

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

MAGA COALITION, INC.

ADDRESS (number and street) 1001 Brickell Bay Drive

Ste 2700

Check if different than previously reported. (ACC)

Miami FL 33131

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00654343 NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

July 31 Mid-Year Report (Non-election Year Only) (MY)

Termination Report (TER)

(b) Monthly Report Due On:

<input type="checkbox"/> Feb 20 (M2)	<input type="checkbox"/> May 20 (M5)	<input type="checkbox"/> Aug 20 (M8)	<input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only)
<input type="checkbox"/> Mar 20 (M3)	<input type="checkbox"/> Jun 20 (M6)	<input type="checkbox"/> Sep 20 (M9)	<input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only)
<input type="checkbox"/> Apr 20 (M4)	<input type="checkbox"/> Jul 20 (M7)	<input type="checkbox"/> Oct 20 (M10)	<input type="checkbox"/> Jan 31 (YE)

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

<input type="checkbox"/> Primary (12P)	<input type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> Convention (12C)	<input type="checkbox"/> Special (12S)	

Election on M M M / D D D / Y Y Y Y Y Y in the State of

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

<input type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
--	---------------------------------------	--

Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period M M M / D D D / Y Y Y Y Y Y 01 / 01 / 2018 through M M M / D D D / Y Y Y Y Y Y 03 / 31 / 2018

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

HASSINE, BRIAN, , ,

Type or Print Name of Treasurer _____

Signature of Treasurer HASSINE, BRIAN, , , [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y 04 / 18 / 2018

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

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Page 2

Write or Type Committee Name

MAGA COALITION, INC.

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>	<input type="text" value="38922.67"/>	<input type="text" value="38922.67"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="38922.67"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="15885.88"/>	<input type="text" value="15885.88"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="54808.55"/>	<input type="text" value="54808.55"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="32546.75"/>	<input type="text" value="32546.75"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="22261.80"/>	<input type="text" value="22261.80"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

Write or Type Committee Name

MAGA COALITION, INC.

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	9425.00	9425.00
(ii) Unitemized	6460.88	6460.88
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	15885.88	15885.88
(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)	15885.88	15885.88
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).....	0.00	0.00
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)).....▶	15885.88	15885.88
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	15885.88	15885.88

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	32546.75	32546.75
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	32546.75	32546.75
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)	0.00	0.00
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	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	32546.75	32546.75
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	32546.75	32546.75

DETAILED SUMMARY PAGE
of Disbursements

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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)	15885.88	15885.88
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	15885.88	15885.88
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	32546.75	32546.75
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	32546.75	32546.75

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

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

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

NAME OF COMMITTEE (In Full)
MAGA COALITION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Dole, Catherine, , ,		Date of Receipt MM / DD / YYYY 02 / 03 / 2018 Transaction ID : SA11AI.4838
Mailing Address 7722 Antelope Hills Drive		Amount of Each Receipt this Period 300.00
City Antelope	State CA	Zip Code
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Donation
Name of Employer (for Individual)	Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Dole, Catherine, , ,		Date of Receipt MM / DD / YYYY 03 / 04 / 2018 Transaction ID : SA11AI.4850
Mailing Address 7722 Antelope Hills Drive		Amount of Each Receipt this Period 100.00
City Antelope	State CA	Zip Code
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item donation
Name of Employer (for Individual)	Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Glenn, Virginia, , ,		Date of Receipt MM / DD / YYYY 02 / 13 / 2018 Transaction ID : SA11AI.4895
Mailing Address 10245 Highway 76		Amount of Each Receipt this Period 10.00
City Healdton	State OK	Zip Code 73438
FEC ID number of contributing federal political committee. C		<input checked="" type="checkbox"/> Memo Item
Name of Employer (for Individual)	Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 10.00	

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
MAGA COALITION, INC.

A. Hassine, Brian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28241 Crown Valley Pkwy
 City Laguna Niguel State CA Zip Code 92677
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Jeweler
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 01 / 24 / 2018
Transaction ID : SA11AI.4758
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Hassine, Brian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28241 Crown Valley Pkwy
 City Laguna Niguel State CA Zip Code 92677
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Jeweler
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 02 / 24 / 2018
Transaction ID : SA11AI.4938
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Hassine, Brian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1001 Brickell Bay Drive #2700
 City Miami State FL Zip Code 33131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 07 / 2018
Transaction ID : SA11AI.4852
 Amount of Each Receipt this Period 5000.00
 Memo Item
 Contribution towards legal retainer of GA law firm

SUBTOTAL of Receipts This Page (optional)..... ▶ 7000.00
TOTAL This Period (last page this line number only)..... ▶

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

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

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NAME OF COMMITTEE (In Full)
MAGA COALITION, INC.

A. HASSINE, Brian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1001 Brickell Bay Drive
 Suite 2700
 City Miami State FL Zip Code 33131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Business
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **03 / 24 / 2018**
Transaction ID : SA11AI.5002
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Karr, Peter, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5854 NW Plantation Lane
 City Lees Summit State MO 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 ▼ 250.00

Date of Receipt **02 / 13 / 2018**
Transaction ID : SA11AI.4847
 Amount of Each Receipt this Period 250.00
 Memo Item donation

C. McGriff, Shari, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4383 Song Sparrow Dr.
 City Middleburg State FL 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 ▼ 400.00

Date of Receipt **03 / 16 / 2018**
Transaction ID : SA11AI.4872
 Amount of Each Receipt this Period 300.00
 Memo Item donation

SUBTOTAL of Receipts This Page (optional).....▶	1550.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
MAGA COALITION, INC.

A. McGriff, Shari, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4383 Song Sparrow Dr.
 City Middleburg State FL 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 ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 30 / 2018
Transaction ID : SA11AI.4878
 Amount of Each Receipt this Period 50.00
 Memo Item donation

B. Rae, Brenda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15221 North 44th Street
 City Phoenix State AZ Zip Code 85032
 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 ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 21 / 2018
Transaction ID : SA11AI.4984
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Robinson, Melanie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 944 Hardy Circle
 City Dallas State GA Zip Code 30157
 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 ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2018
Transaction ID : SA11AI.4841
 Amount of Each Receipt this Period 200.00
 Memo Item donation

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 10 OF 14
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MAGA COALITION, INC.

A. Robinson, Melanie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 944 Hardy Circle
 City Dallas State GA Zip Code 30157
 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 ▼
 325.00

Date of Receipt
 03 / 14 / 2018
Transaction ID : SA11AI.4856
 Amount of Each Receipt this Period
 100.00
 Memo Item donation

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

Date of Receipt
 03 / 14 / 2018
Transaction ID : SA11AI.4826
 Amount of Each Receipt this Period
 100.00
 Memo Item donation

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

Date of Receipt
 / /
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	9425.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
MAGA COALITION, INC.

Full Name (Last, First, Middle Initial)

A. Delta Airlines

Mailing Address 1030 Delta Blvd.

City Atlanta State GA Zip Code 30354

Purpose of Disbursement
Air Travel for A.Gingrich to Austin, Texas

Candidate Name
MAGA COALITION, INC.

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

State: District:

Date of Disbursement

MM / DD / YYYY
01 / 03 / 2018

FEC Identification Number

C C00654343

Transaction ID : SB21B.4565

Amount of Each Disbursement this Period

596.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Delta Airlines

Mailing Address 1030 Delta Blvd.

City Atlanta State GA Zip Code 30354

Purpose of Disbursement
Air Travel for T. Philips from GA to Austin, TX

Candidate Name
MAGA COALITION, INC.

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

State: District:

Date of Disbursement

MM / DD / YYYY
01 / 05 / 2018

FEC Identification Number

C C00654343

Transaction ID : SB21B.4570

Amount of Each Disbursement this Period

182.60

Memo Item

Full Name (Last, First, Middle Initial)

C. Delta Airlines

Mailing Address 1030 Delta Blvd.

City Atlanta State GA Zip Code 30354

Purpose of Disbursement
Agent Fee for travel for T. Philips from GA to Austin, TX

Candidate Name
MAGA COALITION, INC.

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

State: District:

Date of Disbursement

MM / DD / YYYY
01 / 05 / 2018

FEC Identification Number

C C00654343

Transaction ID : SB21B.4571

Amount of Each Disbursement this Period

20.00

Memo Item

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

798.60

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)

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

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NAME OF COMMITTEE (In Full)
MAGA COALITION, INC.

Full Name (Last, First, Middle Initial) A. Hassine, Brian, , ,		Date of Disbursement MM / DD / YYYY 01 / 18 / 2018
Mailing Address 28241 Crown Valley Pkwy		FEC Identification Number C00654343 Transaction ID : SB21B.4593
City Laguna Niguel	State CA	Zip Code 92677
Purpose of Disbursement Expense reimbursement		Amount of Each Disbursement this Period 2284.00
Candidate Name MAGA COALITION, INC.		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. PRWEB NEWS SERVICE		Date of Disbursement MM / DD / YYYY 01 / 17 / 2018
Mailing Address 12051 Indian Creek		FEC Identification Number C00654343 Transaction ID : SB21B.4593.c
City Beltsville	State MD	Zip Code 20705
Purpose of Disbursement Public Relations services		Amount of Each Disbursement this Period 2284.00
Candidate Name MAGA COALITION, INC.		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. NATIONBUILDER		Date of Disbursement MM / DD / YYYY 03 / 16 / 2018
Mailing Address 520 S. Grand Avenue		FEC Identification Number C00654343 Transaction ID : SB21B.4789
City Los Angeles	State CA	Zip Code 90071
Purpose of Disbursement Internet hosting and website development fee		Amount of Each Disbursement this Period 1290.30
Candidate Name MAGA COALITION, INC.		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

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

3574.30

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
MAGA COALITION, INC.

Full Name (Last, First, Middle Initial)
A. One Click Politics

Date of Disbursement: MM / DD / YYYY
01 / 03 / 2018

Mailing Address: 1629 K Street, NE Suite 300

City: Washington State: DC Zip Code: 20006

Purpose of Disbursement: Internet Services/Quarterly hosting and fundraising software licenses

Candidate Name: **MAGA COALITION, INC.**

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

State: District:

FEC Identification Number: C00654343
Transaction ID : SB21B.4568
Amount of Each Disbursement this Period: 6000.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Paesanos Riverwalk

Date of Disbursement: MM / DD / YYYY
01 / 22 / 2018

Mailing Address: 111 W. Crockett St.

City: San Antonio State: TX Zip Code: 78205

Purpose of Disbursement: Volunteer Luncheon

Candidate Name: **MAGA COALITION, INC.**

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

State: District:

FEC Identification Number: C00654343
Transaction ID : SB21B.4584
Amount of Each Disbursement this Period: 299.80

Memo Item

Full Name (Last, First, Middle Initial)
C. Perry's Restaurant

Date of Disbursement: MM / DD / YYYY
01 / 22 / 2018

Mailing Address: 15900 La Cantera Pky

City: San Antonio State: TX Zip Code: 78256

Purpose of Disbursement: Leadership Dinner

Candidate Name: **MAGA COALITION, INC.**

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

State: District:

FEC Identification Number: C00654343
Transaction ID : SB21B.4586
Amount of Each Disbursement this Period: 915.10

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 7214.90

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
MAGA COALITION, INC.

Full Name (Last, First, Middle Initial) A. Platinum Enterprises		Date of Disbursement MM / DD / YYYY 03 / 19 / 2018
Mailing Address 16 Furier Street		FEC Identification Number C 000654343 Transaction ID : SB21B.4788
City Totowa	State NJ	Zip Code 07512
Purpose of Disbursement Fundraising/Event Planning Deposit		Amount of Each Disbursement this Period 15000.00
Candidate Name MAGA COALITION, INC.		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Platinum Enterprises		Date of Disbursement MM / DD / YYYY 03 / 20 / 2018
Mailing Address 16 Furier Street		FEC Identification Number C Transaction ID : SB21B.4786
City Totowa	State NJ	Zip Code 07512
Purpose of Disbursement Event Planning Deposit		Amount of Each Disbursement this Period 0.00
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Robbins Law Group		Date of Disbursement MM / DD / YYYY 03 / 12 / 2018
Mailing Address 999 Peachtree Street NE		FEC Identification Number C Transaction ID : SB21B.4795
City Atlanta	State GA	Zip Code 30309
Purpose of Disbursement Legal Retainer		Amount of Each Disbursement this Period 5000.00
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	20000.00
TOTAL This Period (last page this line number only).....▶	31587.80