

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

Security Is Strength PAC

ADDRESS (number and street) 51 Peninsula Drive

Check if different than previously reported. (ACC) Hilton Head Island SC 29926

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

C C00573733

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

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

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

- (b) Monthly Report Due On:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <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 / D D / Y Y Y Y Y Y in the State of

- (d) 30-Day POST-Election Report for the:
- | | | |
|---|---------------------------------------|--|
| <input checked="" type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|---|---------------------------------------|--|

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

5. Covering Period M M / D D / Y Y Y Y Y Y 10 / 15 / 2020 through M M / D D / Y Y Y Y Y Y 11 / 23 / 2020

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

Type or Print Name of Treasurer

Signature of Treasurer Bethea, William, L., , Jr. [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 12 / 03 / 2020

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

| | | | | | | | | | |
|-----------------|--|--|--|--|--|--|--|--|--|
| Office Use Only | | | | | | | | | |
|-----------------|--|--|--|--|--|--|--|--|--|

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Security Is Strength PAC

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

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|---|--|
| 6. (a) Cash on Hand January 1, <input type="text" value="2020"/> | <input type="text" value="1441128.26"/> | <input type="text" value="1441128.26"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="3628322.53"/> | |
| (c) Total Receipts (from Line 19) | <input type="text" value="3838215.70"/> | <input type="text" value="13614712.71"/> |
| (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="7466538.23"/> | <input type="text" value="15055840.97"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="7412614.50"/> | <input type="text" value="15001917.24"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="53923.73"/> | <input type="text" value="53923.73"/> |
| 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="500.00"/> | |

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

Security Is Strength PAC

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)..... | 3721099.70 | 13497300.70 |
| (ii) Unitemized | 328.00 | 624.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶ | 3721427.70 | 13497924.70 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 5000.00 | 5000.00 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) | 3726427.70 | 13502924.70 |
| 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)..... | 111788.00 | 111788.01 |
| 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)).....▶ | 3838215.70 | 13614712.71 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶ | 3838215.70 | 13614712.71 |

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 | - 1372907.11 | 856074.33 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | - 1372907.11 | 856074.33 |
| 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) | 8385521.61 | 13745842.91 |
| 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 | 400000.00 | 400000.00 |
| (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))..... | 400000.00 | 400000.00 |
| 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)) .. | 7412614.50 | 15001917.24 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 7412614.50 | 15001917.24 |

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) | 3726427.70 | 13502924.70 |
| 34. Total Contribution Refunds (from Line 28(d)) | 400000.00 | 400000.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 3326427.70 | 13102924.70 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | - 1372907.11 | 856074.33 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 111788.00 | 111788.01 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | - 1484695.11 | 744286.32 |

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

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 6 OF 76 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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

NAME OF COMMITTEE (In Full)
Security Is Strength PAC

A. 612 Carolina Blvd LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28 Bridgeside Blvd.
 City Mount Pleasant State SC Zip Code 29464-4375
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 50000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2020
Transaction ID : SA11AI.5949
 Amount of Each Receipt this Period
 50000.00
 Memo Item
 Contribution

B. A-1 Quality Inc.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3428 Vane Ct. Ste. D
 City Charlotte State NC Zip Code 28206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2020
Transaction ID : SA11AI.5899
 Amount of Each Receipt this Period
 10000.00
 Memo Item
 Contribution

C. Allen, Carl, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5215 N. O'Connor Blvd. Suite 2650
 City Irving State TX Zip Code 75039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Allen Exploration, LLC; Owner 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 / 26 / 2020
Transaction ID : SA11AI.5932
 Amount of Each Receipt this Period
 100000.00
 Memo Item
 Contribution

| | |
|---|-----------|
| SUBTOTAL of Receipts This Page (optional)..... | 160000.00 |
| 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 76 |
| <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)
Security Is Strength PAC

A. Batmasian, James, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 215 N. Federal Hwy
 City Boca Raton State FL Zip Code 33432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Investments Limited Occupation (for Individual) Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt **10 / 23 / 2020**
Transaction ID : SA11AI.5923
 Amount of Each Receipt this Period 50000.00
 Memo Item Contribution

B. Beckwith III, G. Nicholas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 194 Wonderwood Lane
 City Laughlintown State PA Zip Code 15655-2712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Arch Street Mgmt, LLC Occupation (for Individual) Chairman & CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **11 / 03 / 2020**
Transaction ID : SA11AI.5991
 Amount of Each Receipt this Period 500.00
 Memo Item Contribution

C. Catsimatidis, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 800 3rd Ave 5th Fl
 City New York State NY Zip Code 10022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) United Refining Co Occupation (for Individual) Owner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt **10 / 29 / 2020**
Transaction ID : SA11AI.5968
 Amount of Each Receipt this Period 25000.00
 Memo Item Contribution

| | |
|---|----------|
| SUBTOTAL of Receipts This Page (optional)..... | 75500.00 |
| 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 76 |
| | <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)
Security Is Strength PAC

A. Cellini, Julianna, M.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2166 Wiggins Ave.
 City Springfield State IL Zip Code 62701-4388
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Info requested per best effort
 Occupation (for Individual) Info requested per best effort
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 11 / 05 / 2020
Transaction ID : SA11AI.5997
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 Contribution

B. Challey, Robert, E.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2960 Camino Diablo #300
 City Walnut Creek State CA Zip Code 94597-3945
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-employed
 Occupation (for Individual) Real Estate
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 50000.00

Date of Receipt
 10 / 21 / 2020
Transaction ID : SA11AI.5907
 Amount of Each Receipt this Period
 50000.00
 Memo Item
 Contribution

C. Chazen, Stephen, I.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 1225
 City Bellaire State TX Zip Code 77402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Magnolia Oil & Gas
 Occupation (for Individual) CEO
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 100000.00

Date of Receipt
 10 / 29 / 2020
Transaction ID : SA11AI.5970
 Amount of Each Receipt this Period
 100000.00
 Memo Item
 Contribution

| | |
|--|-----------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 155000.00 |
| 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 76 |
| | <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)
Security Is Strength PAC

A. Cleaver, Laird, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 730 Reef Rd.
 City Vero Beach State FL Zip Code 32963-2919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 11 / 02 / 2020
Transaction ID : SA11AI.5985
 Amount of Each Receipt this Period 2000.00
 Memo Item Contribution

B. Colburn, Richard, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 555 Skokie Blvd. Ste. 555
 City Northbrook State IL Zip Code 60062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Payroll Insurance Group, Inc. Occupation (for Individual) VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 55000.00

Date of Receipt 10 / 31 / 2020
Transaction ID : SA11AI.5979
 Amount of Each Receipt this Period 25000.00
 Memo Item Contribution

C. Conley Jr., James, Clement, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8604 Village Park Pl
 City Chevy Chase State MD Zip Code 20815-5743
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Info requested per best effort Occupation (for Individual) Info requested per best effort
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 35000.00

Date of Receipt 10 / 29 / 2020
Transaction ID : SA11AI.5967
 Amount of Each Receipt this Period 35000.00
 Memo Item Contribution

| | |
|--|----------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 62000.00 |
| 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 76 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Security Is Strength PAC

A. Corr, Thomas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3001 Ocean Drive
 Suite 203
 City Vero Beach State FL Zip Code 32963
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) George E Warren LLC Occupation (for Individual) Petroleum Trading
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 10 / 29 / 2020
Transaction ID : SA11AI.5972
 Amount of Each Receipt this Period 10000.00
 Memo Item Contribution

B. Crow Holdings LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3819 Maple Avenue
 City Dallas State TX Zip Code 75219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 10 / 21 / 2020
Transaction ID : SA11AI.5901
 Amount of Each Receipt this Period 50000.00
 Memo Item Contribution

C. Custom Management Services Inc.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 206 W 14th St.
 City Sioux Falls State SD Zip Code 57104
 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 ▼ 75000.00

Date of Receipt 10 / 19 / 2020
Transaction ID : SA11AI.5875
 Amount of Each Receipt this Period 75000.00
 Memo Item Contribution

| | |
|--|-----------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 135000.00 |
| 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 11 OF 76 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Security Is Strength PAC

A. Danos, Eric, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26560 Agoura Road
 Suite 100
 City Calabasas State CA Zip Code 91302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Info requested per best effort
 Occupation (for Individual) Info requested per best effort
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2020
Transaction ID : SA11AI.5989
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 Contribution

B. Diefenthal, Edward, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 131 Airline Drive
 Suite 202
 City Metairie State LA Zip Code 70001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Woodvine Group
 Occupation (for Individual) Executive
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2020
Transaction ID : SA11AI.5999
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 Contribution

C. Duffield, David, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 6714
 City Incline Village State NV Zip Code 89450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ridgeline, Inc.
 Occupation (for Individual) Software
 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 / 23 / 2020
Transaction ID : SA11AI.5921
 Amount of Each Receipt this Period
 100000.00
 Memo Item
 Contribution

| | |
|---|-----------|
| SUBTOTAL of Receipts This Page (optional)..... | 106000.00 |
| 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 12 OF 76 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Security Is Strength PAC

A. Duggan, Robert, William, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 616 Druid Road East
 City Clearwater State FL Zip Code 33756-3912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 139400.00

Date of Receipt 10 / 30 / 2020
Transaction ID : SA11AI.5976
 Amount of Each Receipt this Period 139400.00
 Memo Item Contribution

B. Dyson, John, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 571 Lexington Avenue
 City New York State NY Zip Code 10023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Millbrook Capital Mgmt. Occupation (for Individual) Business Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 10 / 21 / 2020
Transaction ID : SA11AI.5905
 Amount of Each Receipt this Period 50000.00
 Memo Item Contribution

C. Dyson, John, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 571 Lexington Avenue
 City New York State NY Zip Code 10023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Millbrook Capital Mgmt. Occupation (for Individual) Business Executive
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 10 / 28 / 2020
Transaction ID : SA11AI.5954
 Amount of Each Receipt this Period 50000.00
 Memo Item Contribution

| | |
|--|-----------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 239400.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 13 OF 76 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

| | | |
|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)
Security Is Strength PAC

A. Feingold, Jeffrey, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7410 sedona way
 City Delray Beach State FL Zip Code 33446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MCNA Dental Occupation (for Individual) President/CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 11 / 01 / 2020
Transaction ID : SA11AI.5983
 Amount of Each Receipt this Period
 10000.00
 Memo Item Contribution

B. Forster, Peter, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5291 Partridge Ln NW
 City Washington State DC Zip Code 20016-5338
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Clark Construction Group Occupation (for Individual) Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt
 10 / 16 / 2020
Transaction ID : SA11AI.5869
 Amount of Each Receipt this Period
 50000.00
 Memo Item Contribution

C. France, James, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One Daytona Blvd.
 City Daytona Beach State FL Zip Code 32114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Nascar Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 10 / 28 / 2020
Transaction ID : SA11AI.5953
 Amount of Each Receipt this Period
 5000.00
 Memo Item Contribution

| | |
|---|----------|
| SUBTOTAL of Receipts This Page (optional)..... | 65000.00 |
| 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 14 OF 76 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Security Is Strength PAC

A. Gilliam, Richard, Baxter, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 820

| | | |
|-----------------|-------------|------------------------|
| City Keswick | State VA | Zip Code 22947-0820 |
|-----------------|-------------|------------------------|

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

| | |
|---|--|
| Name of Employer (for Individual) Cumberland Development | Occupation (for Individual) Manager |
|---|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 22 | | 2020 |

Transaction ID : SA11AI.5917

Amount of Each Receipt this Period
25000.00

Memo Item Contribution

B. Gilliam, Richard, Baxter, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 820

| | | |
|-----------------|-------------|------------------------|
| City Keswick | State VA | Zip Code 22947-0820 |
|-----------------|-------------|------------------------|

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

| | |
|---|--|
| Name of Employer (for Individual) Cumberland Development | Occupation (for Individual) Manager |
|---|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100000.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 23 | | 2020 |

Transaction ID : SA11AI.5924

Amount of Each Receipt this Period
75000.00

Memo Item Contribution

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

Mailing Address Box 8020

| | | |
|---------------------|-------------|-------------------|
| City Garden City | State NY | Zip Code 11530 |
|---------------------|-------------|-------------------|

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 22 | | 2020 |

Transaction ID : SA11AI.5915

Amount of Each Receipt this Period
10000.00

Memo Item Contribution

| | |
|---|-----------|
| SUBTOTAL of Receipts This Page (optional)..... | 110000.00 |
| 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 15 OF 76 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Security Is Strength PAC

A. Good Stuff LLC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10 E. Lee Street
Apt. 2705

City Baltimore State MD Zip Code 21202

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 ▼
7200.00

Date of Receipt
11 / 05 / 2020
Transaction ID : SA11AI.5995

Amount of Each Receipt this Period
7200.00

Memo Item Contribution

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

Mailing Address 5100 N Tumbleweed Rd

City Eloy State AZ Zip Code 85131

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

Name of Employer (for Individual) Occupation (for Individual)
Skydive Arizona CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
10 / 26 / 2020
Transaction ID : SA11AI.5934

Amount of Each Receipt this Period
2000.00

Memo Item Contribution

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

Mailing Address 504 W. Bleeker St.

City Aspen State CO Zip Code 81611

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
50000.00

Date of Receipt
10 / 28 / 2020
Transaction ID : SA11AI.5959

Amount of Each Receipt this Period
50000.00

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 59200.00

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 16 OF 76 |
| | <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)
Security Is Strength PAC

A. ICAP LC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 865
 City: Great Falls, State: VA, Zip Code: 22066
 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: 1000.00

Date of Receipt: 10 / 20 / 2020
Transaction ID : SA11AI.5888
 Amount of Each Receipt this Period: 1000.00
 Memo Item Contribution

B. Johnson, Charles, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1220 South Ocean Blvd
 City: Palm Beach, State: FL, Zip Code: 33480
 FEC ID number of contributing federal political committee: C
 Name of Employer (for Individual): Retired, Occupation (for Individual): Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date: 110000.00

Date of Receipt: 10 / 27 / 2020
Transaction ID : SA11AI.5935
 Amount of Each Receipt this Period: 100000.00
 Memo Item Contribution

C. Jonas, Howard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3020 Palisade Ave.
 City: Riverdale, State: NY, Zip Code: 10463
 FEC ID number of contributing federal political committee: C
 Name of Employer (for Individual): IDT Corporation, Occupation (for Individual): Founder, Chairman
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date: 25000.00

Date of Receipt: 10 / 30 / 2020
Transaction ID : SA11AI.5973
 Amount of Each Receipt this Period: 25000.00
 Memo Item Contribution

| | |
|---|-----------|
| SUBTOTAL of Receipts This Page (optional)..... | 126000.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 17 OF 76 |
| | <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)
Security Is Strength PAC

A. Joyce, Charles, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 483
 City Wellsville State NY Zip Code 14895
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Otis Eastern Service LLC Occupation (for Individual) Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 10 / 29 / 2020
Transaction ID : SA11AI.5963
 Amount of Each Receipt this Period 10000.00
 Memo Item Contribution

B. K-5 Construction
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 999 Oakmont Plaza Dr. Ste. 20
 City Westmont State IL Zip Code 60559
 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 ▼ 15000.00

Date of Receipt 10 / 19 / 2020
Transaction ID : SA11AI.5877
 Amount of Each Receipt this Period 15000.00
 Memo Item Contribution

C. Kargman, Robert, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 151 Tremont St. # PH
 City Boston State MA Zip Code 02111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The Boston Land Company Occupation (for Individual) Owner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 23999.70

Date of Receipt 10 / 20 / 2020
Transaction ID : SA11AI.5895
 Amount of Each Receipt this Period 23999.70
 Memo Item
 Earmarked through RJC Victory Fund (FEC ID C00528554)

| | |
|---|----------|
| SUBTOTAL of Receipts This Page (optional)..... | 48999.70 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 18 OF 76 |
| | <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)
Security Is Strength PAC

A. Kendrick, Randy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3964 E. Paradise View Drive
 City Paradise Valley State AZ Zip Code 85253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 10 / 19 / 2020
Transaction ID : SA11AI.5881
 Amount of Each Receipt this Period 100000.00
 Memo Item Contribution

B. Kendrick, Randy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3964 E. Paradise View Drive
 City Paradise Valley State AZ Zip Code 85253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200000.00

Date of Receipt 10 / 19 / 2020
Transaction ID : SA11AI.5882
 Amount of Each Receipt this Period 100000.00
 Memo Item Contribution

C. Lenavitt, Jack, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2621 Forestvale Rd.
 City Ottawa Hills State OH Zip Code 43615-2252
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 10 / 21 / 2020
Transaction ID : SA11AI.5903
 Amount of Each Receipt this Period 3000.00
 Memo Item Contribution

| | |
|---|-----------|
| SUBTOTAL of Receipts This Page (optional)..... | 203000.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 19 OF 76 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

| | | |
|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)
Security Is Strength PAC

A. McMahon, Linda, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 Hurlingham Drive
 City Greenwich State CT Zip Code 06831
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) America First Action SuperPAC Occupation (for Individual) Chair
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 10 / 30 / 2020
Transaction ID : SA11AI.5974
 Amount of Each Receipt this Period 50000.00
 Memo Item Contribution

B. Messalunga, Daniel, N., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8111 Bay Colony Drive PH2102
 City Naples State FL Zip Code 34108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5600.00

Date of Receipt 10 / 29 / 2020
Transaction ID : SA11AI.5965
 Amount of Each Receipt this Period 5600.00
 Memo Item Contribution

C. NTI Trading Ltd.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 S. Busse Rd.
 City Mount Prospect State IL Zip Code 60056-2980
 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 ▼ 2500.00

Date of Receipt 10 / 20 / 2020
Transaction ID : SA11AI.5894
 Amount of Each Receipt this Period 2500.00
 Memo Item Contribution

| | |
|---|----------|
| SUBTOTAL of Receipts This Page (optional)..... | 58100.00 |
| 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 20 OF 76 |
| <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)
Security Is Strength PAC

A. Pfautch, Roy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 53 Portland Place
 City St. Louis State MO Zip Code 63108-1242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Civic Service, Inc. Occupation (for Individual) Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 10 / 20 / 2020
Transaction ID : SA11AI.5897
 Amount of Each Receipt this Period 10000.00
 Memo Item Contribution

B. PI Holdings II, Inc.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 148 Milestone Way Suite C
 City Greenville State SC Zip Code 29615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 10 / 27 / 2020
Transaction ID : SA11AI.5945
 Amount of Each Receipt this Period 25000.00
 Memo Item Contribution

C. PI Holdings II, Inc.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 148 Milestone Way Suite C
 City Greenville State SC Zip Code 29615
 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 ▼ 100000.00

Date of Receipt 10 / 28 / 2020
Transaction ID : SA11AI.5957
 Amount of Each Receipt this Period 50000.00
 Memo Item Contribution

| | |
|--|----------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 85000.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 21 OF 76 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Security Is Strength PAC

A. RJC Victory Fund

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

Mailing Address 228 S. Washington Street
Suite 115

City Alexandria State VA Zip Code 22314

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 20 / 2020

Transaction ID : SA11AI.6003

Amount of Each Receipt this Period
23999.70

Memo Item
Earmarked through conduit. PAC limit not affected.

B. Ryan, Patrick, G., ,

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

Mailing Address 150 N. Michigan Ave.
Ste. 2100

City Chicago State IL Zip Code 60601-7559

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

Name of Employer (for Individual) Occupation (for Individual)
Ryan Specialty Group CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 28 / 2020

Transaction ID : SA11AI.5956

Amount of Each Receipt this Period
1000000.00

Memo Item
Contribution

C. Sargent, John, , ,

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

Mailing Address 123 Zaccheus Mead Ln

City Greenwich State CT Zip Code 06831

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

Name of Employer (for Individual) Occupation (for Individual)
Rockefeller Capital Mgmt Financial Advisor

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 22 / 2020

Transaction ID : SA11AI.5909

Amount of Each Receipt this Period
7500.00

Memo Item
Contribution

| | |
|---|------------|
| SUBTOTAL of Receipts This Page (optional)..... | 1007500.00 |
| 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 22 OF 76
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Security Is Strength PAC

A. Saville, Linda, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9616 Brookmeadow Dr.
 City Vienna State VA Zip Code 22182-4418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Info requested per best effort Occupation (for Individual) Info requested per best effort
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 10 / 20 / 2020
Transaction ID : SA11AI.5890
 Amount of Each Receipt this Period 50000.00
 Memo Item Contribution

B. Schar, Dwight, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 505 S. Flagler Dr. Ste. 900
 City West Palm Beach State FL Zip Code 33401-5948
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 10 / 20 / 2020
Transaction ID : SA11AI.5886
 Amount of Each Receipt this Period 50000.00
 Memo Item Contribution

C. Schwab, Helen, O'Neill, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 2
 City Alm Beach State FL Zip Code 33480
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-employed Occupation (for Individual) Investor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250000.00

Date of Receipt 10 / 28 / 2020
Transaction ID : SA11AI.5951
 Amount of Each Receipt this Period 250000.00
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 350000.00
TOTAL This Period (last page this line number only)..... ▶

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

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 23 OF 76 |
| | <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)
Security Is Strength PAC

A. Shannon, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2323 N Mayfair Rd
Ste 240

City Milwaukee State WI Zip Code 53226-1506

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

Name of Employer (for Individual) KSL Capital Partners Occupation (for Individual) CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 15 / 2020

Transaction ID : SA11AI.5867

Amount of Each Receipt this Period
25000.00

Memo Item Contribution

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

Mailing Address 5915 Deloache Ave

City Dallas State TX Zip Code 75225

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
299900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 19 / 2020

Transaction ID : SA11AI.5872

Amount of Each Receipt this Period
99900.00

Memo Item Contribution

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

Mailing Address 5915 Deloache Ave

City Dallas State TX Zip Code 75225

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 19 / 2020

Transaction ID : SA11AI.5873

Amount of Each Receipt this Period
100.00

Memo Item Contribution

| | |
|---|-----------|
| SUBTOTAL of Receipts This Page (optional)..... | 125000.00 |
| 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 24 OF 76 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Security Is Strength PAC

A. Tauber, Sandra, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 87 Chestnut Street S

| | | |
|--------------------|-------------|-------------------|
| City Livingston | State NJ | Zip Code 07039 |
|--------------------|-------------|-------------------|

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10 | / | 24 | / | 2020 |

Transaction ID : SA11AI.5928

Amount of Each Receipt this Period
1000.00

Memo Item Contribution

B. The Government Integrity Fund
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. Box 10181

| | | |
|------------------|-------------|-------------------|
| City Columbus | State OH | Zip Code 43201 |
|------------------|-------------|-------------------|

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 ▼
1900000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10 | / | 28 | / | 2020 |

Transaction ID : SA11AI.5961

Amount of Each Receipt this Period
400000.00

Memo Item Contribution

C. Vala, Frank, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 405 N. MacArthur Blvd.

| | | |
|---------------------|-------------|------------------------|
| City Springfield | State IL | Zip Code 62702-2312 |
|---------------------|-------------|------------------------|

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

| | |
|---|---|
| Name of Employer (for Individual) Info requested per best effort | Occupation (for Individual) Info requested per best effort |
|---|---|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 11 | / | 05 | / | 2020 |

Transaction ID : SA11AI.5993

Amount of Each Receipt this Period
10000.00

Memo Item Contribution

| | |
|---|-----------|
| SUBTOTAL of Receipts This Page (optional)..... | 411000.00 |
| 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 25 OF 76 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Security Is Strength PAC

A. Webb, Dan, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35 W. Wacker Dr.
 FL. 45
 City Chicago State IL Zip Code 60601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Winston & Strawn LLP Occupation (for Individual) Partner
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2020
Transaction ID : SA11AI.5884
 Amount of Each Receipt this Period
 10000.00
 Memo Item Contribution

B. Webster, Steven, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1908 River Oasis Blvd.
 City Houston State TX Zip Code 77019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AEC Partners Occupation (for Individual) Investments
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 15000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 16 / 2020
Transaction ID : SA11AI.5871
 Amount of Each Receipt this Period
 15000.00
 Memo Item Contribution

C. Wesley, Joseph, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 645 Pineville Road
 City Newton State PA Zip Code 18940
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 64400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2020
Transaction ID : SA11AI.5911
 Amount of Each Receipt this Period
 64400.00
 Memo Item Contribution

| | |
|---|----------|
| SUBTOTAL of Receipts This Page (optional)..... | 89400.00 |
| 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 26 OF 76 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Security Is Strength PAC

A. Wiseman, Frank, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2339 Kingsbury Dr.
 City Charlotte State NC Zip Code 28206-6148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Info requested per best effort Info requested per best effort
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2020
Transaction ID : SA11AI.5941
 Amount of Each Receipt this Period
 10000.00
 Memo Item
 Contribution

B. Wold, Elaine, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1515 S. Federal Hwy. Suite 201
 City Boca Raton State FL Zip Code 33432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Retired Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 20000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2020
Transaction ID : SA11AI.5939
 Amount of Each Receipt this Period
 20000.00
 Memo Item
 Contribution

C. Wold Jr., Keith, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 701 E Commercial Blvd.
 City Fort Lauderdale State FL Zip Code 33334
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Self-employed Attorney/Investor
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 20000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2020
Transaction ID : SA11AI.5913
 Amount of Each Receipt this Period
 20000.00
 Memo Item
 Contribution

| | |
|---|------------|
| SUBTOTAL of Receipts This Page (optional)..... | 50000.00 |
| TOTAL This Period (last page this line number only)..... | 3721099.70 |

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

| | | | |
|---|------------------------------|---|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 27 OF 76 |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Security Is Strength PAC

A. REPUBLICAN PARTY OF FLORIDA - FEDERAL

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

Mailing Address 420 E. JEFFERSON STREET

| | | |
|---------------------|-------------|-------------------|
| City TALLAHASSEE | State FL | Zip Code 32301 |
|---------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C** C00099259

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 27 | | 2020 |

Transaction ID : SA11C.6004

Amount of Each Receipt this Period
5000.00

Memo Item Contribution

B.

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
|-----|---|-----|---|---------|

Amount of Each Receipt this Period

Memo Item

C.

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
|-----|---|-----|---|---------|

Amount of Each Receipt this Period

Memo Item

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 5000.00 |
| TOTAL This Period (last page this line number only)..... | 5000.00 |

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

| | | | |
|---|------------------------------|---|-----------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 28 OF 76 |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input checked="" type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
Security Is Strength PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Starboard Communications Agency

Mailing Address 1043 Barr Road

| | | |
|-------------------|-------------|-------------------|
| City Lexington | State SC | Zip Code 29072 |
|-------------------|-------------|-------------------|

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 ▼
111788.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 22 | | 2020 |

Transaction ID : SA15.6054

Amount of Each Receipt this Period
111788.00

Memo Item
 Partial refund of pre-payment for direct mail (printing and postage) paid 10/01

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
|-----|---|-----|---|---------|

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
|-----|---|-----|---|---------|

Amount of Each Receipt this Period

Memo Item

| | |
|---|-----------|
| SUBTOTAL of Receipts This Page (optional)..... | 111788.00 |
| TOTAL This Period (last page this line number only)..... | 111788.00 |

**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)
Security Is Strength PAC

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. Capital Cornered, LLC | | Date of Disbursement MM / DD / YYYY 10 / 19 / 2020 |
| Mailing Address 25 Bates Road | | FEC Identification Number C [REDACTED] Transaction ID : SB21B.6009 Amount of Each Disbursement this Period 71400.00 |
| City Arlington | State MA | Zip Code 02474 |
| Purpose of Disbursement Fundraising commission | <input type="checkbox"/> 003 Category/ Type | <input type="checkbox"/> Memo Item |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| State: District: | | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) B. Capital Cornered, LLC | | Date of Disbursement MM / DD / YYYY 10 / 28 / 2020 |
| Mailing Address 25 Bates Road | | FEC Identification Number C [REDACTED] Transaction ID : SB21B.6010 Amount of Each Disbursement this Period 100000.00 |
| City Arlington | State MA | Zip Code 02474 |
| Purpose of Disbursement Fundraising commission | <input type="checkbox"/> 003 Category/ Type | <input type="checkbox"/> Memo Item |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| State: District: | | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) C. Chain Bridge Bank | | Date of Disbursement MM / DD / YYYY 10 / 16 / 2020 |
| Mailing Address 1445-A Laughlin Ave. | | FEC Identification Number C [REDACTED] Transaction ID : SB21B.6011 Amount of Each Disbursement this Period 20.00 |
| City McLean | State VA | Zip Code 22101 |
| Purpose of Disbursement Bank fees | <input type="checkbox"/> 001 Category/ Type | <input type="checkbox"/> Memo Item |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| State: District: | | |

| | |
|--|-----------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 171420.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Security Is Strength PAC

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) A. Chain Bridge Bank | | Date of Disbursement MM / DD / YYYY 10 / 16 / 2020 | |
| Mailing Address 1445-A Laughlin Ave. | | FEC Identification Number C [REDACTED] Transaction ID : SB21B.6013 | |
| City McLean | State VA | Zip Code 22101 | Amount of Each Disbursement this Period 20.00 |
| Purpose of Disbursement Bank fees | | Category/ Type 001 | Memo Item <input type="checkbox"/> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | | |

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) B. Chain Bridge Bank | | Date of Disbursement MM / DD / YYYY 10 / 20 / 2020 | |
| Mailing Address 1445-A Laughlin Ave. | | FEC Identification Number C [REDACTED] Transaction ID : SB21B.6014 | |
| City McLean | State VA | Zip Code 22101 | Amount of Each Disbursement this Period 20.00 |
| Purpose of Disbursement Bank fees | | Category/ Type 001 | Memo Item <input type="checkbox"/> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | | |

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) C. Chain Bridge Bank | | Date of Disbursement MM / DD / YYYY 10 / 20 / 2020 | |
| Mailing Address 1445-A Laughlin Ave. | | FEC Identification Number C [REDACTED] Transaction ID : SB21B.6015 | |
| City McLean | State VA | Zip Code 22101 | Amount of Each Disbursement this Period 20.00 |
| Purpose of Disbursement Bank fees | | Category/ Type 001 | Memo Item <input type="checkbox"/> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | | |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 60.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Security Is Strength PAC

Full Name (Last, First, Middle Initial)

A. Chain Bridge Bank

Mailing Address 1445-A Laughlin Ave.

City McLean State VA Zip Code 22101

Purpose of Disbursement
Bank fees

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.6016
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Chain Bridge Bank

Mailing Address 1445-A Laughlin Ave.

City McLean State VA Zip Code 22101

Purpose of Disbursement
Bank fees

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.6017
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Chain Bridge Bank

Mailing Address 1445-A Laughlin Ave.

City McLean State VA Zip Code 22101

Purpose of Disbursement
Bank fees

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.6018
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Security Is Strength PAC

Full Name (Last, First, Middle Initial)

A. Chain Bridge Bank

Mailing Address 1445-A Laughlin Ave.

City McLean State VA Zip Code 22101

Purpose of Disbursement
Bank fees

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.6019
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Chain Bridge Bank

Mailing Address 1445-A Laughlin Ave.

City McLean State VA Zip Code 22101

Purpose of Disbursement
Bank fees

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.6020
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Chain Bridge Bank

Mailing Address 1445-A Laughlin Ave.

City McLean State VA Zip Code 22101

Purpose of Disbursement
Bank fees

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.6021
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Security Is Strength PAC

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Chain Bridge Bank | | Date of Disbursement MM / DD / YYYY 10 / 26 / 2020 |
| Mailing Address 1445-A Laughlin Ave. | | FEC Identification Number C [REDACTED] Transaction ID : SB21B.6022 |
| City McLean | State VA | Zip Code 22101 |
| Purpose of Disbursement Bank fees | Category/Type 001 | |
| Candidate Name | Amount of Each Disbursement this Period 20.00 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | <input type="checkbox"/> Memo Item | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Chain Bridge Bank | | Date of Disbursement MM / DD / YYYY 10 / 27 / 2020 |
| Mailing Address 1445-A Laughlin Ave. | | FEC Identification Number C [REDACTED] Transaction ID : SB21B.6023 |
| City McLean | State VA | Zip Code 22101 |
| Purpose of Disbursement Bank fees | Category/Type 001 | |
| Candidate Name | Amount of Each Disbursement this Period 20.00 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | <input type="checkbox"/> Memo Item | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Chain Bridge Bank | | Date of Disbursement MM / DD / YYYY 10 / 28 / 2020 |
| Mailing Address 1445-A Laughlin Ave. | | FEC Identification Number C [REDACTED] Transaction ID : SB21B.6024 |
| City McLean | State VA | Zip Code 22101 |
| Purpose of Disbursement Bank fees | Category/Type 001 | |
| Candidate Name | Amount of Each Disbursement this Period 20.00 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | <input type="checkbox"/> Memo Item | |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 60.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Security Is Strength PAC

| | | | |
|--|-------------|--|--|
| Full Name (Last, First, Middle Initial) A. Chain Bridge Bank | | Date of Disbursement MM / DD / YYYY 10 / 28 / 2020 | |
| Mailing Address 1445-A Laughlin Ave. | | | |
| City McLean | State VA | Zip Code 22101 | |
| Purpose of Disbursement Bank fees | | <input type="checkbox"/> 001 | FEC Identification Number C |
| Candidate Name | | Category/ Type | Transaction ID : SB21B.6025 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| <input type="checkbox"/> Memo Item | | | |

| | | | |
|--|-------------|--|--|
| Full Name (Last, First, Middle Initial) B. Chain Bridge Bank | | Date of Disbursement MM / DD / YYYY 10 / 29 / 2020 | |
| Mailing Address 1445-A Laughlin Ave. | | | |
| City McLean | State VA | Zip Code 22101 | |
| Purpose of Disbursement Bank fees | | <input type="checkbox"/> 001 | FEC Identification Number C |
| Candidate Name | | Category/ Type | Transaction ID : SB21B.6026 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| <input type="checkbox"/> Memo Item | | | |

| | | | |
|--|-------------|--|--|
| Full Name (Last, First, Middle Initial) C. Chain Bridge Bank | | Date of Disbursement MM / DD / YYYY 10 / 29 / 2020 | |
| Mailing Address 1445-A Laughlin Ave. | | | |
| City McLean | State VA | Zip Code 22101 | |
| Purpose of Disbursement Bank fees | | <input type="checkbox"/> 001 | FEC Identification Number C |
| Candidate Name | | Category/ Type | Transaction ID : SB21B.6027 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| <input type="checkbox"/> Memo Item | | | |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 60.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Security Is Strength PAC

| | | | |
|--|--|--|---|
| Full Name (Last, First, Middle Initial) A. Chain Bridge Bank | | Date of Disbursement MM / DD / YYYY 10 / 30 / 2020 | |
| Mailing Address 1445-A Laughlin Ave. | | | |
| City McLean | State VA | Zip Code 22101 | |
| Purpose of Disbursement Bank fees | | <input type="text" value="001"/> | FEC Identification Number <input type="text" value="C"/> |
| Candidate Name | | <input type="text" value="001"/> Category/ Type | Transaction ID : SB21B.6028 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | | Amount of Each Disbursement this Period <input type="text" value="20.00"/> |
| State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | <input type="checkbox"/> Memo Item |

| | | | |
|--|--|--|---|
| Full Name (Last, First, Middle Initial) B. Chain Bridge Bank | | Date of Disbursement MM / DD / YYYY 10 / 30 / 2020 | |
| Mailing Address 1445-A Laughlin Ave. | | | |
| City McLean | State VA | Zip Code 22101 | |
| Purpose of Disbursement Bank fees | | <input type="text" value="001"/> | FEC Identification Number <input type="text" value="C"/> |
| Candidate Name | | <input type="text" value="001"/> Category/ Type | Transaction ID : SB21B.6029 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | | Amount of Each Disbursement this Period <input type="text" value="20.00"/> |
| State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | <input type="checkbox"/> Memo Item |

| | | | |
|--|--|--|---|
| Full Name (Last, First, Middle Initial) C. Chain Bridge Bank | | Date of Disbursement MM / DD / YYYY 11 / 02 / 2020 | |
| Mailing Address 1445-A Laughlin Ave. | | | |
| City McLean | State VA | Zip Code 22101 | |
| Purpose of Disbursement Bank fees | | <input type="text" value="001"/> | FEC Identification Number <input type="text" value="C"/> |
| Candidate Name | | <input type="text" value="001"/> Category/ Type | Transaction ID : SB21B.6030 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | | Amount of Each Disbursement this Period <input type="text" value="20.00"/> |
| State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | <input type="checkbox"/> Memo Item |

| | |
|--|------------------------------------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | <input type="text" value="60.00"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text"/> |

**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)
Security Is Strength PAC

A. Langdon Law LLC

Full Name (Last, First, Middle Initial)

Mailing Address 8913 Cincinnati-Dayton Rd.

City West Chester State OH Zip Code 45069

Purpose of Disbursement Legal fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 18 / 2020

FEC Identification Number: C

Transaction ID : SB21B.6032

Amount of Each Disbursement this Period: 25209.25

Memo Item

B. National Ad Placement

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 191271

City Dallas State TX Zip Code 75219

Purpose of Disbursement Television advertising (IE paid 10/1/20, see schedule E)

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 21 / 2020

FEC Identification Number: C

Transaction ID : SB21B.5639

Amount of Each Disbursement this Period: - 787598.10

Memo Item

C. National Ad Placement

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 191271

City Dallas State TX Zip Code 75219

Purpose of Disbursement Digital advertising (IE paid 10/1/20, see schedule E)

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 24 / 2020

FEC Identification Number: C

Transaction ID : SB21B.5640

Amount of Each Disbursement this Period: - 838392.30

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ - 1600781.15

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)
Security Is Strength PAC

A. Raise the Money

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address P.O. Box 26466

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 10 | | 15 | | 2020 |

City Little Rock State AR Zip Code 72221

FEC Identification Number

Purpose of Disbursement Fundraising fees

| |
|---------------|
| C |
| 003 |
| Category/Type |

| |
|---|
| C |
| Transaction ID : SB21B.6033 |
| Amount of Each Disbursement this Period |
| 1715.50 |

Candidate Name

| | |
|--|--|
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| State: District: | |

Memo Item

B. Raise the Money

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address P.O. Box 26466

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 10 | | 19 | | 2020 |

City Little Rock State AR Zip Code 72221

FEC Identification Number

Purpose of Disbursement Fundraising fees

| |
|---------------|
| C |
| 003 |
| Category/Type |

| |
|---|
| C |
| Transaction ID : SB21B.6034 |
| Amount of Each Disbursement this Period |
| 9800.50 |

Candidate Name

| | |
|--|--|
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| State: District: | |

Memo Item

C. Raise the Money

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address P.O. Box 26466

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 10 | | 21 | | 2020 |

City Little Rock State AR Zip Code 72221

FEC Identification Number

Purpose of Disbursement Fundraising fees

| |
|---------------|
| C |
| 003 |
| Category/Type |

| |
|---|
| C |
| Transaction ID : SB21B.6035 |
| Amount of Each Disbursement this Period |
| 1.47 |

Candidate Name

| | |
|--|--|
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| State: District: | |

Memo Item

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

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

| |
|----------|
| 11517.47 |
|----------|

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**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)
Security Is Strength PAC

A. Raise the Money

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 26466

City Little Rock State AR Zip Code 72221

Purpose of Disbursement Fundraising fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 23 / 2020

FEC Identification Number: C

Transaction ID : **SB21B.6036**

Amount of Each Disbursement this Period: 0.74

Memo Item

B. Raise the Money

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 26466

City Little Rock State AR Zip Code 72221

Purpose of Disbursement Fundraising fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 26 / 2020

FEC Identification Number: C

Transaction ID : **SB21B.6037**

Amount of Each Disbursement this Period: 490.25

Memo Item

C. Raise the Money

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 26466

City Little Rock State AR Zip Code 72221

Purpose of Disbursement Fundraising fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 27 / 2020

FEC Identification Number: C

Transaction ID : **SB21B.6038**

Amount of Each Disbursement this Period: 2.70

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 493.69

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)
Security Is Strength PAC

A. Raise the Money

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address P.O. Box 26466

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 10 | | 28 | | 2020 |

City Little Rock State AR Zip Code 72221

FEC Identification Number

Purpose of Disbursement Fundraising fees

| |
|---------------|
| C |
| 003 |
| Category/Type |

Transaction ID : SB21B.6039
Amount of Each Disbursement this Period

Candidate Name

| |
|-------|
| 53.42 |
|-------|

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

Memo Item

B. Raise the Money

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address P.O. Box 26466

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 10 | | 29 | | 2020 |

City Little Rock State AR Zip Code 72221

FEC Identification Number

Purpose of Disbursement Fundraising fees

| |
|---------------|
| C |
| 003 |
| Category/Type |

Transaction ID : SB21B.6041
Amount of Each Disbursement this Period

Candidate Name

| |
|--------|
| 104.87 |
|--------|

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

Memo Item

C. Raise the Money

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address P.O. Box 26466

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 11 | | 02 | | 2020 |

City Little Rock State AR Zip Code 72221

FEC Identification Number

Purpose of Disbursement Fundraising fees

| |
|---------------|
| C |
| 003 |
| Category/Type |

Transaction ID : SB21B.6042
Amount of Each Disbursement this Period

Candidate Name

| |
|--------|
| 764.90 |
|--------|

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

Memo Item

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

| |
|--------|
| 923.19 |
|--------|

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

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| |
|--|

**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)
Security Is Strength PAC

A. Raise the Money

Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 26466

City Little Rock State AR Zip Code 72221

Purpose of Disbursement Fundraising fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 04 / 2020

FEC Identification Number: C

Transaction ID : SB21B.6043

Amount of Each Disbursement this Period: 493.09

Memo Item

B. Vandenberg & Associates, Inc.

Full Name (Last, First, Middle Initial)
Mailing Address 3927 Elm Avenue

City Long Beach State CA Zip Code 90807

Purpose of Disbursement Fundraising commission & expense reimbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 19 / 2020

FEC Identification Number: C

Transaction ID : SB21B.5590

Amount of Each Disbursement this Period: 21466.60

Memo Item

C. FedEx Office

Full Name (Last, First, Middle Initial)
Mailing Address 1512 14th St. NW

City Washington State DC Zip Code 20005

Purpose of Disbursement Office expense reimbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 24 / 2020

FEC Identification Number: C

Transaction ID : SB21B.5590.

Amount of Each Disbursement this Period: 52.59

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 21959.69

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)
Security Is Strength PAC

Full Name (Last, First, Middle Initial)

A. FedEx Office

Mailing Address 1512 14th St. NW

City Washington State DC Zip Code 20005

Purpose of Disbursement Office expense reimbursement

001
Category/Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
09 / 29 / 2020

FEC Identification Number
C
Transaction ID : SB21B.5590.
Amount of Each Disbursement this Period
55.36

Memo Item

Full Name (Last, First, Middle Initial)

B. FedEx Office

Mailing Address 1512 14th St. NW

City Washington State DC Zip Code 20005

Purpose of Disbursement Office expense reimbursement

001
Category/Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
10 / 01 / 2020

FEC Identification Number
C
Transaction ID : SB21B.5590.4
Amount of Each Disbursement this Period
52.71

Memo Item

Full Name (Last, First, Middle Initial)

C. Vandenberg & Associates, Inc.

Mailing Address 3927 Elm Avenue

City Long Beach State CA Zip Code 90807

Purpose of Disbursement Fundraising commission

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 / 20 / 2020

FEC Identification Number
C
Transaction ID : SB21B.6044
Amount of Each Disbursement this Period
1200.00

Memo Item

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

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

1200.00

**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 |

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)
Security Is Strength PAC

| | | | |
|---|--|--|---|
| Full Name (Last, First, Middle Initial) A. Vandenberg & Associates, Inc. | | Date of Disbursement MM / DD / YYYY 10 / 29 / 2020 | |
| Mailing Address 3927 Elm Avenue | | FEC Identification Number C [] | |
| City Long Beach | State CA | Zip Code 90807 | Transaction ID : SB21B.6045 |
| Purpose of Disbursement Fundraising commission | | Category/ Type 003 | Amount of Each Disbursement this Period 20000.00 |
| Candidate Name | | Memo Item <input type="checkbox"/> | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | | |

| | | | |
|---|--|--|---|
| Full Name (Last, First, Middle Initial) B. | | Date of Disbursement MM / DD / YYYY | |
| Mailing Address | | FEC Identification Number C [] | |
| City | State | Zip Code | Amount of Each Disbursement this Period |
| Purpose of Disbursement | | Category/ Type | Memo Item <input type="checkbox"/> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | | |

| | | | |
|---|--|--|---|
| Full Name (Last, First, Middle Initial) C. | | Date of Disbursement MM / DD / YYYY | |
| Mailing Address | | FEC Identification Number C [] | |
| City | State | Zip Code | Amount of Each Disbursement this Period |
| Purpose of Disbursement | | Category/ Type | Memo Item <input type="checkbox"/> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | | |

| | |
|--|--------------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 20000.00 |
| TOTAL This Period (last page this line number only).....▶ | - 1372907.11 |

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

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

FOR LINE NUMBER:
(check only one)

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

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)
Security Is Strength PAC

A. The Government Integrity Fund

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 10181

City Columbus State OH Zip Code 43201

Purpose of Disbursement Refund of contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 04 / 2020

FEC Identification Number: C

Transaction ID : SB28A.6031

Amount of Each Disbursement this Period: 400000.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

| | |
|--|-----------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 400000.00 |
| TOTAL This Period (last page this line number only).....▶ | 400000.00 |

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

| | |
|---|-----------------------------------|
| (Use separate schedule(s) for each numbered line) | PAGE 44 OF 76 |
| | FOR LINE NUMBER: (check only one) |
| <input type="checkbox"/> | 9 |
| <input checked="" type="checkbox"/> | 10 |

NAME OF COMMITTEE (In Full)
Security Is Strength PAC

| | | | |
|--|-------------|-------------------|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor 406 Enterprises LLC | | | Nature of Debt (Purpose): Digital advertising for online petition (does not contain express advocacy) |
| Mailing Address PO Box 75727 | | | |
| City Washington | State DC | Zip Code 20013 | |

| | | |
|--|--|--|
| Outstanding Balance Beginning This Period <input type="text" value="500.00"/> | Transaction ID : SD10.5236 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="500.00"/> |

| | | | |
|--|-------------|-------------------|---|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Capital Cornered, LLC | | | Nature of Debt (Purpose): Fundraising commission |
| Mailing Address 25 Bates Road | | | |
| City Arlington | State MA | Zip Code 02474 | |

| | | |
|--|--|--|
| Outstanding Balance Beginning This Period <input type="text" value="71400.00"/> | Transaction ID : SD10.5667 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="71400.00"/> | Outstanding Balance at Close of This Period <input type="text" value="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 <input type="text"/> | | |
| Amount Incurred This Period <input type="text"/> | Payment This Period <input type="text"/> | Outstanding Balance at Close of This Period <input type="text"/> |

| | |
|--|-------------------------------------|
| 1) SUBTOTALS This Period This Page (optional)..... ▶ | <input type="text" value="500.00"/> |
| 2) TOTALS This Period (last page this line number only)..... ▶ | <input type="text" value="500.00"/> |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶ | <input type="text" value="0.00"/> |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶ | <input type="text" value="500.00"/> |

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Security Is Strength PAC
FEC IDENTIFICATION NUMBER C C00573733

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee 406 Enterprises LLC
Mailing Address PO Box 75727
City Washington State DC Zip Code 20013
Purpose of Expenditure Digital advertising (placement cost)
Category/Type 004
Date of Public Distribution/Dissemination 10/23/2020
Amount 15000.00
Transaction ID : SE.5757
Date of Disbursement or Obligation 10/22/2020

Name of Federal Candidate: HARRISON, JAIME, ,
Support Oppose
Office Sought: House Senate State: SC
Disbursement For: Primary General 2020 Other (specify)

Full Name of Payee 406 Enterprises LLC
Mailing Address PO Box 75727
City Washington State DC Zip Code 20013
Purpose of Expenditure Digital advertising (placement cost)
Category/Type 004
Date of Public Distribution/Dissemination 10/23/2020
Amount 15000.00
Transaction ID : SE.5758
Date of Disbursement or Obligation 10/22/2020

Name of Federal Candidate: Graham, Lindsey, O., ,
Support Oppose
Office Sought: House Senate State: SC
Disbursement For: Primary General 2020 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 30000.00
(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.

Bethea, William, L., Jr.

[Electronically Filed]

Date 12/03/2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Security Is Strength PAC
FEC IDENTIFICATION NUMBER C C00573733

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee 406 Enterprises LLC
Mailing Address PO Box 75727
City Washington State DC Zip Code 20013
Purpose of Expenditure Digital advertising (placement cost)
Category/Type 004
Date of Public Distribution/Dissemination 10/29/2020
Amount 37500.00
Transaction ID : SE.5814
Date of Disbursement or Obligation 10/29/2020

Name of Federal Candidate: HARRISON, JAIME, ,
Support Oppose
Office Sought: House Senate
District: 00 State: SC
Calendar Year-To-Date Per Election for Office Sought 11229834.60
Disbursement For: Primary General 2020 Other (specify)

Full Name of Payee 406 Enterprises LLC
Mailing Address PO Box 75727
City Washington State DC Zip Code 20013
Purpose of Expenditure Digital advertising (placement cost)
Category/Type 004
Date of Public Distribution/Dissemination 10/29/2020
Amount 37500.00
Transaction ID : SE.5815
Date of Disbursement or Obligation 10/29/2020

Name of Federal Candidate: Graham, Lindsey, O., ,
Support Oppose
Office Sought: House Senate
District: 00 State: SC
Calendar Year-To-Date Per Election for Office Sought 11267334.60
Disbursement For: Primary General 2020 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 75000.00
(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.

Bethea, William, L., Jr.

[Electronically Filed]

Date 12/03/2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Security Is Strength PAC
FEC IDENTIFICATION NUMBER C C00573733

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee 406 Enterprises LLC
Mailing Address PO Box 75727
City Washington State DC Zip Code 20013
Purpose of Expenditure Peer-to-peer texting Category/Type 004
Date of Public Distribution/Dissemination 11/01/2020
Amount 19757.80
Transaction ID: SE.5857
Date of Disbursement or Obligation 11/02/2020

Name of Federal Candidate: HARRISON, JAIME, ,
Support Oppose
Office Sought: House Senate State: SC
Disbursement For: Primary General 2020 Other (specify)

Full Name of Payee 406 Enterprises LLC
Mailing Address PO Box 75727
City Washington State DC Zip Code 20013
Purpose of Expenditure Peer-to-peer texting Category/Type 004
Date of Public Distribution/Dissemination 11/02/2020
Amount 12215.04
Transaction ID: SE.5858
Date of Disbursement or Obligation 11/02/2020

Name of Federal Candidate: HARRISON, JAIME, ,
Support Oppose
Office Sought: House Senate State: SC
Disbursement For: Primary General 2020 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 31972.84
(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.

Bethea, William, L., Jr. [Electronically Filed] Date 12/03/2020
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Security Is Strength PAC
FEC IDENTIFICATION NUMBER C C00573733

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee 406 Enterprises LLC
Mailing Address PO Box 75727
City Washington State DC Zip Code 20013
Purpose of Expenditure Peer-to-peer texting Category/Type 004
Name of Federal Candidate: Graham, Lindsey, O., Support
Office Sought: Senate State: SC
Calendar Year-To-Date Per Election for Office Sought 12946853.31
Disbursement For: General 2020

Full Name of Payee Campaign HQ
Mailing Address PO Box 257
City Brooklyn State IA Zip Code 52211
Purpose of Expenditure Peer-to-peer texting Category/Type 004
Name of Federal Candidate: HARRISON, JAIME, Oppose
Office Sought: Senate State: SC
Calendar Year-To-Date Per Election for Office Sought 10156834.60
Disbursement For: General 2020

(a) SUBTOTAL of Itemized Independent Expenditures 34607.14
(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.

Bethea, William, L., Jr.

[Electronically Filed]

Date 12 / 03 / 2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Security Is Strength PAC
FEC IDENTIFICATION NUMBER C C00573733

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee In Field Strategies
Mailing Address 333 H Street Suite 5000
City Chula Vista State CA Zip Code 91910
Purpose of Expenditure Canvassing Category/Type 004
Date of Public Distribution/Dissemination 10/19/2020
Amount 62000.00
Transaction ID : SE.5596
Date of Disbursement or Obligation 10/16/2020
Name of Federal Candidate: HARRISON, JAIME, ,
Office Sought: Senate State: SC
Disbursement For: General 2020
Calendar Year-To-Date Per Election for Office Sought 6049449.10

Full Name of Payee In Field Strategies
Mailing Address 333 H Street Suite 5000
City Chula Vista State CA Zip Code 91910
Purpose of Expenditure Canvassing Category/Type 004
Date of Public Distribution/Dissemination 10/19/2020
Amount 62000.00
Transaction ID : SE.5597
Date of Disbursement or Obligation 10/16/2020
Name of Federal Candidate: Graham, Lindsey, O., ,
Office Sought: Senate State: SC
Disbursement For: General 2020
Calendar Year-To-Date Per Election for Office Sought 6114449.10

(a) SUBTOTAL of Itemized Independent Expenditures 124000.00
(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.

Bethea, William, L., Jr.

[Electronically Filed]

Date 12/03/2020

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

| | |
|--|--|
| NAME OF COMMITTEE (In Full) Security Is Strength PAC | FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00573733 </div> |
|--|--|

Check if 24-hour report 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y

| | |
|--|--|
| Full Name of Payee <input type="checkbox"/> Memo Item In Field Strategies | Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y 10 / 23 / 2020 |
| Mailing Address 333 H Street Suite 5000 | Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">62000.00</div> Transaction ID : SE.5753 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y 10 / 22 / 2020 |
| City State Zip Code Chula Vista CA 91910 | |
| Purpose of Expenditure Canvassing Category/Type 004 | |
| Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose HARRISON, JAIME, , , | Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: SC |
| Calendar Year-To-Date Per Election for Office Sought 8075110.20 | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ |

| | |
|--|--|
| Full Name of Payee <input type="checkbox"/> Memo Item In Field Strategies | Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y 10 / 23 / 2020 |
| Mailing Address 333 H Street Suite 5000 | Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">62000.00</div> Transaction ID : SE.5754 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y 10 / 22 / 2020 |
| City State Zip Code Chula Vista CA 91910 | |
| Purpose of Expenditure Canvassing Category/Type 004 | |
| Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Graham, Lindsey, O., , | Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: SC |
| Calendar Year-To-Date Per Election for Office Sought 8137110.20 | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ |

| | |
|---|--|
| (a) SUBTOTAL of Itemized Independent Expenditures ▶ | <div style="border: 1px solid black; padding: 2px; text-align: right;">124000.00</div> |
| (b) SUBTOTAL of Unitemized Independent Expenditures..... ▶ | <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> |
| (c) TOTAL Independent Expenditures ▶ | <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Bethea, William, L., Jr. [Electronically Filed] Date M M / D D / Y Y Y Y Y 12 / 03 / 2020

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Security Is Strength PAC
FEC IDENTIFICATION NUMBER C C00573733

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee In Field Strategies
Mailing Address 333 H Street Suite 5000
City Chula Vista State CA Zip Code 91910
Purpose of Expenditure Canvassing Category/Type 004
Date of Public Distribution/Dissemination 10/27/2020
Amount 50000.00
Transaction ID: SE.5785
Date of Disbursement or Obligation 10/26/2020

Name of Federal Candidate: HARRISON, JAIME, ,
Support Oppose
Office Sought: House Senate State: SC
Disbursement For: Primary General 2020

Full Name of Payee In Field Strategies
Mailing Address 333 H Street Suite 5000
City Chula Vista State CA Zip Code 91910
Purpose of Expenditure Canvassing Category/Type 004
Date of Public Distribution/Dissemination 10/27/2020
Amount 50000.00
Transaction ID: SE.5786
Date of Disbursement or Obligation 10/26/2020

Name of Federal Candidate: Graham, Lindsey, O., ,
Support Oppose
Office Sought: House Senate State: SC
Disbursement For: Primary General 2020

(a) SUBTOTAL of Itemized Independent Expenditures 100000.00
(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.

Bethea, William, L., Jr.

[Electronically Filed]

Date 12/03/2020

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

| | |
|--|--|
| NAME OF COMMITTEE (In Full) Security Is Strength PAC | FEC IDENTIFICATION NUMBER ▼ C C00573733 |
|--|--|

Check if 24-hour report 48-hour report New report Amends report filed on / /

| | |
|--|---|
| Full Name of Payee <input type="checkbox"/> Memo Item In Field Strategies | Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/> |
| Mailing Address 333 H Street Suite 5000 | Amount <input type="text"/> |
| City Chula Vista State CA Zip Code 91910 | Transaction ID : SE.5787 |
| Purpose of Expenditure GOTV phone calls Category/Type <input type="text"/> 004 | Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/> |
| Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose HARRISON, JAIME, , , | Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: SC |
| Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 10279334.60 | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ |

| | |
|--|---|
| Full Name of Payee <input type="checkbox"/> Memo Item In Field Strategies | Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/> |
| Mailing Address 333 H Street Suite 5000 | Amount <input type="text"/> |
| City Chula Vista State CA Zip Code 91910 | Transaction ID : SE.5788 |
| Purpose of Expenditure GOTV phone calls Category/Type <input type="text"/> 004 | Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/> |
| Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Graham, Lindsey, O., , | Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: SC |
| Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 10301834.60 | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ |

| | |
|---|-------------------------------|
| (a) SUBTOTAL of Itemized Independent Expenditures | <input type="text"/> 45000.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures..... | <input type="text"/> |
| (c) TOTAL Independent Expenditures | <input type="text"/> |

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.

Bethea, William, L., Jr.

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Date

/ /

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Security Is Strength PAC
FEC IDENTIFICATION NUMBER C C00573733

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Majority Strategies, LLC
Mailing Address PO Box 679219
City Dallas State TX Zip Code 75267-9219
Purpose of Expenditure Digital advertising (placement cost)
Category/Type 004
Date of Public Distribution/Dissemination 10/21/2020
Amount 105000.00
Transaction ID : SE.5601
Date of Disbursement or Obligation 10/20/2020

Name of Federal Candidate: HARRISON, JAIME, ,
Support Oppose
Office Sought: House Senate
District: 00 State: SC
Calendar Year-To-Date Per Election for Office Sought 6216449.10
Disbursement For: Primary General 2020 Other (specify)

Full Name of Payee Majority Strategies, LLC
Mailing Address PO Box 679219
City Dallas State TX Zip Code 75267-9219
Purpose of Expenditure Digital advertising (placemetrn cost)
Category/Type 004
Date of Public Distribution/Dissemination 10/21/2020
Amount 105000.00
Transaction ID : SE.5602
Date of Disbursement or Obligation 10/20/2020

Name of Federal Candidate: Graham, Lindsey, O., ,
Support Oppose
Office Sought: House Senate
District: 00 State: SC
Calendar Year-To-Date Per Election for Office Sought 6321449.10
Disbursement For: Primary General 2020 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 210000.00
(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.

Bethea, William, L., Jr.

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Date 12/03/2020

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Security Is Strength PAC
FEC IDENTIFICATION NUMBER C C00573733

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Majority Strategies, LLC
Mailing Address PO Box 679219
City Dallas State TX Zip Code 75267-9219
Purpose of Expenditure Digital advertising (placement cost)
Category/Type 004
Date of Public Distribution/Dissemination 10/23/2020
Amount 245000.00
Transaction ID : SE.5760
Date of Disbursement or Obligation 10/22/2020

Name of Federal Candidate: HARRISON, JAIME, ,
Support Oppose
Office Sought: House Senate
District: 00 State: SC
Calendar Year-To-Date Per Election for Office Sought 8493110.20
Disbursement For: Primary General 2020 Other (specify)

Full Name of Payee Majority Strategies, LLC
Mailing Address PO Box 679219
City Dallas State TX Zip Code 75267-9219
Purpose of Expenditure Digital advertising (placement cost)
Category/Type 004
Date of Public Distribution/Dissemination 10/23/2020
Amount 245000.00
Transaction ID : SE.5761
Date of Disbursement or Obligation 10/22/2020

Name of Federal Candidate: Graham, Lindsey, O., ,
Support Oppose
Office Sought: House Senate
District: 00 State: SC
Calendar Year-To-Date Per Election for Office Sought 8738110.20
Disbursement For: Primary General 2020 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 490000.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Bethea, William, L., Jr.

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Date 12/03/2020

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Security Is Strength PAC
FEC IDENTIFICATION NUMBER C C00573733

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Majority Strategies, LLC
Mailing Address PO Box 679219
City Dallas State TX Zip Code 75267-9219
Purpose of Expenditure Digital advertising (placement cost)
Category/Type 004
Date of Public Distribution/Dissemination 10/29/2020
Amount 25000.00
Transaction ID: SE.5818
Date of Disbursement or Obligation 10/29/2020

Name of Federal Candidate: HARRISON, JAIME, ,
Support Oppose
Office Sought: House Senate
District: 00 State: SC
Calendar Year-To-Date Per Election for Office Sought 11292334.60
Disbursement For: Primary General 2020 Other (specify)

Full Name of Payee Majority Strategies, LLC
Mailing Address PO Box 679219
City Dallas State TX Zip Code 75267-9219
Purpose of Expenditure Digital advertising (placement cost)
Category/Type 004
Date of Public Distribution/Dissemination 10/29/2020
Amount 25000.00
Transaction ID: SE.5819
Date of Disbursement or Obligation 10/29/2020

Name of Federal Candidate: Graham, Lindsey, O., ,
Support Oppose
Office Sought: House Senate
District: 00 State: SC
Calendar Year-To-Date Per Election for Office Sought 11317334.60
Disbursement For: Primary General 2020 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 50000.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Date 12/03/2020

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Security Is Strength PAC
FEC IDENTIFICATION NUMBER C C00573733

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee National Ad Placement
Mailing Address PO Box 191271
City Dallas State TX Zip Code 75219
Purpose of Expenditure Television advertising (placement cost) - see Schedule B
Category/Type 004
Date of Public Distribution/Dissemination 10/21/2020
Amount 393799.05
Transaction ID: SE.5641
Date of Disbursement or Obligation

Name of Federal Candidate: HARRISON, JAIME, ,
Support Oppose
Office Sought: House Senate
District: 00 State: SC
Calendar Year-To-Date Per Election for Office Sought 7619311.15
Disbursement For: Primary General 2020 Other (specify)

Full Name of Payee National Ad Placement
Mailing Address PO Box 191271
City Dallas State TX Zip Code 75219
Purpose of Expenditure Television advertising (placement cost) - see Schedule B
Category/Type 004
Date of Public Distribution/Dissemination 10/21/2020
Amount 393799.05
Transaction ID: SE.5642
Date of Disbursement or Obligation

Name of Federal Candidate: Graham, Lindsey, O., ,
Support Oppose
Office Sought: House Senate
District: 00 State: SC
Calendar Year-To-Date Per Election for Office Sought 8013110.20
Disbursement For: Primary General 2020 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 787598.10
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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12/03/2020

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Security Is Strength PAC
FEC IDENTIFICATION NUMBER C C00573733

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee National Ad Placement
Mailing Address PO Box 191271
City Dallas State TX Zip Code 75219
Purpose of Expenditure Television advertising (placement cost) - see Schedule B
Category/Type 004
Date of Public Distribution/Dissemination 10/24/2020
Amount 838392.30
Transaction ID : SE.5752
Date of Disbursement or Obligation

Name of Federal Candidate: HARRISON, JAIME, ,
Support Oppose
Office Sought: House Senate State: SC
Disbursement For: Primary General 2020 Other (specify)

Full Name of Payee National Ad Placement
Mailing Address PO Box 191271
City Dallas State TX Zip Code 75219
Purpose of Expenditure Television advertising (placement cost)
Category/Type 004
Date of Public Distribution/Dissemination 10/17/2020
Amount 695558.70
Transaction ID : SE.5572
Date of Disbursement or Obligation 10/16/2020

Name of Federal Candidate: Graham, Lindsey, O., ,
Support Oppose
Office Sought: House Senate State: SC
Disbursement For: Primary General 2020 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 1533951.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Security Is Strength PAC
FEC IDENTIFICATION NUMBER C C00573733

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee National Ad Placement
Mailing Address PO Box 191271
City Dallas State TX Zip Code 75219
Purpose of Expenditure Television advertising (placement cost)
Name of Federal Candidate: HARRISON, JAIME, ,
Calendar Year-To-Date Per Election for Office Sought 5952449.10

Full Name of Payee National Ad Placement
Mailing Address PO Box 191271
City Dallas State TX Zip Code 75219
Purpose of Expenditure Television advertising (production cost)
Name of Federal Candidate: Graham, Lindsey, O., ,
Calendar Year-To-Date Per Election for Office Sought 5969949.10

(a) SUBTOTAL of Itemized Independent Expenditures 713058.70
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Security Is Strength PAC
FEC IDENTIFICATION NUMBER C C00573733

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee National Ad Placement
Mailing Address PO Box 191271
City Dallas State TX Zip Code 75219
Purpose of Expenditure Television advertising (production cost)
Name of Federal Candidate: HARRISON, JAIME, , ,
Calendar Year-To-Date Per Election for Office Sought 5987449.10

Full Name of Payee National Ad Placement
Mailing Address PO Box 191271
City Dallas State TX Zip Code 75219
Purpose of Expenditure Radio advertising (placement cost)
Name of Federal Candidate: HARRISON, JAIME, , ,
Calendar Year-To-Date Per Election for Office Sought 7023262.10

(a) SUBTOTAL of Itemized Independent Expenditures 217750.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Bethea, William, L., Jr.

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Date 12 / 03 / 2020

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Security Is Strength PAC
FEC IDENTIFICATION NUMBER C C00573733

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee National Ad Placement
Mailing Address PO Box 191271
City Dallas State TX Zip Code 75219
Purpose of Expenditure Radio advertising (placement cost)
Name of Federal Candidate: Graham, Lindsey, O.,
Calendar Year-To-Date Per Election for Office Sought 7223512.10

Full Name of Payee National Ad Placement
Mailing Address PO Box 191271
City Dallas State TX Zip Code 75219
Purpose of Expenditure Radio advertising (production cost)
Name of Federal Candidate: HARRISON, JAIME, ,
Calendar Year-To-Date Per Election for Office Sought 7224512.10

(a) SUBTOTAL of Itemized Independent Expenditures 201250.00
(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.

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Date 12 / 03 / 2020

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Security Is Strength PAC
FEC IDENTIFICATION NUMBER C C00573733

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee National Ad Placement Memo Item

Date of Public Distribution/Dissemination 10 / 21 / 2020

Mailing Address PO Box 191271

Amount 1000.00

City Dallas State TX Zip Code 75219

Transaction ID : SE.5620

Purpose of Expenditure Radio advertising (production cost) Category/Type 004

Date of Disbursement or Obligation 10 / 20 / 2020

Name of Federal Candidate: Graham, Lindsey, O., Support Oppose

Office Sought: House Senate District: 00 State: SC

Calendar Year-To-Date Per Election for Office Sought 7225512.10

Disbursement For: Primary General 2020 Other (specify)

Full Name of Payee National Ad Placement Memo Item

Date of Public Distribution/Dissemination 10 / 24 / 2020

Mailing Address PO Box 191271

Amount 40500.00

City Dallas State TX Zip Code 75219

Transaction ID : SE.5755

Purpose of Expenditure Television advertising (placement cost) Category/Type 004

Date of Disbursement or Obligation 10 / 22 / 2020

Name of Federal Candidate: HARRISON, JAIME, , Support Oppose

Office Sought: House Senate District: 00 State: SC

Calendar Year-To-Date Per Election for Office Sought 8177610.20

Disbursement For: Primary General 2020 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 41500.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Bethea, William, L., Jr. [Electronically Filed] Date 12 / 03 / 2020

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Security Is Strength PAC
FEC IDENTIFICATION NUMBER C C00573733

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee National Ad Placement
Mailing Address PO Box 191271
City Dallas State TX Zip Code 75219
Purpose of Expenditure Television advertising (placement cost)
Category/Type 004
Name of Federal Candidate: Graham, Lindsey, O., Support
Office Sought: Senate State: SC
Calendar Year-To-Date Per Election for Office Sought 8218110.20
Disbursement For: General 2020

Full Name of Payee National Ad Placement
Mailing Address PO Box 191271
City Dallas State TX Zip Code 75219
Purpose of Expenditure Television advertising (placement cost)
Category/Type 004
Name of Federal Candidate: HARRISON, JAIME, Oppose
Office Sought: Senate State: SC
Calendar Year-To-Date Per Election for Office Sought 10355834.60
Disbursement For: General 2020

(a) SUBTOTAL of Itemized Independent Expenditures 94500.00
(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.

Bethea, William, L., Jr. [Electronically Filed] Date 12 / 03 / 2020
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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Security Is Strength PAC
FEC IDENTIFICATION NUMBER C C00573733

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee National Ad Placement
Mailing Address PO Box 191271
City Dallas State TX Zip Code 75219
Purpose of Expenditure Television advertising (placement cost)
Category/Type 004
Date of Public Distribution/Dissemination 10/27/2020
Amount 54000.00
Transaction ID : SE.5796
Date of Disbursement or Obligation 10/27/2020

Name of Federal Candidate: Graham, Lindsey, O.,
Support Oppose
Office Sought: House Senate
District: 00 State: SC
Calendar Year-To-Date Per Election for Office Sought 10409834.60
Disbursement For: Primary General 2020 Other (specify)

Full Name of Payee National Ad Placement
Mailing Address PO Box 191271
City Dallas State TX Zip Code 75219
Purpose of Expenditure Television advertising (placement cost)
Category/Type 004
Date of Public Distribution/Dissemination 10/28/2020
Amount 135000.00
Transaction ID : SE.5797
Date of Disbursement or Obligation 10/27/2020

Name of Federal Candidate: HARRISON, JAIME,
Support Oppose
Office Sought: House Senate
District: 00 State: SC
Calendar Year-To-Date Per Election for Office Sought 10544834.60
Disbursement For: Primary General 2020 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 189000.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Bethea, William, L., Jr.

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Date 12/03/2020

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Security Is Strength PAC
FEC IDENTIFICATION NUMBER C C00573733

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee National Ad Placement
Mailing Address PO Box 191271
City Dallas State TX Zip Code 75219
Purpose of Expenditure Television advertising (placement cost)
Category/Type 004
Date of Public Distribution/Dissemination 10/28/2020
Amount 135000.00
Transaction ID : SE.5799
Date of Disbursement or Obligation 10/27/2020

Name of Federal Candidate: Graham, Lindsey, O.,
Support Oppose
Office Sought: House Senate
District: 00 State: SC
Calendar Year-To-Date Per Election for Office Sought 10679834.60
Disbursement For: Primary General 2020 Other (specify)

Full Name of Payee National Ad Placement
Mailing Address PO Box 191271
City Dallas State TX Zip Code 75219
Purpose of Expenditure Television advertising (production cost)
Category/Type 004
Date of Public Distribution/Dissemination 10/27/2020
Amount 6500.00
Transaction ID : SE.5800
Date of Disbursement or Obligation 10/27/2020

Name of Federal Candidate: HARRISON, JAIME,
Support Oppose
Office Sought: House Senate
District: 00 State: SC
Calendar Year-To-Date Per Election for Office Sought 10686334.60
Disbursement For: Primary General 2020 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 141500.00
(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.

Bethea, William, L., Jr.

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Date

12/03/2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Security Is Strength PAC
FEC IDENTIFICATION NUMBER C C00573733

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee National Ad Placement
Mailing Address PO Box 191271
City Dallas State TX Zip Code 75219
Purpose of Expenditure Television advertising (production cost)
Category/Type 004
Date of Public Distribution/Dissemination 10/27/2020
Amount 6500.00
Transaction ID : SE.5801
Date of Disbursement or Obligation 10/27/2020

Name of Federal Candidate: Graham, Lindsey, O.,
Support Oppose
Office Sought: House Senate
District: 00 State: SC
Calendar Year-To-Date Per Election for Office Sought 10692834.60
Disbursement For: Primary General 2020 Other (specify)

Full Name of Payee National Ad Placement
Mailing Address PO Box 191271
City Dallas State TX Zip Code 75219
Purpose of Expenditure Television advertising (placement cost)
Category/Type 004
Date of Public Distribution/Dissemination 10/29/2020
Amount 249750.00
Transaction ID : SE.5809
Date of Disbursement or Obligation 10/28/2020

Name of Federal Candidate: HARRISON, JAIME,
Support Oppose
Office Sought: House Senate
District: 00 State: SC
Calendar Year-To-Date Per Election for Office Sought 10942584.60
Disbursement For: Primary General 2020 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 256250.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Security Is Strength PAC
FEC IDENTIFICATION NUMBER C C00573733

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee National Ad Placement
Mailing Address PO Box 191271
City Dallas State TX Zip Code 75219
Purpose of Expenditure Television advertising (placement cost)
Category/Type 004
Date of Public Distribution/Dissemination 10/29/2020
Amount 249750.00
Transaction ID : SE.5810
Date of Disbursement or Obligation 10/28/2020

Name of Federal Candidate: Graham, Lindsey, O.,
Support Oppose
Office Sought: House Senate
District: 00 State: SC
Calendar Year-To-Date Per Election for Office Sought 11192334.60
Disbursement For: Primary General 2020 Other (specify)

Full Name of Payee National Ad Placement
Mailing Address PO Box 191271
City Dallas State TX Zip Code 75219
Purpose of Expenditure Television advertising (placement cost)
Category/Type 004
Date of Public Distribution/Dissemination 10/30/2020
Amount 430200.00
Transaction ID : SE.5823
Date of Disbursement or Obligation 10/29/2020

Name of Federal Candidate: HARRISON, JAIME,
Support Oppose
Office Sought: House Senate
District: 00 State: SC
Calendar Year-To-Date Per Election for Office Sought 11747534.60
Disbursement For: Primary General 2020 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 679950.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Security Is Strength PAC
FEC IDENTIFICATION NUMBER C C00573733

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee National Ad Placement
Mailing Address PO Box 191271
City Dallas State TX Zip Code 75219
Purpose of Expenditure Television advertising (placement cost)
Name of Federal Candidate: Graham, Lindsey, O., Support
Disbursement For: General 2020

Full Name of Payee National Ad Placement
Mailing Address PO Box 191271
City Dallas State TX Zip Code 75219
Purpose of Expenditure Radio advertising (placement cost)
Name of Federal Candidate: HARRISON, JAIME, Oppose
Disbursement For: General 2020

(a) SUBTOTAL of Itemized Independent Expenditures 475200.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Bethea, William, L., Jr.

[Electronically Filed]

Date

12 / 03 / 2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Security Is Strength PAC
FEC IDENTIFICATION NUMBER C C00573733

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee National Ad Placement
Mailing Address PO Box 191271
City Dallas State TX Zip Code 75219
Purpose of Expenditure Radio advertising (placement cost)
Category/Type 004
Name of Federal Candidate: Graham, Lindsey, O., Support
Office Sought: Senate State: SC
Calendar Year-To-Date Per Election for Office Sought 12267734.60
Disbursement For: General 2020

Full Name of Payee National Ad Placement
Mailing Address PO Box 191271
City Dallas State TX Zip Code 75219
Purpose of Expenditure Radio advertising (placement cost)
Category/Type 004
Name of Federal Candidate: HARRISON, JAIME, Oppose
Office Sought: Senate State: SC
Calendar Year-To-Date Per Election for Office Sought 12312734.60
Disbursement For: General 2020

(a) SUBTOTAL of Itemized Independent Expenditures 90000.00
(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.

Bethea, William, L., Jr.

[Electronically Filed]

Date 12 / 03 / 2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Security Is Strength PAC
FEC IDENTIFICATION NUMBER C C00573733

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee National Ad Placement
Mailing Address PO Box 191271
City Dallas State TX Zip Code 75219
Purpose of Expenditure Radio advertising (placement cost)
Name of Federal Candidate: Graham, Lindsey, O.,
Calendar Year-To-Date Per Election for Office Sought 12357734.60

Full Name of Payee National Ad Placement
Mailing Address PO Box 191271
City Dallas State TX Zip Code 75219
Purpose of Expenditure Television advertising (placement cost)
Name of Federal Candidate: HARRISON, JAIME, ,
Calendar Year-To-Date Per Election for Office Sought 12458984.60

(a) SUBTOTAL of Itemized Independent Expenditures 146250.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Security Is Strength PAC
FEC IDENTIFICATION NUMBER C C00573733

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee National Ad Placement
Mailing Address PO Box 191271
City Dallas State TX Zip Code 75219
Purpose of Expenditure Television advertising (placement cost)
Category/Type 004
Date of Public Distribution/Dissemination 10/31/2020
Amount 101250.00
Transaction ID : SE.5834
Date of Disbursement or Obligation 10/30/2020

Name of Federal Candidate: Graham, Lindsey, O.,
Support Oppose
Office Sought: House Senate
District: 00 State: SC
Calendar Year-To-Date Per Election for Office Sought 12560234.60
Disbursement For: Primary General 2020 Other (specify)

Full Name of Payee National Ad Placement
Mailing Address PO Box 191271
City Dallas State TX Zip Code 75219
Purpose of Expenditure Television advertising (placement cost)
Category/Type 004
Date of Public Distribution/Dissemination 10/31/2020
Amount 167575.00
Transaction ID : SE.5839
Date of Disbursement or Obligation 10/30/2020

Name of Federal Candidate: HARRISON, JAIME,
Support Oppose
Office Sought: House Senate
District: 00 State: SC
Calendar Year-To-Date Per Election for Office Sought 12727809.60
Disbursement For: Primary General 2020 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 268825.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Security Is Strength PAC
FEC IDENTIFICATION NUMBER C C00573733

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee National Ad Placement
Mailing Address PO Box 191271
City Dallas State TX Zip Code 75219
Purpose of Expenditure Television advertising (placement cost)
Name of Federal Candidate: Graham, Lindsey, O.,
Calendar Year-To-Date Per Election for Office Sought 12895384.60

Full Name of Payee Starboard Communications Agency
Mailing Address 1043 Barr Road
City Lexington State SC Zip Code 29072
Purpose of Expenditure Direct mail (printing and postage)
Name of Federal Candidate: HARRISON, JAIME,
Calendar Year-To-Date Per Election for Office Sought 6557798.10

(a) SUBTOTAL of Itemized Independent Expenditures 403924.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Security Is Strength PAC
FEC IDENTIFICATION NUMBER C C00573733

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Starboard Communications Agency
Mailing Address 1043 Barr Road
City Lexington State SC Zip Code 29072
Purpose of Expenditure Direct mail (printing and postage)
Name of Federal Candidate: HARRISON, JAIME, ,
Calendar Year-To-Date Per Election for Office Sought 6667377.60

Full Name of Payee Starboard Communications Agency
Mailing Address 1043 Barr Road
City Lexington State SC Zip Code 29072
Purpose of Expenditure Direct mail (printing and postage)
Name of Federal Candidate: Graham, Lindsey, O., ,
Calendar Year-To-Date Per Election for Office Sought 6776957.10

(a) SUBTOTAL of Itemized Independent Expenditures 219159.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Security Is Strength PAC
FEC IDENTIFICATION NUMBER C C00573733

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Starboard Communications Agency
Mailing Address 1043 Barr Road
City Lexington State SC Zip Code 29072
Purpose of Expenditure Direct mail (printing and postage)
Category/Type 004
Date of Public Distribution/Dissemination 10/22/2020
Amount 23027.50
Transaction ID : SE.5606
Date of Disbursement or Obligation 10/20/2020

Name of Federal Candidate: HARRISON, JAIME, ,
Support Oppose
Office Sought: House Senate State: SC
Disbursement For: Primary General 2020 Other (specify)

Full Name of Payee Starboard Communications Agency
Mailing Address 1043 Barr Road
City Lexington State SC Zip Code 29072
Purpose of Expenditure Direct mail (printing and postage)
Category/Type 004
Date of Public Distribution/Dissemination 10/22/2020
Amount 23027.50
Transaction ID : SE.5607
Date of Disbursement or Obligation 10/20/2020

Name of Federal Candidate: Graham, Lindsey, O., ,
Support Oppose
Office Sought: House Senate State: SC
Disbursement For: Primary General 2020 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 46055.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Security Is Strength PAC
FEC IDENTIFICATION NUMBER C C00573733

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Starboard Communications Agency
Mailing Address 1043 Barr Road
City Lexington State SC Zip Code 29072
Purpose of Expenditure Direct mail (printing and postage)
Category/Type 004
Date of Public Distribution/Dissemination 10/22/2020
Amount 69165.00
Transaction ID: SE.5763
Date of Disbursement or Obligation 10/22/2020

Name of Federal Candidate: HARRISON, JAIME, ,
Support Oppose
Office Sought: House Senate State: SC
Disbursement For: Primary General 2020 Other (specify)

Full Name of Payee Starboard Communications Agency
Mailing Address 1043 Barr Road
City Lexington State SC Zip Code 29072
Purpose of Expenditure Direct mail (printing and postage)
Category/Type 004
Date of Public Distribution/Dissemination 10/22/2020
Amount 69165.00
Transaction ID: SE.5764
Date of Disbursement or Obligation 10/22/2020

Name of Federal Candidate: Graham, Lindsey, O., ,
Support Oppose
Office Sought: House Senate State: SC
Disbursement For: Primary General 2020 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 138330.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Security Is Strength PAC
FEC IDENTIFICATION NUMBER C C00573733

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Starboard Communications Agency
Mailing Address 1043 Barr Road
City Lexington State SC Zip Code 29072
Purpose of Expenditure Direct mail (printing and postage)
Category/Type 004
Date of Public Distribution/Dissemination 10/23/2020
Amount 139870.00
Transaction ID: SE.5765
Date of Disbursement or Obligation 10/22/2020

Name of Federal Candidate: HARRISON, JAIME, ,
Support Oppose
Office Sought: House Senate
District: 00 State: SC
Calendar Year-To-Date Per Election for Office Sought 9016310.20
Disbursement For: Primary General 2020 Other (specify)

Full Name of Payee Starboard Communications Agency
Mailing Address 1043 Barr Road
City Lexington State SC Zip Code 29072
Purpose of Expenditure Direct mail (printing and postage)
Category/Type 004
Date of Public Distribution/Dissemination 10/26/2020
Amount 139870.00
Transaction ID: SE.5766
Date of Disbursement or Obligation 10/22/2020

Name of Federal Candidate: HARRISON, JAIME, ,
Support Oppose
Office Sought: House Senate
District: 00 State: SC
Calendar Year-To-Date Per Election for Office Sought 9156180.20
Disbursement For: Primary General 2020 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 279740.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Security Is Strength PAC
FEC IDENTIFICATION NUMBER C C00573733

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Starboard Communications Agency
Mailing Address 1043 Barr Road
City Lexington State SC Zip Code 29072
Purpose of Expenditure Direct mail (printing and postage)
Category/Type 004
Date of Public Distribution/Dissemination 10/27/2020
Amount 139870.00
Transaction ID: SE.5767
Date of Disbursement or Obligation 10/22/2020

Name of Federal Candidate: HARRISON, JAIME, ,
Support Oppose
Office Sought: House Senate
District: 00 State: SC
Calendar Year-To-Date Per Election for Office Sought 9296050.20
Disbursement For: Primary General 2020 Other (specify)

Full Name of Payee Starboard Communications Agency
Mailing Address 1043 Barr Road
City Lexington State SC Zip Code 29072
Purpose of Expenditure Palm cards
Category/Type 004
Date of Public Distribution/Dissemination 11/01/2020
Amount 7280.83
Transaction ID: SE.5854
Date of Disbursement or Obligation 11/02/2020

Name of Federal Candidate: HARRISON, JAIME, ,
Support Oppose
Office Sought: House Senate
District: 00 State: SC
Calendar Year-To-Date Per Election for Office Sought 12902665.43
Disbursement For: Primary General 2020 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 147150.83
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures 8385521.61

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Date 12/03/2020

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