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Amazon.com

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	6			2	0	1	9		

Mailing Address PO Box 81226

City
SeattleState
WAZip Code
98108Purpose of Disbursement
Office equipment

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.11310

Amount of Each Disbursement this Period

107.09

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Amazon.com

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	6			2	0	1	9		

Mailing Address PO Box 81226

City
SeattleState
WAZip Code
98108Purpose of Disbursement
Office equipment

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.11310

Amount of Each Disbursement this Period

956.24

☒ Memo Item

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

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

0.00

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

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Comcast Business

Mailing Address PO Box 3001

City
Southeastern

State
PA

Zip Code
19398-3001

Purpose of Disbursement
Cable, internet, and telephone service

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 22 / 2019

FEC Identification Number

C Transaction ID : SB21B.11310

Amount of Each Disbursement this Period

308.34

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. FedEx

Mailing Address 3875 Airways, Module H3
Department 4634

City
Memphis

State
TN

Zip Code
38116

Purpose of Disbursement
Shipping services

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 30 / 2019

FEC Identification Number

C Transaction ID : SB21B.11310

Amount of Each Disbursement this Period

14.66

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Coopers Hawk Winery & Restaurant

Mailing Address 1801 Butterfield Rd

City
Downers Grove

State
IL

Zip Code
60515

Purpose of Disbursement
Office expense (holiday party)

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 30 / 2019

FEC Identification Number

C Transaction ID : SB21B.11310

Amount of Each Disbursement this Period

275.55

☒ Memo Item

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

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

0.00

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

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Black Rifle Coffee

Mailing Address 1144 S 500 W

City
Salt Lake CityState
UTZip Code
84101Purpose of Disbursement
Office expense

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				01				2019					

FEC Identification Number

C

Transaction ID : SB21B.11310

Amount of Each Disbursement this Period

89.99

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Microsoft Corporation

Mailing Address One Microsoft Way

City
RedmondState
WAZip Code
98052Purpose of Disbursement
Software licensing

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				09				2019					

FEC Identification Number

C

Transaction ID : SB21B.11310

Amount of Each Disbursement this Period

13.28

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. FedExMailing Address 3875 Airways, Module H3
Department 4634City
MemphisState
TNZip Code
38116Purpose of Disbursement
Shipping services

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				17				2019					

FEC Identification Number

C

Transaction ID : SB21B.11310

Amount of Each Disbursement this Period

29.32

☒ Memo Item

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

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

0.00

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

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Comcast Business

Mailing Address PO Box 3001

City
SoutheasternState
PAZip Code
19398-3001Purpose of Disbursement
Cable, internet, and telephone service

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				22				2019					

FEC Identification Number

C

Transaction ID : SB21B.11310

Amount of Each Disbursement this Period

308.80

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Chain Bridge Bank

Mailing Address 1445-A Laughlin Avenue

City
McLeanState
VAZip Code
22101Purpose of Disbursement
Bank fees

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
07				02				2019					

FEC Identification Number

C

Transaction ID : SB21B.11329

Amount of Each Disbursement this Period

15.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Chain Bridge Bank

Mailing Address 1445-A Laughlin Avenue

City
McLeanState
VAZip Code
22101Purpose of Disbursement
Bank fees

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
07				18				2019					

FEC Identification Number

C

Transaction ID : SB21B.11330

Amount of Each Disbursement this Period

20.00

☐ Memo Item

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

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

35.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Chain Bridge Bank

Mailing Address 1445-A Laughlin Avenue

City
McLeanState
VAZip Code
22101Purpose of Disbursement
Bank fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	8			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11331

Amount of Each Disbursement this Period

15.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Chain Bridge Bank

Mailing Address 1445-A Laughlin Avenue

City
McLeanState
VAZip Code
22101Purpose of Disbursement
Bank fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	0			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11332

Amount of Each Disbursement this Period

15.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Chain Bridge Bank

Mailing Address 1445-A Laughlin Avenue

City
McLeanState
VAZip Code
22101Purpose of Disbursement
Bank fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	2			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11333

Amount of Each Disbursement this Period

15.00

☐ Memo Item

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

45.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Chain Bridge Bank

Mailing Address 1445-A Laughlin Avenue

City
McLeanState
VAZip Code
22101Purpose of Disbursement
Bank fees

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	2			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11334

Amount of Each Disbursement this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Chain Bridge Bank

Mailing Address 1445-A Laughlin Avenue

City
McLeanState
VAZip Code
22101Purpose of Disbursement
Bank fees

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	2			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11335

Amount of Each Disbursement this Period

15.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Chain Bridge Bank

Mailing Address 1445-A Laughlin Avenue

City
McLeanState
VAZip Code
22101Purpose of Disbursement
Bank fees

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	1			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11336

Amount of Each Disbursement this Period

15.00

☐ Memo Item

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

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

50.00

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

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Chain Bridge Bank

Mailing Address 1445-A Laughlin Avenue

City
McLeanState
VAZip Code
22101Purpose of Disbursement
Bank fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8				3	0		2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11337

Amount of Each Disbursement this Period

15.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Chain Bridge Bank

Mailing Address 1445-A Laughlin Avenue

City
McLeanState
VAZip Code
22101Purpose of Disbursement
Bank fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				0	4		2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11338

Amount of Each Disbursement this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Chain Bridge Bank

Mailing Address 1445-A Laughlin Avenue

City
McLeanState
VAZip Code
22101Purpose of Disbursement
Bank fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				1	1		2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11338

Amount of Each Disbursement this Period

20.00

☐ Memo Item

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

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

55.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Chain Bridge Bank

Mailing Address 1445-A Laughlin Avenue

City
McLeanState
VAZip Code
22101Purpose of Disbursement
Bank fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	7			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11340

Amount of Each Disbursement this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Chain Bridge Bank

Mailing Address 1445-A Laughlin Avenue

City
McLeanState
VAZip Code
22101Purpose of Disbursement
Bank fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			3	0			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11341

Amount of Each Disbursement this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Chain Bridge Bank

Mailing Address 1445-A Laughlin Avenue

City
McLeanState
VAZip Code
22101Purpose of Disbursement
Bank fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	6			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11342

Amount of Each Disbursement this Period

20.00

☐ Memo Item

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

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

60.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Chain Bridge Bank

Mailing Address 1445-A Laughlin Avenue

City
McLeanState
VAZip Code
22101Purpose of Disbursement
Bank fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0				2	3					2	0	1

FEC Identification Number

C

Transaction ID : SB21B.11343

Amount of Each Disbursement this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Chain Bridge Bank

Mailing Address 1445-A Laughlin Avenue

City
McLeanState
VAZip Code
22101Purpose of Disbursement
Bank fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0				3	0					2	0	1

FEC Identification Number

C

Transaction ID : SB21B.11344

Amount of Each Disbursement this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Chain Bridge Bank

Mailing Address 1445-A Laughlin Avenue

City
McLeanState
VAZip Code
22101Purpose of Disbursement
Bank fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0				3	0					2	0	1

FEC Identification Number

C

Transaction ID : SB21B.11345

Amount of Each Disbursement this Period

20.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

60.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Chain Bridge Bank

Mailing Address 1445-A Laughlin Avenue

City
McLeanState
VAZip Code
22101Purpose of Disbursement
Bank fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				31				2019					

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.11346

Amount of Each Disbursement this Period

[REDACTED] 20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Chain Bridge Bank

Mailing Address 1445-A Laughlin Avenue

City
McLeanState
VAZip Code
22101Purpose of Disbursement
Bank fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				06				2019					

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.11347

Amount of Each Disbursement this Period

[REDACTED] 20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Chain Bridge Bank

Mailing Address 1445-A Laughlin Avenue

City
McLeanState
VAZip Code
22101Purpose of Disbursement
Bank fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				19				2019					

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.11348

Amount of Each Disbursement this Period

[REDACTED] 20.00

☐ Memo Item

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

[REDACTED] 60.00

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

[REDACTED]

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

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Chain Bridge Bank

Mailing Address 1445-A Laughlin Avenue

City
McLeanState
VAZip Code
22101Purpose of Disbursement
Bank fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				04				2019					

FEC Identification Number

C

Transaction ID : SB21B.11349

Amount of Each Disbursement this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Chain Bridge Bank

Mailing Address 1445-A Laughlin Avenue

City
McLeanState
VAZip Code
22101Purpose of Disbursement
Bank fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				04				2019					

FEC Identification Number

C

Transaction ID : SB21B.11350

Amount of Each Disbursement this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Chain Bridge Bank

Mailing Address 1445-A Laughlin Avenue

City
McLeanState
VAZip Code
22101Purpose of Disbursement
Bank fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				06				2019					

FEC Identification Number

C

Transaction ID : SB21B.11351

Amount of Each Disbursement this Period

20.00

☐ Memo Item

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

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

60.00

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

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Chain Bridge Bank

Mailing Address 1445-A Laughlin Avenue

City
McLeanState
VAZip Code
22101Purpose of Disbursement
Bank fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			1	1			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11352

Amount of Each Disbursement this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Chain Bridge Bank

Mailing Address 1445-A Laughlin Avenue

City
McLeanState
VAZip Code
22101Purpose of Disbursement
Bank fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			1	7			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11353

Amount of Each Disbursement this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ComEd

Mailing Address PO Box 6111

City
Carol StreamState
ILZip Code
60197-6111Purpose of Disbursement
Utilities

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	5			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11355

Amount of Each Disbursement this Period

130.60

☐ Memo Item

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

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

170.60

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. ComEd

Mailing Address PO Box 6111

City
Carol StreamState
ILZip Code
60197-6111Purpose of Disbursement
Utilities

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	6			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11356

Amount of Each Disbursement this Period

128.39

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ComEd

Mailing Address PO Box 6111

City
Carol StreamState
ILZip Code
60197-6111Purpose of Disbursement
Utilities

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	4			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11357

Amount of Each Disbursement this Period

127.29

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ComEd

Mailing Address PO Box 6111

City
Carol StreamState
ILZip Code
60197-6111Purpose of Disbursement
Utilities

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			0	4			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11358

Amount of Each Disbursement this Period

102.00

☐ Memo Item

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

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

357.68

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. ComEd

Mailing Address PO Box 6111

City
Carol StreamState
ILZip Code
60197-6111Purpose of Disbursement
Utilities

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				04				2019					

FEC Identification Number

C

Transaction ID : SB21B.11359

Amount of Each Disbursement this Period

95.39

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ComEd

Mailing Address PO Box 6111

City
Carol StreamState
ILZip Code
60197-6111Purpose of Disbursement
Utilities

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				03				2019					

FEC Identification Number

C

Transaction ID : SB21B.11360

Amount of Each Disbursement this Period

98.17

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Crowdskout

Mailing Address 1101 K St. NW, 8th Floor

City
WashingtonState
DCZip Code
20005Purpose of Disbursement
Software licensing

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
07				02				2019					

FEC Identification Number

C

Transaction ID : SB21B.11361

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

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

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

1193.56

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Crowdskout

Mailing Address 1101 K St. NW, 8th Floor

City
WashingtonState
DCZip Code
20005Purpose of Disbursement
Software licensing

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	6			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11362

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Crowdskout

Mailing Address 1101 K St. NW, 8th Floor

City
WashingtonState
DCZip Code
20005Purpose of Disbursement
Software licensing

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	4			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11363

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Crowdskout

Mailing Address 1101 K St. NW, 8th Floor

City
WashingtonState
DCZip Code
20005Purpose of Disbursement
Software licensing

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			0	3			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11364

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

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

3000.00

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)

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☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Crowdskout

Mailing Address 1101 K St. NW, 8th Floor

City
Washington

State
DC

Zip Code
20005

Purpose of Disbursement
Software licensing

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 05 / 2019

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.11365

Amount of Each Disbursement this Period

[REDACTED] 1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Crowdskout

Mailing Address 1101 K St. NW, 8th Floor

City
Washington

State
DC

Zip Code
20005

Purpose of Disbursement
Software licensing

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 04 / 2019

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.11366

Amount of Each Disbursement this Period

[REDACTED] 1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Custom Sign Consultants, Inc.

Mailing Address 1928 W. Fulton St.

City
Chicago

State
IL

Zip Code
60612

Purpose of Disbursement
Office expense

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 26 / 2019

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.11367

Amount of Each Disbursement this Period

[REDACTED] 409.48

☐ Memo Item

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

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

[REDACTED] 2409.48

[REDACTED]

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

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☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Delos Communications

Mailing Address 2700 Patriot Blvd., Ste. 250

City
GlenviewState
ILZip Code
60026Purpose of Disbursement
Strategic Planning Consulting

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		02		2019

FEC Identification Number

C Transaction ID : SB21B.11184

Amount of Each Disbursement this Period

30000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Delos Communications

Mailing Address 2700 Patriot Blvd., Ste. 250

City
GlenviewState
ILZip Code
60026Purpose of Disbursement
Strategic Planning Consulting

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		01		2019

FEC Identification Number

C Transaction ID : SB21B.11232

Amount of Each Disbursement this Period

30000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Delos Communications

Mailing Address 2700 Patriot Blvd., Ste. 250

City
GlenviewState
ILZip Code
60026Purpose of Disbursement
Strategic Planning Consulting

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		04		2019

FEC Identification Number

C Transaction ID : SB21B.11233

Amount of Each Disbursement this Period

30000.00

☐ Memo Item

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

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

90000.00

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

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☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Delos Communications

Mailing Address 2700 Patriot Blvd., Ste. 250

City
GlenviewState
ILZip Code
60026Purpose of Disbursement
Strategic Planning Consulting

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		03		2019

FEC Identification Number

C

Transaction ID : SB21B.11234

Amount of Each Disbursement this Period

30000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Delos Communications

Mailing Address 2700 Patriot Blvd., Ste. 250

City
GlenviewState
ILZip Code
60026Purpose of Disbursement
Strategic Planning Consulting

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		05		2019

FEC Identification Number

C

Transaction ID : SB21B.11235

Amount of Each Disbursement this Period

30000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Delos Communications

Mailing Address 2700 Patriot Blvd., Ste. 250

City
GlenviewState
ILZip Code
60026Purpose of Disbursement
Strategic Planning Consulting

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		05		2019

FEC Identification Number

C

Transaction ID : SB21B.11236

Amount of Each Disbursement this Period

30000.00

☐ Memo Item

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

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

90000.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 48 OF 98

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☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Dropbox

Mailing Address 333 Brannan Street

City
San Francisco

State
CA

Zip Code
94107

Purpose of Disbursement
Cloud services subscription

001

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 09 / 2019

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.11369

Amount of Each Disbursement this Period

[REDACTED] 119.88

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Edmier, Andrew, , ,

Mailing Address 210 Baynard Road

City
Addison

State
IL

Zip Code
60101

Purpose of Disbursement
Issue and research consulting

001

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 01 / 2019

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.11370

Amount of Each Disbursement this Period

[REDACTED] 4500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Edmier, Andrew, , ,

Mailing Address 210 Baynard Road

City
Addison

State
IL

Zip Code
60101

Purpose of Disbursement
Travel expense reimbursement

002

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 01 / 2019

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.11371

Amount of Each Disbursement this Period

[REDACTED] 515.54

☐ Memo Item

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

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

[REDACTED] 5135.42

[REDACTED]

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

PAGE 49 OF 98

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. American Airlines

Mailing Address 7645 E 63rd St., Suite 600

City
TulsaState
OKZip Code
74133Purpose of Disbursement
Travel expense

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				1	6					2	0	1

FEC Identification Number

C

Transaction ID : SB21B.11373

Amount of Each Disbursement this Period

334.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Expedia

Mailing Address 333 108th Ave. NE

City
BellevueState
WAZip Code
98004Purpose of Disbursement
Travel expense

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				2	3					2	0	1

FEC Identification Number

C

Transaction ID : SB21B.11373

Amount of Each Disbursement this Period

127.94

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Edmier, Andrew, , ,

Mailing Address 210 Baynard Road

City
AddisonState
ILZip Code
60101Purpose of Disbursement
Issue and research consulting

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				0	4					2	0	1

FEC Identification Number

C

Transaction ID : SB21B.11373

Amount of Each Disbursement this Period

4500.00

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

4500.00

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

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

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. FedEx

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	5			2	0	1	9		

Mailing Address 3875 Airways, Module H3
Department 4634City
MemphisState
TNZip Code
38116Purpose of Disbursement
Shipping services

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.11378

Amount of Each Disbursement this Period

183.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Grasshopper Group, LLC

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	2			2	0	1	9		

Mailing Address 197 1st Avenue, Suite 200

City
NeedhamState
MAZip Code
02494Purpose of Disbursement
Telephone service

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.11379

Amount of Each Disbursement this Period

32.73

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Grasshopper Group, LLC

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	1			2	0	1	9		

Mailing Address 197 1st Avenue, Suite 200

City
NeedhamState
MAZip Code
02494Purpose of Disbursement
Telephone service

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.11380

Amount of Each Disbursement this Period

32.73

☐ Memo Item

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

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

248.71

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

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Grasshopper Group, LLC

Mailing Address 197 1st Avenue, Suite 200

City
NeedhamState
MAZip Code
02494Purpose of Disbursement
Telephone service

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	3			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11381

Amount of Each Disbursement this Period

32.73

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Grasshopper Group, LLC

Mailing Address 197 1st Avenue, Suite 200

City
NeedhamState
MAZip Code
02494Purpose of Disbursement
Telephone service

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	1			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11382

Amount of Each Disbursement this Period

32.89

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Grasshopper Group, LLC

Mailing Address 197 1st Avenue, Suite 200

City
NeedhamState
MAZip Code
02494Purpose of Disbursement
Telephone service

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	2			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11383

Amount of Each Disbursement this Period

32.89

☐ Memo Item

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

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

98.51

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

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Grasshopper Group, LLC

Mailing Address 197 1st Avenue, Suite 200

City
NeedhamState
MAZip Code
02494Purpose of Disbursement
Telephone service

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				23				2019					

FEC Identification Number

C

Transaction ID : SB21B.11384

Amount of Each Disbursement this Period

32.89

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Guthrie, Marie, , ,

Mailing Address 519 Skyline Drive

City
AlgonquinState
ILZip Code
60102Purpose of Disbursement
Marketing consulting

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
07				02				2019					

FEC Identification Number

C

Transaction ID : SB21B.11385

Amount of Each Disbursement this Period

4255.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Guthrie, Marie, , ,

Mailing Address 519 Skyline Drive

City
AlgonquinState
ILZip Code
60102Purpose of Disbursement
Marketing consulting

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
07				18				2019					

FEC Identification Number

C

Transaction ID : SB21B.11386

Amount of Each Disbursement this Period

7360.00

☐ Memo Item

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

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

11647.89

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

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Guthrie, Marie, , ,

Mailing Address 519 Skyline Drive

City
AlgonquinState
ILZip Code
60102Purpose of Disbursement
Travel expense reimbursement

002

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		18		2019

FEC Identification Number

C Transaction ID : SB21B.11398

Amount of Each Disbursement this Period

745.68

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Embassy Suites by Hilton

Mailing Address 5055 International Blvd

City
North CharlestonState
SCZip Code
29418Purpose of Disbursement
Travel expenses

002

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		07		2019

FEC Identification Number

C Transaction ID : SB21B.11398

Amount of Each Disbursement this Period

444.48

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. American Airlines

Mailing Address 7645 E 63rd St., Suite 600

City
TulsaState
OKZip Code
74133Purpose of Disbursement
Travel expense

002

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		04		2019

FEC Identification Number

C Transaction ID : SB21B.11398

Amount of Each Disbursement this Period

30.00

☒ Memo Item

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

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

745.68

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

PAGE 54 OF 98

☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. American Airlines

Mailing Address 7645 E 63rd St., Suite 600

City
TulsaState
OKZip Code
74133Purpose of Disbursement
Travel expense

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	7			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11398

Amount of Each Disbursement this Period

30.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Guthrie, Marie, , ,

Mailing Address 519 Skyline Drive

City
AlgonquinState
ILZip Code
60102Purpose of Disbursement
Marketing consulting

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				3	0		2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11387

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Guthrie, Marie, , ,

Mailing Address 519 Skyline Drive

City
AlgonquinState
ILZip Code
60102Purpose of Disbursement
Marketing consulting

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8				1	2		2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11388

Amount of Each Disbursement this Period

5000.00

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

10000.00

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

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

PAGE 55 OF 98

☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Guthrie, Marie, , ,

Mailing Address 519 Skyline Drive

City
AlgonquinState
ILZip Code
60102Purpose of Disbursement
Marketing consulting

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2019

FEC Identification Number

C

Transaction ID : SB21B.11389

Amount of Each Disbursement this Period

 4772.50☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Guthrie, Marie, , ,

Mailing Address 519 Skyline Drive

City
AlgonquinState
ILZip Code
60102Purpose of Disbursement
Marketing consulting

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2019

FEC Identification Number

C

Transaction ID : SB21B.11390

Amount of Each Disbursement this Period

 3565.00☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Guthrie, Marie, , ,

Mailing Address 519 Skyline Drive

City
AlgonquinState
ILZip Code
60102Purpose of Disbursement
Travel expense reimbursement

002

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2019

FEC Identification Number

C

Transaction ID : SB21B.11405

Amount of Each Disbursement this Period

 612.25☐ Memo Item

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

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

 8949.75

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

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. American Airlines

Mailing Address 7645 E 63rd St., Suite 600

City
TulsaState
OKZip Code
74133Purpose of Disbursement
Travel expense

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	8			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11409

Amount of Each Disbursement this Period

306.50

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. FRC Action

Mailing Address 801 G Street N.W.

City
WashingtonState
DCZip Code
20001Purpose of Disbursement
Registration fee

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	8			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11409

Amount of Each Disbursement this Period

283.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Guthrie, Marie, , ,

Mailing Address 519 Skyline Drive

City
AlgonquinState
ILZip Code
60102Purpose of Disbursement
Marketing consulting

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			3	0			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11391

Amount of Each Disbursement this Period

5635.00

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

5635.00

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

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

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Guthrie, Marie, , ,

Mailing Address 519 Skyline Drive

City
AlgonquinState
ILZip Code
60102Purpose of Disbursement
Marketing consulting

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				16				2019					

FEC Identification Number

C

Transaction ID : SB21B.11392

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Guthrie, Marie, , ,

Mailing Address 519 Skyline Drive

City
AlgonquinState
ILZip Code
60102Purpose of Disbursement
Marketing consulting

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				23				2019					

FEC Identification Number

C

Transaction ID : SB21B.11393

Amount of Each Disbursement this Period

6267.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Guthrie, Marie, , ,

Mailing Address 519 Skyline Drive

City
AlgonquinState
ILZip Code
60102Purpose of Disbursement
Travel expense reimbursement

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				23				2019					

FEC Identification Number

C

Transaction ID : SB21B.11411

Amount of Each Disbursement this Period

1070.57

☐ Memo Item

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

12338.07

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

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

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☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Omni Shoreham Hotel

Mailing Address 2500 Calverts St. NW

City
WashingtonState
DCZip Code
20008Purpose of Disbursement
Travel expense

002

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				12				2019					

FEC Identification Number

C

Transaction ID : SB21B.11416

Amount of Each Disbursement this Period

772.47

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. American Airlines

Mailing Address 7645 E 63rd St., Suite 600

City
TulsaState
OKZip Code
74133Purpose of Disbursement
Travel expense

002

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				16				2019					

FEC Identification Number

C

Transaction ID : SB21B.11416

Amount of Each Disbursement this Period

70.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. American Airlines

Mailing Address 7645 E 63rd St., Suite 600

City
TulsaState
OKZip Code
74133Purpose of Disbursement
Travel expense

002

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				10				2019					

FEC Identification Number

C

Transaction ID : SB21B.11416

Amount of Each Disbursement this Period

70.00

☒ Memo Item

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

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

0.00

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

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☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. A-1 Airport Limousine Service, Inc.

Mailing Address 114 East Lake Street

City
BloomingtonState
ILZip Code
60166Purpose of Disbursement
Travel expense

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	0			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11416

Amount of Each Disbursement this Period

78.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. A-1 Airport Limousine Service, Inc.

Mailing Address 114 East Lake Street

City
BloomingtonState
ILZip Code
60166Purpose of Disbursement
Travel expense

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	6			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11416

Amount of Each Disbursement this Period

80.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Guthrie, Marie, , ,

Mailing Address 519 Skyline Drive

City
AlgonquinState
ILZip Code
60102Purpose of Disbursement
Marketing consulting

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	6			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11394

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

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

5000.00

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

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

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Guthrie, Marie, , ,

Mailing Address 519 Skyline Drive

City
AlgonquinState
ILZip Code
60102Purpose of Disbursement
Travel expense reimbursement

002

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		0	6			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11423

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FRC Action

Mailing Address 801 G Street N.W.

City
WashingtonState
DCZip Code
20001Purpose of Disbursement
Registration fee

002

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			0	8			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11423

Amount of Each Disbursement this Period

100.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Guthrie, Marie, , ,

Mailing Address 519 Skyline Drive

City
AlgonquinState
ILZip Code
60102Purpose of Disbursement
Marketing consulting

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			1	9			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11395

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

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

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

5100.00

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

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☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Guthrie, Marie, , ,

Mailing Address 519 Skyline Drive

City
AlgonquinState
ILZip Code
60102Purpose of Disbursement
Marketing consulting

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				04				2019					

FEC Identification Number

C

Transaction ID : SB21B.11396

Amount of Each Disbursement this Period

4140.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Guthrie, Marie, , ,

Mailing Address 519 Skyline Drive

City
AlgonquinState
ILZip Code
60102Purpose of Disbursement
Marketing consulting

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				17				2019					

FEC Identification Number

C

Transaction ID : SB21B.11397

Amount of Each Disbursement this Period

5750.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Hamilton Partners

Mailing Address 3896 Solutions Center

City
ChicagoState
ILZip Code
60677-3008Purpose of Disbursement
Office expense

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
07				02				2019					

FEC Identification Number

C

Transaction ID : SB21B.11427

Amount of Each Disbursement this Period

175.00

☐ Memo Item

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

10065.00

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

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

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Hamilton Partners

Mailing Address 3896 Solutions Center

City
ChicagoState
ILZip Code
60677-3008Purpose of Disbursement
Rent

001

Category/
Type

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		24		2019

FEC Identification Number

C

Transaction ID : SB21B.11428

Amount of Each Disbursement this Period

9943.28

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Hamilton Partners

Mailing Address 3896 Solutions Center

City
ChicagoState
ILZip Code
60677-3008Purpose of Disbursement
Rent

001

Category/
Type

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		23		2019

FEC Identification Number

C

Transaction ID : SB21B.11429

Amount of Each Disbursement this Period

9943.28

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Hamilton Partners

Mailing Address 3896 Solutions Center

City
ChicagoState
ILZip Code
60677-3008Purpose of Disbursement
Office expense

001

Category/
Type

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		04		2019

FEC Identification Number

C

Transaction ID : SB21B.11431

Amount of Each Disbursement this Period

510.00

☐ Memo Item

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

20396.56

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

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

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☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Hamilton Partners

Mailing Address 3896 Solutions Center

City
ChicagoState
ILZip Code
60677-3008Purpose of Disbursement
Rent

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				2	5		2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11431

Amount of Each Disbursement this Period

9943.28

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Hamilton Partners

Mailing Address 3896 Solutions Center

City
ChicagoState
ILZip Code
60677-3008Purpose of Disbursement
Office expense

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
	1	0			1	0		2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11432

Amount of Each Disbursement this Period

286.60

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Hamilton Partners

Mailing Address 3896 Solutions Center

City
ChicagoState
ILZip Code
60677-3008Purpose of Disbursement
Rent

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
	1	0			2	4		2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11433

Amount of Each Disbursement this Period

9943.28

☐ Memo Item

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

20173.16

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

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

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Hamilton Partners

Mailing Address 3896 Solutions Center

City
ChicagoState
ILZip Code
60677-3008Purpose of Disbursement
Office expense

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				08				2019					

FEC Identification Number

C

Transaction ID : SB21B.11434

Amount of Each Disbursement this Period

1710.90

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Hamilton Partners

Mailing Address 3896 Solutions Center

City
ChicagoState
ILZip Code
60677-3008Purpose of Disbursement
Rent

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				25				2019					

FEC Identification Number

C

Transaction ID : SB21B.11435

Amount of Each Disbursement this Period

9943.28

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Hamilton Partners

Mailing Address 3896 Solutions Center

City
ChicagoState
ILZip Code
60677-3008Purpose of Disbursement
Office expense

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				11				2019					

FEC Identification Number

C

Transaction ID : SB21B.11436

Amount of Each Disbursement this Period

75.00

☐ Memo Item

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

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

11729.18

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

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Hamilton Partners

Mailing Address 3896 Solutions Center

City
ChicagoState
ILZip Code
60677-3008Purpose of Disbursement
Rent

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				17				2019					

FEC Identification Number

C

Transaction ID : SB21B.11437

Amount of Each Disbursement this Period

9969.38

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Harris Media, LLC

Mailing Address 6500 Manor Drive

City
AustinState
TXZip Code
78723Purpose of Disbursement
Design consulting

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
07				02				2019					

FEC Identification Number

C

Transaction ID : SB21B.11182

Amount of Each Disbursement this Period

7500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Harris Media, LLC

Mailing Address 6500 Manor Drive

City
AustinState
TXZip Code
78723Purpose of Disbursement
Fundraising consulting

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
07				02				2019					

FEC Identification Number

C

Transaction ID : SB21B.11183

Amount of Each Disbursement this Period

122.86

☐ Memo Item

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

17592.24

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

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

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☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Harris Media, LLC

Mailing Address 6500 Manor Drive

City
AustinState
TXZip Code
78723Purpose of Disbursement
Design consulting

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		08		2019

FEC Identification Number

C

Transaction ID : SB21B.11217

Amount of Each Disbursement this Period

7500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Harris Media, LLC

Mailing Address 6500 Manor Drive

City
AustinState
TXZip Code
78723Purpose of Disbursement
Fundraising consulting

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		08		2019

FEC Identification Number

C

Transaction ID : SB21B.11218

Amount of Each Disbursement this Period

100.52

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Harris Media, LLC

Mailing Address 6500 Manor Drive

City
AustinState
TXZip Code
78723Purpose of Disbursement
Subscription

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		08		2019

FEC Identification Number

C

Transaction ID : SB21B.11219

Amount of Each Disbursement this Period

35.25

☐ Memo Item

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

7635.77

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

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: **SB21B**

Transaction ID : **SB21B.11219**

\$35.25 is the last payment of a \$24,035.25 debt owed by the Committee to Harris Media for a subscription payment made on 3/1/19 on behalf of the Committee. The original vendor is: NationBuilder, 520 S Grand Ave 2nd floor, Los Angeles, CA 90071.

Form/Schedule:

Transaction ID:

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

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Harris Media, LLC

Mailing Address 6500 Manor Drive

City
AustinState
TXZip Code
78723Purpose of Disbursement
Website services (design and development)

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	1			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11220

Amount of Each Disbursement this Period

 9375.00☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Harris Media, LLC

Mailing Address 6500 Manor Drive

City
AustinState
TXZip Code
78723Purpose of Disbursement
Design consulting

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	7			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11221

Amount of Each Disbursement this Period

 7500.00☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Harris Media, LLC

Mailing Address 6500 Manor Drive

City
AustinState
TXZip Code
78723Purpose of Disbursement
Fundraising consulting

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	7			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11222

Amount of Each Disbursement this Period

 43.10☐ Memo Item

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

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

 16918.10

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

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Harris Media, LLC

Mailing Address 6500 Manor Drive

City
AustinState
TXZip Code
78723Purpose of Disbursement
Design consulting

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				04				2019					

FEC Identification Number

C

Transaction ID : SB21B.11223

Amount of Each Disbursement this Period

7500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Harris Media, LLC

Mailing Address 6500 Manor Drive

City
AustinState
TXZip Code
78723Purpose of Disbursement
Fundraising consulting

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				04				2019					

FEC Identification Number

C

Transaction ID : SB21B.11224

Amount of Each Disbursement this Period

357.40

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Harris Media, LLC

Mailing Address 6500 Manor Drive

City
AustinState
TXZip Code
78723Purpose of Disbursement
Design consulting

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				06				2019					

FEC Identification Number

C

Transaction ID : SB21B.11227

Amount of Each Disbursement this Period

7500.00

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

15357.40

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

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

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☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Harris Media, LLC

Mailing Address 6500 Manor Drive

City
AustinState
TXZip Code
78723Purpose of Disbursement
Fundraising consulting

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				06				2019					

FEC Identification Number

C

Transaction ID : SB21B.11228

Amount of Each Disbursement this Period

116.90

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Harris Media, LLC

Mailing Address 6500 Manor Drive

City
AustinState
TXZip Code
78723Purpose of Disbursement
Design consulting

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				04				2019					

FEC Identification Number

C

Transaction ID : SB21B.11229

Amount of Each Disbursement this Period

7500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Harris Media, LLC

Mailing Address 6500 Manor Drive

City
AustinState
TXZip Code
78723Purpose of Disbursement
Fundraising consulting

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				04				2019					

FEC Identification Number

C

Transaction ID : SB21B.11230

Amount of Each Disbursement this Period

55.60

☐ Memo Item

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

7672.50

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Hodas & Associates Strategic Communications

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				06				2019					

Mailing Address 960 Clock Tower Drive, Ste. J

City
SpringfieldState
ILZip Code
62704Purpose of Disbursement
Polling expense

005

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.11425

Amount of Each Disbursement this Period

46922.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Holland & Knight LLP

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
07				22				2019					

Mailing Address PO Box 864084

City
OrlandoState
FLZip Code
32886-4084Purpose of Disbursement
Legal fees

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.11426

Amount of Each Disbursement this Period

280.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ITsavvy

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
07				15				2019					

Mailing Address P.O. Box 3296

City
Glen EllynState
ILZip Code
60138Purpose of Disbursement
Office expense

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.11441

Amount of Each Disbursement this Period

32.37

☐ Memo Item

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

47234.37

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. ITsavvy

Mailing Address P.O. Box 3296

City
Glen EllynState
ILZip Code
60138Purpose of Disbursement
Office expxnese

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	5			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11442

Amount of Each Disbursement this Period

204.60

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Langdon Law LLC

Mailing Address 8913 Cincinnati-Dayton Rd.

City
West ChesterState
OHZip Code
45069Purpose of Disbursement
Legal fees

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	2			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11443

Amount of Each Disbursement this Period

4635.70

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Langdon Law LLC

Mailing Address 8913 Cincinnati-Dayton Rd.

City
West ChesterState
OHZip Code
45069Purpose of Disbursement
Legal fees

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	5			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11444

Amount of Each Disbursement this Period

1026.36

☐ Memo Item

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

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

5866.66

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

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Langdon Law LLC

Mailing Address 8913 Cincinnati-Dayton Rd.

City
West ChesterState
OHZip Code
45069Purpose of Disbursement
Legal fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				04				2019					

FEC Identification Number

C

Transaction ID : SB21B.11445

Amount of Each Disbursement this Period

8312.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. LexisNexis

Mailing Address 28544 Network Place

City
ChicagoState
ILZip Code
60673Purpose of Disbursement
Research services

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
07				15				2019					

FEC Identification Number

C

Transaction ID : SB21B.11446

Amount of Each Disbursement this Period

983.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. LexisNexis

Mailing Address 28544 Network Place

City
ChicagoState
ILZip Code
60673Purpose of Disbursement
Research services

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
08				07				2019					

FEC Identification Number

C

Transaction ID : SB21B.11447

Amount of Each Disbursement this Period

983.00

☐ Memo Item

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

10278.08

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

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

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. LexisNexis

Mailing Address 28544 Network Place

City
ChicagoState
ILZip Code
60673Purpose of Disbursement
Research services

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		04		2019

FEC Identification Number

C

Transaction ID : SB21B.11448

Amount of Each Disbursement this Period

983.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. LexisNexis

Mailing Address 28544 Network Place

City
ChicagoState
ILZip Code
60673Purpose of Disbursement
Research services

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		03		2019

FEC Identification Number

C

Transaction ID : SB21B.11449

Amount of Each Disbursement this Period

983.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. LexisNexis

Mailing Address 28544 Network Place

City
ChicagoState
ILZip Code
60673Purpose of Disbursement
Research services

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		06		2019

FEC Identification Number

C

Transaction ID : SB21B.11450

Amount of Each Disbursement this Period

983.00

☐ Memo Item

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

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

2949.00

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

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. LexisNexis

Mailing Address 28544 Network Place

City
ChicagoState
ILZip Code
60673Purpose of Disbursement
Research services

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				04				2019					

FEC Identification Number

C

Transaction ID : SB21B.11451

Amount of Each Disbursement this Period

 983.00☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Microsoft Corporation

Mailing Address One Microsoft Way

City
RedmondState
WAZip Code
98052Purpose of Disbursement
Software licensing

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
07				11				2019					

FEC Identification Number

C

Transaction ID : SB21B.11452

Amount of Each Disbursement this Period

 145.00☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Microsoft Corporation

Mailing Address One Microsoft Way

City
RedmondState
WAZip Code
98052Purpose of Disbursement
Software licensing

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
08				12				2019					

FEC Identification Number

C

Transaction ID : SB21B.11453

Amount of Each Disbursement this Period

 145.00☐ Memo Item

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

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

 1273.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Microsoft Corporation

Mailing Address One Microsoft Way

City
RedmondState
WAZip Code
98052Purpose of Disbursement
Software licensing

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				1	0		2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11454

Amount of Each Disbursement this Period

145.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Microsoft Corporation

Mailing Address One Microsoft Way

City
RedmondState
WAZip Code
98052Purpose of Disbursement
Software licensing

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0				1	1		2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11455

Amount of Each Disbursement this Period

145.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Microsoft Corporation

Mailing Address One Microsoft Way

City
RedmondState
WAZip Code
98052Purpose of Disbursement
Software licensing

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1				0	8		2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11456

Amount of Each Disbursement this Period

145.00

☐ Memo Item

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

435.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Microsoft Corporation

Mailing Address One Microsoft Way

City
RedmondState
WAZip Code
98052Purpose of Disbursement
Software licensing

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				10				2019					

FEC Identification Number

C Transaction ID : SB21B.11457

Amount of Each Disbursement this Period

145.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Midwest Promotional Group

Mailing Address 16W211 S. Frontage Road

City
Burr RidgeState
ILZip Code
60527Purpose of Disbursement
Office expense

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
08				28				2019					

FEC Identification Number

C Transaction ID : SB21B.11458

Amount of Each Disbursement this Period

1139.72

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mitel Cloud Services, Inc.

Mailing Address 28760 Network Place

City
ChicagoState
ILZip Code
60673-1287Purpose of Disbursement
Telephone and internet service

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
07				12				2019					

FEC Identification Number

C Transaction ID : SB21B.11461

Amount of Each Disbursement this Period

683.16

☐ Memo Item

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

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

1967.88

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

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 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)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Professional Decorating & Painting, Inc

Mailing Address 7149 N. Austin Avenue

City
NilesState
ILZip Code
60714-4617Purpose of Disbursement
Office expense

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				04				2019					

FEC Identification Number

C Transaction ID : SB21B.11468

Amount of Each Disbursement this Period

1080.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Proshred

Mailing Address 7700 Graphics Drive

City
Tinley ParkState
ILZip Code
60477Purpose of Disbursement
Office expense

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
07				30				2019					

FEC Identification Number

C Transaction ID : SB21B.11470

Amount of Each Disbursement this Period

45.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SmartGate Corporation

Mailing Address 15 East Madison St.

City
LombardState
ILZip Code
60148Purpose of Disbursement
Website services

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
07				03				2019					

FEC Identification Number

C Transaction ID : SB21B.11472

Amount of Each Disbursement this Period

467.28

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1592.28

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

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

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. SmartGate Corporation

Mailing Address 15 East Madison St.

City
LombardState
ILZip Code
60148Purpose of Disbursement
Website services

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8				1	5				2	0	1	9

FEC Identification Number

C

Transaction ID : SB21B.11473

Amount of Each Disbursement this Period

46.20

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SmartGate Corporation

Mailing Address 15 East Madison St.

City
LombardState
ILZip Code
60148Purpose of Disbursement
Website services

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8				2	2				2	0	1	9

FEC Identification Number

C

Transaction ID : SB21B.11474

Amount of Each Disbursement this Period

46.20

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SmartGate Corporation

Mailing Address 15 East Madison St.

City
LombardState
ILZip Code
60148Purpose of Disbursement
Website services

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				2	7				2	0	1	9

FEC Identification Number

C

Transaction ID : SB21B.11475

Amount of Each Disbursement this Period

546.20

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

638.60

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)

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☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. SmartGate Corporation

Mailing Address 15 East Madison St.

City
Lombard

State
IL

Zip Code
60148

Purpose of Disbursement
Website services

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 22 / 2019

FEC Identification Number

C

Transaction ID : SB21B.11476

Amount of Each Disbursement this Period

46.20

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SmartGate Corporation

Mailing Address 15 East Madison St.

City
Lombard

State
IL

Zip Code
60148

Purpose of Disbursement
Website services

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 27 / 2019

FEC Identification Number

C

Transaction ID : SB21B.11477

Amount of Each Disbursement this Period

233.70

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SmartGate Corporation

Mailing Address 15 East Madison St.

City
Lombard

State
IL

Zip Code
60148

Purpose of Disbursement
Website services

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 18 / 2019

FEC Identification Number

C

Transaction ID : SB21B.11478

Amount of Each Disbursement this Period

171.20

☐ Memo Item

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

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

451.10

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

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Stripe, Inc.Mailing Address 185 Berry Street
Suite 550City
San FranciscoState
CAZip Code
94107Purpose of Disbursement
Online fundraising fees

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	1			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11180

Amount of Each Disbursement this Period

12.67

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Stripe, Inc.Mailing Address 185 Berry Street
Suite 550City
San FranciscoState
CAZip Code
94107Purpose of Disbursement
Online fundraising fees

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	8			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11185

Amount of Each Disbursement this Period

17.73

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Stripe, Inc.Mailing Address 185 Berry Street
Suite 550City
San FranciscoState
CAZip Code
94107Purpose of Disbursement
Online fundraising fees

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	5			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11186

Amount of Each Disbursement this Period

13.32

☐ Memo Item

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

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

43.72

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)

PAGE 82 OF 98

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Stripe, Inc.

Mailing Address 185 Berry Street
Suite 550

City
San Francisco

State
CA

Zip Code
94107

Purpose of Disbursement
Online fundraising fees

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 22 / 2019

FEC Identification Number

C

Transaction ID : SB21B.11187

Amount of Each Disbursement this Period

31.40

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Stripe, Inc.

Mailing Address 185 Berry Street
Suite 550

City
San Francisco

State
CA

Zip Code
94107

Purpose of Disbursement
Online fundraising fees

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 29 / 2019

FEC Identification Number

C

Transaction ID : SB21B.11188

Amount of Each Disbursement this Period

10.90

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Stripe, Inc.

Mailing Address 185 Berry Street
Suite 550

City
San Francisco

State
CA

Zip Code
94107

Purpose of Disbursement
Online fundraising fees

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 05 / 2019

FEC Identification Number

C

Transaction ID : SB21B.11188

Amount of Each Disbursement this Period

21.52

☐ Memo Item

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

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

63.82

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

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Stripe, Inc.Mailing Address 185 Berry Street
Suite 550City
San FranciscoState
CAZip Code
94107Purpose of Disbursement
Online fundraising fees

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	2			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11190

Amount of Each Disbursement this Period

4.98

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Stripe, Inc.Mailing Address 185 Berry Street
Suite 550City
San FranciscoState
CAZip Code
94107Purpose of Disbursement
Online fundraising fees

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	9			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.9876

Amount of Each Disbursement this Period

7.92

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Stripe, Inc.Mailing Address 185 Berry Street
Suite 550City
San FranciscoState
CAZip Code
94107Purpose of Disbursement
Online fundraising fees

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	6			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.9890

Amount of Each Disbursement this Period

29.79

☐ Memo Item

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

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

42.69

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

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Stripe, Inc.Mailing Address 185 Berry Street
Suite 550City
San FranciscoState
CAZip Code
94107Purpose of Disbursement
Online fundraising fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	3			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.9892

Amount of Each Disbursement this Period

 10.75☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Stripe, Inc.Mailing Address 185 Berry Street
Suite 550City
San FranciscoState
CAZip Code
94107Purpose of Disbursement
Online fundraising fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.9917

Amount of Each Disbursement this Period

 3.02☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Stripe, Inc.Mailing Address 185 Berry Street
Suite 550City
San FranciscoState
CAZip Code
94107Purpose of Disbursement
Online fundraising fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11191

Amount of Each Disbursement this Period

 3.60☐ Memo Item

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

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

 17.37

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)

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☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Stripe, Inc.

Mailing Address 185 Berry Street
Suite 550

City
San Francisco

State
CA

Zip Code
94107

Purpose of Disbursement
Online fundraising fees

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 23 / 2019

FEC Identification Number

C

Transaction ID : SB21B.11192

Amount of Each Disbursement this Period

16.71

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Stripe, Inc.

Mailing Address 185 Berry Street
Suite 550

City
San Francisco

State
CA

Zip Code
94107

Purpose of Disbursement
Online fundraising fees

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2019

FEC Identification Number

C

Transaction ID : SB21B.11193

Amount of Each Disbursement this Period

106.90

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Stripe, Inc.

Mailing Address 185 Berry Street
Suite 550

City
San Francisco

State
CA

Zip Code
94107

Purpose of Disbursement
Online fundraising fees

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 07 / 2019

FEC Identification Number

C

Transaction ID : SB21B.11194

Amount of Each Disbursement this Period

119.09

☐ Memo Item

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

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

242.70

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

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Stripe, Inc.Mailing Address 185 Berry Street
Suite 550City
San FranciscoState
CAZip Code
94107Purpose of Disbursement
Online fundraising fees

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	5			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11195

Amount of Each Disbursement this Period

18.28

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Stripe, Inc.Mailing Address 185 Berry Street
Suite 550City
San FranciscoState
CAZip Code
94107Purpose of Disbursement
Online fundraising fees

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	1			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11196

Amount of Each Disbursement this Period

23.82

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Stripe, Inc.Mailing Address 185 Berry Street
Suite 550City
San FranciscoState
CAZip Code
94107Purpose of Disbursement
Online fundraising fees

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			3	1			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11197

Amount of Each Disbursement this Period

14.22

☐ Memo Item

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

56.32

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

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

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Stripe, Inc.Mailing Address 185 Berry Street
Suite 550City
San FranciscoState
CAZip Code
94107Purpose of Disbursement
Online fundraising fees

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				04				2019					

FEC Identification Number

C

Transaction ID : SB21B.11198

Amount of Each Disbursement this Period

26.06

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Stripe, Inc.Mailing Address 185 Berry Street
Suite 550City
San FranciscoState
CAZip Code
94107Purpose of Disbursement
Online fundraising fees

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				12				2019					

FEC Identification Number

C

Transaction ID : SB21B.11199

Amount of Each Disbursement this Period

9.82

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Stripe, Inc.Mailing Address 185 Berry Street
Suite 550City
San FranciscoState
CAZip Code
94107Purpose of Disbursement
Online fundraising fees

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
11				18				2019					

FEC Identification Number

C

Transaction ID : SB21B.11200

Amount of Each Disbursement this Period

8.36

☐ Memo Item

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

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

44.24

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)

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☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Stripe, Inc.

Mailing Address 185 Berry Street
Suite 550

City
San Francisco

State
CA

Zip Code
94107

Purpose of Disbursement
Online fundraising fees

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
11 / 25 / 2019

FEC Identification Number

C

Transaction ID : SB21B.11201

Amount of Each Disbursement this Period

23.51

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Stripe, Inc.

Mailing Address 185 Berry Street
Suite 550

City
San Francisco

State
CA

Zip Code
94107

Purpose of Disbursement
Online fundraising fees

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
12 / 02 / 2019

FEC Identification Number

C

Transaction ID : SB21B.11202

Amount of Each Disbursement this Period

10.46

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Stripe, Inc.

Mailing Address 185 Berry Street
Suite 550

City
San Francisco

State
CA

Zip Code
94107

Purpose of Disbursement
Online fundraising fees

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
12 / 09 / 2019

FEC Identification Number

C

Transaction ID : SB21B.11203

Amount of Each Disbursement this Period

34.32

☐ Memo Item

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

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

68.29

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

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Stripe, Inc.Mailing Address 185 Berry Street
Suite 550City
San FranciscoState
CAZip Code
94107Purpose of Disbursement
Online fundraising fees

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			1	6			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11204

Amount of Each Disbursement this Period

24.66

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Stripe, Inc.Mailing Address 185 Berry Street
Suite 550City
San FranciscoState
CAZip Code
94107Purpose of Disbursement
Online fundraising fees

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			2	3			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11205

Amount of Each Disbursement this Period

70.03

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Stripe, Inc.Mailing Address 185 Berry Street
Suite 550City
San FranciscoState
CAZip Code
94107Purpose of Disbursement
Online fundraising fees

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			3	0			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11206

Amount of Each Disbursement this Period

9.93

☐ Memo Item

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

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

104.62

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

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Three Arbor Insurance, Inc.

Mailing Address 421 Office Park Drive

City
Mountain BrookState
ALZip Code
35223Purpose of Disbursement
Business insurance

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	2			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11479

Amount of Each Disbursement this Period

19694.98

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Veralith, Inc.

Mailing Address 800 West Fifth Ave.

City
NapervilleState
ILZip Code
60563Purpose of Disbursement
Website content (production cost)

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	8			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11488

Amount of Each Disbursement this Period

10112.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Veralith, Inc.

Mailing Address 800 West Fifth Ave.

City
NapervilleState
ILZip Code
60563Purpose of Disbursement
Website content (production cost)

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	0			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11488

Amount of Each Disbursement this Period

10000.00

☐ Memo Item

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

39806.98

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

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

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Veralith, Inc.

Mailing Address 800 West Fifth Ave.

City
NapervilleState
ILZip Code
60563Purpose of Disbursement
Website content (production cost)

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	7			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11490

Amount of Each Disbursement this Period

10699.95

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Veralith, Inc.

Mailing Address 800 West Fifth Ave.

City
NapervilleState
ILZip Code
60563Purpose of Disbursement
Website content (production cost)

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	5			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11491

Amount of Each Disbursement this Period

10973.99

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Veralith, Inc.

Mailing Address 800 West Fifth Ave.

City
NapervilleState
ILZip Code
60563Purpose of Disbursement
Website content (production cost)

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			2	6			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.11492

Amount of Each Disbursement this Period

10000.00

☐ Memo Item

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

31673.94

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

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

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Veralith, Inc.

Mailing Address 800 West Fifth Ave.

City
NapervilleState
ILZip Code
60563Purpose of Disbursement
Website content (production cost)

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				18				2019					

FEC Identification Number

C

Transaction ID : SB21B.11493

Amount of Each Disbursement this Period

10395.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

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

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

10395.00

556829.60

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

PAGE 93 OF 98

☐ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 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)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Campaign for American Principles Kentucky

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2019

Mailing Address 2800 Shirlington Road, Ste. 1201

City
ArlingtonState
VAZip Code
22206Purpose of Disbursement
Contribution to non-federal committee

011

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB29.11322

Amount of Each Disbursement this Period

100000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

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

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

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

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

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

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

100000.00

100000.00

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 94 OF 98

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Restoration PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

AlphaGraphics Wheaton

Nature of Debt (Purpose):

Direct mail (design, print, postage)

Mailing Address 128 N. Main Street

City

Wheaton

State

IL

Zip Code

60187

Outstanding Balance Beginning This Period

8175.42

Transaction ID : SD10.9653

Amount Incurred This Period

0.00

Payment This Period

8175.42

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Harris Media, LLC

Nature of Debt (Purpose):

Subscription

Mailing Address 6500 Manor Drive

City

Austin

State

TX

Zip Code

78723

Outstanding Balance Beginning This Period

35.25

Transaction ID : SD10.9679

Amount Incurred This Period

0.00

Payment This Period

35.25

Outstanding Balance at Close of This Period

0.00

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)..... ►

0.00

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

0.00

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) ►

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: SD10

Transaction ID : SD10.9653

This communication did not contain express advocacy for or against any candidate.

Form/Schedule: SD10

Transaction ID: SD10.9679

\$35.25 is the remainder of a subscription payment made by Harris Media to NationBuilder on 3/1 on behalf of the Committee. When the debt is paid, the Committee will report the original vendor as required in addition to the payment to Harris Media.

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 96 OF 98
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Restoration PAC				FEC IDENTIFICATION NUMBER ▼ C C00571588	
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 Harris Media, LLC			☐ Memo Item		
Mailing Address 6500 Manor Drive			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 01 / 2019		
City Austin	State TX	Zip Code 78723	Amount 100000.00		
Purpose of Expenditure Digital advertising (placement cost)		Category/Type 004	Transaction ID : SE.11225 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 31 / 2019		
Name of Federal Candidate: PETERS, GARY, , ,			☐ Support ☒ Oppose Office Sought: ☐ House ☒ Senate ☐ President ☐ General District: 00 State: MI		
Calendar Year-To-Date Per Election for Office Sought			979294.00 Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶		
Full Name of Payee Nebo Media, Inc.			☐ Memo Item		
Mailing Address PO Box 9825			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 01 / 2019		
City Arlington	State VA	Zip Code 22219	Amount 879294.00		
Purpose of Expenditure Television advertising (placement cost)		Category/Type 004	Transaction ID : SE.11226 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 30 / 2019		
Name of Federal Candidate: PETERS, GARY, , ,			☐ Support ☒ Oppose Office Sought: ☐ House ☒ Senate ☐ President ☐ General District: 00 State: MI		
Calendar Year-To-Date Per Election for Office Sought			879294.00 Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			979294.00		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Gaskill, Sherry, , ,			Date M M / D D / Y Y Y Y Y Y 01 / 31 / 2020		

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 97 OF 98
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Restoration PAC			FEC IDENTIFICATION NUMBER ▼ C C00571588	
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 ☐ Memo Item Reed Media Partners, LLC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 01 / 2019	
Mailing Address 1320 N. Courthouse Rd., Ste. 130			Amount 11554.00	
City Arlington	State VA	Zip Code 22201	Transaction ID : SE.11471 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 12 / 11 / 2019	
Purpose of Expenditure Television and digital advertising (production cost)		Category/ Type 004		
Name of Federal Candidate: PETERS, GARY, , ,		☐ Support ☒ Oppose	Office Sought: ☐ House District: <u>00</u> ☐ President ☒ Senate State: <u>MI</u>	
Calendar Year-To-Date Per Election for Office Sought 990848.00		Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶		
Full Name of Payee ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y	
Mailing Address			Amount 	
City	State	Zip Code	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y	
Purpose of Expenditure		Category/ Type 		
Name of Federal Candidate:		☐ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☐ President ☐ Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought 		Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			11554.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				
(c) TOTAL Independent Expenditures			990848.00	
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 <i>Gaskill, Sherry, , ,</i>		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 01 / 31 / 2020

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: SE

Transaction ID : SE.11471

Payment for 11/01/19 IE reported on the Committee's 11/01/19 Schedule E; original estimate for IE was \$12,500.00

Form/Schedule:

Transaction ID: