

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

AMERICA FIRST ACTION, INC.

ADDRESS (number and street)

1400 Crystal Drive

Suite 850

Check if different
than previously
reported. (ACC)

Arlington

VA

22202

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00637512

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

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

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

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

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

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

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

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

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

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

in the
State of

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

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

General (30G)



Runoff (30R)



Special (30S)

Election on

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

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

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

in the
State of

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

5. Covering Period

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

through

M M M / D D D / Y Y Y Y Y Y
06 30 2019M M M / D D D / Y Y Y Y Y Y
06 30 2019M M M / D D D / Y Y Y Y Y Y
06 30 2019

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

PROCH, JON, , ,

Type or Print Name of Treasurer

Signature of Treasurer

PROCH, JON, , ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
07 31 2019M M M / D D D / Y Y Y Y Y Y
07 31 2019M M M / D D D / Y Y Y Y Y Y
07 31 2019

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

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

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

AMERICA FIRST ACTION, INC.

Report Covering the Period:

From:

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

To:

M M	/	D D	/	Y Y Y Y Y
06		30		2019

	COLUMN A This Period	COLUMN B Calendar Year-to-Date															
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="5">2019</td></tr></table>	Y	Y	Y	Y	Y	2019						<table><tr><td colspan="5">2562848.01</td></tr></table>	2562848.01				
Y	Y	Y	Y	Y													
2019																	
2562848.01																	
(b) Cash on Hand at Beginning of Reporting Period.....	<table><tr><td colspan="5">2562848.01</td></tr></table>	2562848.01															
2562848.01																	
(c) Total Receipts (from Line 19)	<table><tr><td colspan="5">8919834.07</td></tr></table>	8919834.07					<table><tr><td colspan="5">8919834.07</td></tr></table>	8919834.07									
8919834.07																	
8919834.07																	
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table><tr><td colspan="5">11482682.08</td></tr></table>	11482682.08					<table><tr><td colspan="5">11482682.08</td></tr></table>	11482682.08									
11482682.08																	
11482682.08																	
7. Total Disbursements (from Line 31).....	<table><tr><td colspan="5">993827.91</td></tr></table>	993827.91					<table><tr><td colspan="5">993827.91</td></tr></table>	993827.91									
993827.91																	
993827.91																	
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table><tr><td colspan="5">10488854.17</td></tr></table>	10488854.17					<table><tr><td colspan="5">10488854.17</td></tr></table>	10488854.17									
10488854.17																	
10488854.17																	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	



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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

AMERICA FIRST ACTION, INC.

Report Covering the Period:

From:

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

To:

M M	/	D D	/	Y Y Y Y
06	/	30	/	2019

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

8554320.98

8554320.98

(ii) Unitemized

338690.33

338690.33

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

8893011.31

8893011.31

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

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

Totals to Line 33, page 5).....▶

8893011.31

8893011.31

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).....

2827.11

2827.11

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

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

23995.65

23995.65

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)).....▶

8919834.07

8919834.07

20. Total Federal Receipts

(subtract Line 18(c) from Line 19).....▶

8919834.07

8919834.07

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	991187.91	991187.91
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	991187.91	991187.91
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	2640.00	2640.00
(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)).....	2640.00	2640.00
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)) ..	993827.91	993827.91
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	993827.91	993827.91

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	8893011.31	8893011.31
34. Total Contribution Refunds (from Line 28(d))	2640.00	2640.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	8890371.31	8890371.31
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	991187.91	991187.91
37. Offsets to Operating Expenditures (from Line 15, page 3).....	2827.11	2827.11
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	988360.80	988360.80

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 350

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. ALBERTSEN, ANDERS, , ,

Mailing Address 1066 GRANT ST

City
ENGLEWOODState
FLZip Code
34224FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		27		2019

Transaction ID : SA11AI.48863

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. ALBRITTON, KAREN, , ,

Mailing Address PO BOX 211143

City
BEDFORDState
TXZip Code
76095FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MORNINGSTAR PARTNERSOccupation (for Individual)
DIVISION ORDER ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2019

Transaction ID : SA11AI.53409

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. ALLDRIN, KENFIELD, , ,

Mailing Address 16913 SCHELL RD

City
OAKDALEState
CAZip Code
95361FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		17		2019

Transaction ID : SA11AI.66336

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

1000.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 7 OF 350
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. ALLEN, BLAIR, , ,

Mailing Address 2601 COLLEGE PKWY

City
CARSON CITYState
NVZip Code
89706FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COMSTOCK VILLAGEOccupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		28		2019

Transaction ID : SA11AI.59846

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. ALLEN, BLAIR, , ,

Mailing Address 2601 COLLEGE PKWY

City
CARSON CITYState
NVZip Code
89706FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COMSTOCK VILLAGEOccupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : SA11AI.52752

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. ALLEN, BLAIR, , ,

Mailing Address 2601 COLLEGE PKWY

City
CARSON CITYState
NVZip Code
89706FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COMSTOCK VILLAGEOccupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2019

Transaction ID : SA11AI.51194

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

750.00

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

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

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

FOR LINE NUMBER: PAGE 8 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. ALLEN, BLAIR, , ,

Mailing Address 2601 COLLEGE PKWY

City
CARSON CITY

State
NV

Zip Code
89706

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COMSTOCK VILLAGE

Occupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 28 / 2019

Transaction ID : SA11AI.48796

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. ALLEN, BLAIR, , ,

Mailing Address 2601 COLLEGE PKWY

City
CARSON CITY

State
NV

Zip Code
89706

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COMSTOCK VILLAGE

Occupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 28 / 2019

Transaction ID : SA11AI.47650

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. ALLEN, BLAIR, , ,

Mailing Address 2601 COLLEGE PKWY

City
CARSON CITY

State
NV

Zip Code
89706

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COMSTOCK VILLAGE

Occupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 28 / 2019

Transaction ID : SA11AI.45298

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

750.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 9 OF 350
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. AMERICA FIRST POLICIES, INC.Mailing Address 1400 CRYSTAL DRIVE
SUITE 850City
ARLINGTONState
VAZip Code
22202FEC 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 ▼

195626.00

Date of Receipt

M M	D D	Y Y Y Y
06	30	2019

Transaction ID : SA11AI.71471

Amount of Each Receipt this Period

195626.00

☐ Memo Item

IN-KIND: PAYROLL / OFFICE EXPENSES

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

B. ANWAR, JAVAID, S, ,Mailing Address 110 N. MARIENFELD
SUITE 101City
MIDLANDState
TXZip Code
79701FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MIDLAND ENERGY, INC.Occupation (for Individual)
PRESIDENT & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750000.00

Date of Receipt

M M	D D	Y Y Y Y
03	13	2019

Transaction ID : SA11AI.52140

Amount of Each Receipt this Period

750000.00

☐ Memo Item

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

C. BALCH, DIANE, , ,

Mailing Address 10906 LAKE WINDERMERE DR

City
GREAT FALLSState
VAZip Code
22066FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M	D D	Y Y Y Y
05	01	2019

Transaction ID : SA11AI.48603

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

945676.00

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 10 OF 350

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. BALCH, DIANE, , ,

Mailing Address 10906 LAKE WINDERMERE DR

City
GREAT FALLS

State
VA

Zip Code
22066

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 01 / 2019

Transaction ID : SA11AI.47411

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. BALLARD, DANIEL, , ,

Mailing Address 266 DANISH DRIVE

City
HUTTO

State
TX

Zip Code
78634

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 04 / 2019

Transaction ID : SA11AI.52760

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. BALLARD, DANIEL, , ,

Mailing Address 266 DANISH DRIVE

City
HUTTO

State
TX

Zip Code
78634

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

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

Transaction ID : SA11AI.50245

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

250.00

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 350
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. BALLARD, DANIEL, , ,			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>05 / 04 / 2019</div> </div>	
Mailing Address 266 DANISH DRIVE			Transaction ID : SA11AI.48434	
City HUTTO	State TX	Zip Code 78634	Amount of Each Receipt this Period <div> <div></div> <div>100.00</div> </div>	
FEC ID number of contributing federal political committee. <div> <div>C</div> <div></div> </div>			<input type="checkbox"/> Memo Item	
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div></div> <div>500.00</div> </div>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. BALLARD, DANIEL, , ,			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>06 / 04 / 2019</div> </div>	
Mailing Address 266 DANISH DRIVE			Transaction ID : SA11AI.47355	
City HUTTO	State TX	Zip Code 78634	Amount of Each Receipt this Period <div> <div></div> <div>100.00</div> </div>	
FEC ID number of contributing federal political committee. <div> <div>C</div> <div></div> </div>			<input type="checkbox"/> Memo Item	
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div></div> <div>600.00</div> </div>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. BARCO, SHARON, , ,			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>03 / 30 / 2019</div> </div>	
Mailing Address 23 GOLFVIEW PL			Transaction ID : SA11AI.50769	
City ROTONDA WEST	State FL	Zip Code 33947	Amount of Each Receipt this Period <div> <div></div> <div>75.00</div> </div>	
FEC ID number of contributing federal political committee. <div> <div>C</div> <div></div> </div>			<input type="checkbox"/> Memo Item	
Name of Employer (for Individual) BARCOS ACCOUNTING & TAX		Occupation (for Individual) ACCOUNTANT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ <div> <div></div> <div>225.00</div> </div>		

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

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

275.00

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 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. BARCO, SHARON, , ,

Mailing Address 23 GOLFVIEW PL

City
ROTONDA WEST

State
FL

Zip Code
33947

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BARCOS ACCOUNTING & TAX

Occupation (for Individual)
ACCOUNTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2019

Transaction ID : SA11AI.48701

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

B. BARCO, SHARON, , ,

Mailing Address 23 GOLFVIEW PL

City
ROTONDA WEST

State
FL

Zip Code
33947

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BARCOS ACCOUNTING & TAX

Occupation (for Individual)
ACCOUNTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 30 / 2019

Transaction ID : SA11AI.47561

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

C. BARCO, SHARON, , ,

Mailing Address 23 GOLFVIEW PL

City
ROTONDA WEST

State
FL

Zip Code
33947

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BARCOS ACCOUNTING & TAX

Occupation (for Individual)
ACCOUNTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : SA11AI.45211

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

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

225.00

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

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

FOR LINE NUMBER: PAGE 13 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. BATTEN, JAMES, , ,

Mailing Address 1302 KERMIT DRIVE

City
STATESBORO

State
GA

Zip Code
30458

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 05 / 2019

Transaction ID : SA11AI.52725

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

B. BATTEN, JAMES, , ,

Mailing Address 1302 KERMIT DRIVE

City
STATESBORO

State
GA

Zip Code
30458

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 05 / 2019

Transaction ID : SA11AI.50162

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

C. BATTEN, JAMES, , ,

Mailing Address 1302 KERMIT DRIVE

City
STATESBORO

State
GA

Zip Code
30458

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

375.00

Date of Receipt

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

Transaction ID : SA11AI.48473

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

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

225.00

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 350
(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. BATTEN, JAMES, , ,

Mailing Address 1302 KERMIT DRIVE

City
STATESBORO

State
GA

Zip Code
30458

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 05 / 2019

Transaction ID : SA11AI.47350

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

B. BEALS, CAMERON, , ,

Mailing Address 370 LAURELEAF DR

City
PRESCOTT

State
AZ

Zip Code
86303

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 18 / 2019

Transaction ID : SA11AI.51789

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. BEALS, CAMERON, , ,

Mailing Address 370 LAURELEAF DR

City
PRESCOTT

State
AZ

Zip Code
86303

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

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

Transaction ID : SA11AI.49583

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

150.00

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 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. BEALS, CAMERON, , ,

Mailing Address 370 LAURELEAF DR

City
PRESCOTTState
AZZip Code
86303FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 18 / 2019

Transaction ID : SA11AI.49219

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. BEALS, CAMERON, , ,

Mailing Address 370 LAURELEAF DR

City
PRESCOTTState
AZZip Code
86303FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

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

Transaction ID : SA11AI.48236

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. BEALS, CAMERON, , ,

Mailing Address 370 LAURELEAF DR

City
PRESCOTTState
AZZip Code
86303FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 18 / 2019

Transaction ID : SA11AI.47942

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

100.00

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

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

FOR LINE NUMBER: PAGE 16 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. BEALS, CAMERON, , ,

Mailing Address 370 LAURELEAF DR

City
PRESCOTTState
AZZip Code
86303FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

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

Transaction ID : SA11AI.47178

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. BEALS, CAMERON, , ,

Mailing Address 370 LAURELEAF DR

City
PRESCOTTState
AZZip Code
86303FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 18 / 2019

Transaction ID : SA11AI.46146

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. BECKER, ROBERT, , ,

Mailing Address 1039 ANNA COVES BLVD

City
LAKE ANNAState
VAZip Code
23117FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 08 / 2019

Transaction ID : SA11AI.48359

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

125.00

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

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

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

FOR LINE NUMBER: PAGE 17 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. BERTRAM, STEVEN, , ,

Mailing Address 208 MAGNOLIA GLEN

City
CENTERVILLE

State
GA

Zip Code
31028

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AAA SUPPLY INC.

Occupation (for Individual)
POOL BUILDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 18 / 2019

Transaction ID : SA11AI.47978

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. BERTRAM, STEVEN, , ,

Mailing Address 208 MAGNOLIA GLEN

City
CENTERVILLE

State
GA

Zip Code
31028

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AAA SUPPLY INC.

Occupation (for Individual)
POOL BUILDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 18 / 2019

Transaction ID : SA11AI.46408

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. BERTUZZI, MICHAEL, , ,

Mailing Address 106 LEDGE SPRG RD

City
BOERNE

State
TX

Zip Code
78006

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MERRILL LYNCH

Occupation (for Individual)
FINANCIAL CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 18 / 2019

Transaction ID : SA11AI.46205

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

350.00

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

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

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

FOR LINE NUMBER: PAGE 18 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. **BISSON, JIM, , ,**

Mailing Address 431 EDINBURGH ST

City
SAN FRANCISCO

State
CA

Zip Code
94112-2819

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
JLL

Occupation (for Individual)
PROGRAM MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 22 / 2019

Transaction ID : SA11AI.51511

Amount of Each Receipt this Period

150.00

☐ Memo Item

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

B. **BONNET, JOHN, , ,**

Mailing Address 11300 NORTH CENTRAL EXPWY #100

City
DALLAS

State
TX

Zip Code
75243

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EMS

Occupation (for Individual)
INSURANCE SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID : SA11AI.48303

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. **BONNET, JOHN, , ,**

Mailing Address 11300 NORTH CENTRAL EXPWY #100

City
DALLAS

State
TX

Zip Code
75243

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EMS

Occupation (for Individual)
INSURANCE SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 25 / 2019

Transaction ID : SA11AI.47670

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

200.00

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

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

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

FOR LINE NUMBER: PAGE 19 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. BONNET, JOHN, , ,

Mailing Address 11300 NORTH CENTRAL EXPWY #100

City
DALLASState
TXZip Code
75243FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EMSOccupation (for Individual)
INSURANCE SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

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

Transaction ID : SA11AI.47228

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. BONNET, JOHN, , ,

Mailing Address 11300 NORTH CENTRAL EXPWY #100

City
DALLASState
TXZip Code
75243FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EMSOccupation (for Individual)
INSURANCE SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 25 / 2019

Transaction ID : SA11AI.45361

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. BOWERS, GUY, , ,

Mailing Address 8635 W. SAHARA AVENUE

City
LAS VEGASState
NVZip Code
89117FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 08 / 2019

Transaction ID : SA11AI.52450

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

100.00

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

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

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

FOR LINE NUMBER: PAGE 20 OF 350

(check only one)

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

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

NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. BOWERS, GUY, , ,

Mailing Address 8635 W. SAHARA AVENUE

City
LAS VEGAS

State
NV

Zip Code
89117

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

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

Transaction ID : SA11AI.52168

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. BREWER, JEAN, , ,

Mailing Address 3101 OLD PECOS TRAIL # 320

City
SANTA FE

State
NM

Zip Code
87505

FEC ID number of contributing
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 / D D / Y Y Y Y Y Y
01 / 24 / 2019

Transaction ID : SA11AI.60968

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

C. BRUNO, PETE, , ,

Mailing Address 643 SPROUL RD

City
VILLANOVA

State
PA

Zip Code
19085

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
THREE B TRANSPORTATION

Occupation (for Individual)
CEO OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 15 / 2019

Transaction ID : SA11AI.46818

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

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

2100.00

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 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. BRUNO, PETE, , ,

Mailing Address 643 SPROUL RD

City
VILLANOVA

State
PA

Zip Code
19085

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
THREE B TRANSPORTATION

Occupation (for Individual)
CEO OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1008.99

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 15 / 2019

Transaction ID : SA11AI.46819

Amount of Each Receipt this Period

8.99

☐ Memo Item

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

B. BUCHWALD WRIGHT, KAREN, , ,

Mailing Address PO BOX 243

City
MOUNT VERNON

State
OH

Zip Code
43050

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ARIEL CORPORATION

Occupation (for Individual)
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

125000.00

Date of Receipt

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

Transaction ID : SA11AI.70360

Amount of Each Receipt this Period

125000.00

☐ Memo Item

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

C. BUNTING, DAVID, , ,

Mailing Address 114 MOUNTAIN VIEW DRIVE

City
PACKWOOD

State
WA

Zip Code
98361

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
NEWSPAPER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 23 / 2019

Transaction ID : SA11AI.45384

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

125258.99

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 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. BURANDT, MARGARET, , ,

Mailing Address 6335 SUNBRIAR DRIVE

City
CUMMING

State
GA

Zip Code
30040

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 18 / 2019

Transaction ID : SA11AI.51845

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. BURANDT, MARGARET, , ,

Mailing Address 6335 SUNBRIAR DRIVE

City
CUMMING

State
GA

Zip Code
30040

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 18 / 2019

Transaction ID : SA11AI.49238

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. BURANDT, MARGARET, , ,

Mailing Address 6335 SUNBRIAR DRIVE

City
CUMMING

State
GA

Zip Code
30040

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 18 / 2019

Transaction ID : SA11AI.47979

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

150.00

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

PAGE 23 OF 350

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. BURANDT, MARGARET, , ,

Mailing Address 6335 SUNBRIAR DRIVE

City
CUMMINGState
GAZip Code
30040FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M	D D	Y Y Y Y
06	18	2019

Transaction ID : SA11AI.46425

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. BURGESS, JOHN, , , JR.

Mailing Address 21805 TEGLEY

City
MISSION VIEJOState
CAZip Code
92692FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
THE BURGESS ENGINEERING GROUPOccupation (for Individual)
CONSULTING ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M	D D	Y Y Y Y
06	16	2019

Transaction ID : SA11AI.46588

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. BURTONSELF, MARY, , ,

Mailing Address 4624 WARRIOR JASPER RD

City
DORAState
ALZip Code
35062FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STATE OF ALABAMAOccupation (for Individual)
OFFICE MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M	D D	Y Y Y Y
02	06	2019

Transaction ID : SA11AI.58714

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

350.00

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 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. BUSHMAN, ROSS, , ,

Mailing Address 11545 TAYLOR MAY RD

City

CHAGRIN FALLS

State

OH

Zip Code

44023

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SUMMIT STEEL CORP

Occupation (for Individual)

PRESIDENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 18 / 2019

Transaction ID : SA11AI.46304

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. BUTCHER, JAMES, , ,

Mailing Address 1216 DARLINGTON DR

City

WINCHESTER

State

VA

Zip Code

22603

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

CLEANWATER

Occupation (for Individual)

MGR

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 06 / 2019

Transaction ID : SA11AI.58785

Amount of Each Receipt this Period

45.00

☐ Memo Item

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

C. BUTCHER, JAMES, , ,

Mailing Address 1216 DARLINGTON DR

City

WINCHESTER

State

VA

Zip Code

22603

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

CLEANWATER

Occupation (for Individual)

MGR

Receipt For:

☐ Primary
☐ Other (specify)

General

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 30 / 2019

Transaction ID : SA11AI.47581

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

395.00

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 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. BYRD, BARNEY, D., ,

Mailing Address 391 KINNIE RD.

City
FRANKLIN

State
TN

Zip Code
37069

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GENCAP AMERICA

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

175000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 28 / 2019

Transaction ID : SA11AI.45334

Amount of Each Receipt this Period

175000.00

☐ Memo Item

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

B. CABELA, CHAZ, , ,

Mailing Address 11501 U.S. 31 NORTH

City
CHARLEVOIX

State
MI

Zip Code
49720

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 19 / 2019

Transaction ID : SA11AI.64012

Amount of Each Receipt this Period

1250.00

☐ Memo Item

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

C. CALDERON, ERNESTINA, , ,

Mailing Address 146 ROCK HILL CHURCH RD

City
STAFFORD

State
VA

Zip Code
22556

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DON

Occupation (for Individual)
LOG MGMT SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 29 / 2019

Transaction ID : SA11AI.51163

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

176350.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 OF 350

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. CALDERON, ERNESTINA, , ,

Mailing Address 146 ROCK HILL CHURCH RD

City
STAFFORDState
VAZip Code
22556FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DONOccupation (for Individual)
LOG MGMT SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
04	29	2019

Transaction ID : SA11AI.48898

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. CALDERON, ERNESTINA, , ,

Mailing Address 146 ROCK HILL CHURCH RD

City
STAFFORDState
VAZip Code
22556FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DONOccupation (for Individual)
LOG MGMT SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
05	29	2019

Transaction ID : SA11AI.47620

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. CALDERON, ERNESTINA, , ,

Mailing Address 146 ROCK HILL CHURCH RD

City
STAFFORDState
VAZip Code
22556FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DONOccupation (for Individual)
LOG MGMT SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
06	29	2019

Transaction ID : SA11AI.45245

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

300.00

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

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

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

FOR LINE NUMBER: PAGE 27 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. CAMPBELL, JOHN, , ,

Mailing Address 3861 BOCA BAY DRIVE

City
DALLASState
TXZip Code
75244FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TEXAS INSTRUMENTSOccupation (for Individual)
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : SA11AI.48243

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. CAMPBELL, JOHN, , ,

Mailing Address 3861 BOCA BAY DRIVE

City
DALLASState
TXZip Code
75244FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TEXAS INSTRUMENTSOccupation (for Individual)
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : SA11AI.47179

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. CARLSTROM, ROBERT, , ,

Mailing Address 225 BECKWITH ST

City
GAITHERSBURGState
MDZip Code
20878FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
THE CARLSTROM GROUP, LLCOccupation (for Individual)
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 21 / 2019

Transaction ID : SA11AI.47900

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

150.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 28 OF 350

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. CARLSTROM, ROBERT, , ,

Mailing Address 225 BECKWITH ST

City
GAITHERSBURG

State
MD

Zip Code
20878

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
THE CARLSTROM GROUP, LLC

Occupation (for Individual)
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 21 / 2019

Transaction ID : SA11AI.45521

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. CARNS, EDWIN, , ,

Mailing Address PO BOX 967

City
DELTA JUNCTION

State
AK

Zip Code
99737

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 05 / 2019

Transaction ID : SA11AI.70589

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. CARRERA, ANGELA, , ,

Mailing Address 13410 W CROWN RIDGE DRIVE

City
SUN CITY WEST

State
AZ

Zip Code
85375

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2019

Transaction ID : SA11AI.50541

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

325.00

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

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

FOR LINE NUMBER: PAGE 29 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. CARRERA, ANGELA, , ,

Mailing Address 13410 W CROWN RIDGE DRIVE

City

SUN CITY WEST

State

AZ

Zip Code

85375

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2019

Transaction ID : SA11AI.50542

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. CARRUTHERS, SARA, , ,

Mailing Address 601GLENWAY DR

City

HAMILTON

State

OH

Zip Code

45013

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STATE OF OHIO

Occupation (for Individual)
STATE REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 18 / 2019

Transaction ID : SA11AI.51824

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. CARRUTHERS, SARA, , ,

Mailing Address 601GLENWAY DR

City

HAMILTON

State

OH

Zip Code

45013

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STATE OF OHIO

Occupation (for Individual)
STATE REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 18 / 2019

Transaction ID : SA11AI.49234

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

225.00

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

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

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

FOR LINE NUMBER: PAGE 30 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. CAUTIS, VICTOR, , ,

Mailing Address 20 NATHAN PLACE

City
DANVILLE

State
CA

Zip Code
94526

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 29 / 2019

Transaction ID : SA11AI.47609

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. CAUTIS, VICTOR, , ,

Mailing Address 20 NATHAN PLACE

City
DANVILLE

State
CA

Zip Code
94526

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : SA11AI.45394

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. CHANDLER, ELAINE, , ,

Mailing Address PO BOX 1403

City
CHEHALIS

State
WA

Zip Code
98532

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 15 / 2019

Transaction ID : SA11AI.68059

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

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

501.00

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

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

FOR LINE NUMBER: PAGE 31 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. CHANDLER, ELAINE, , ,

Mailing Address PO BOX 1403

City
CHEHALIS

State
WA

Zip Code
98532

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 06 / 2019

Transaction ID : SA11AI.52646

Amount of Each Receipt this Period

45.00

☐ Memo Item

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

B. CHANDLER, ELAINE, , ,

Mailing Address PO BOX 1403

City
CHEHALIS

State
WA

Zip Code
98532

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 06 / 2019

Transaction ID : SA11AI.49769

Amount of Each Receipt this Period

45.00

☐ Memo Item

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

C. CHANDLER, ELAINE, , ,

Mailing Address PO BOX 1403

City
CHEHALIS

State
WA

Zip Code
98532

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

391.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2019

Transaction ID : SA11AI.47776

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

190.00

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

PAGE 32 OF 350

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. CHAPMAN, ANNE, MARIE, ,

Mailing Address 1455 ALLENTOWN RD

City
LANSDALEState
PAZip Code
19446FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

UME (UNDERWRITING MANAGEMENT)

Occupation (for Individual)

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M	D D	Y Y Y Y
02	16	2019

Transaction ID : SA11AI.55154

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. CLARK, CONNIE, Y, ,

Mailing Address 29213 SEMINOLE RD

City
TOLLHOUSEState
CAZip Code
93667-9715FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M	D D	Y Y Y Y
06	07	2019

Transaction ID : SA11AI.47259

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. CLARKE, SHERRY, , ,

Mailing Address 146 WILDWOOD TRAIL

City
FLORENCEState
ALZip Code
35630FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M	D D	Y Y Y Y
01	18	2019

Transaction ID : SA11AI.65988

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

550.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 33 OF 350
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. COBLE, JAMES, , ,

Mailing Address PO BOX 1213

City
BURLINGTONState
NCZip Code
27216-1213FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		09		2019

Transaction ID : SA11AI.69665

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. COBLE, JAMES, , ,

Mailing Address PO BOX 1213

City
BURLINGTONState
NCZip Code
27216-1213FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		16		2019

Transaction ID : SA11AI.67867

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. COBLE, JAMES, , ,

Mailing Address PO BOX 1213

City
BURLINGTONState
NCZip Code
27216-1213FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2019

Transaction ID : SA11AI.47871

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

360.00

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

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

FOR LINE NUMBER: PAGE 34 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. COMBEST, HOLLY, , ,

Mailing Address 11413 MEADOW

City
LEAWOODState
KSZip Code
66211FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 12 / 2019

Transaction ID : SA11AI.69015

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. CONRAD, CATHERINE, , ,

Mailing Address P.O. BOX 387

City
COQUILLEState
ORZip Code
97423FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

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

Transaction ID : SA11AI.45322

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. CONRAD, CATHERINE, , ,

Mailing Address P.O. BOX 387

City
COQUILLEState
ORZip Code
97423FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 29 / 2019

Transaction ID : SA11AI.45091

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

525.00

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 35 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. CORNWELL, W, BRENT, ,

Mailing Address 1617 BAY CREST TRL

City
HEATH

State
TX

Zip Code
75032

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ROYAL FINISH, INC

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 06 / 2019

Transaction ID : SA11AI.58588

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. CORVINO, JOSEPH, , ,

Mailing Address 96 EL BONTIO WAY

City

MILLBRAE

State

CA

Zip Code

94030

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2019

Transaction ID : SA11AI.52957

Amount of Each Receipt this Period

45.00

☐ Memo Item

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

C. CORVINO, JOSEPH, , ,

Mailing Address 96 EL BONTIO WAY

City

MILLBRAE

State

CA

Zip Code

94030

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2019

Transaction ID : SA11AI.50358

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

320.00

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 36 OF 350

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. CORVINO, JOSEPH, , ,

Mailing Address 96 EL BONTIO WAY

City
MILLBRAE

State
CA

Zip Code
94030

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

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

Transaction ID : SA11AI.49776

Amount of Each Receipt this Period

45.00

☐ Memo Item

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

B. CORVINO, JOSEPH, , ,

Mailing Address 96 EL BONTIO WAY

City
MILLBRAE

State
CA

Zip Code
94030

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

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

Transaction ID : SA11AI.49634

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. CRAIN, TIMOTHY, , ,

Mailing Address 2609 PICKWICK LANE

City
PLANO

State
TX

Zip Code
75093

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PRESIDENT/CEO

Occupation (for Individual)
TSC AVIATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 04 / 2019

Transaction ID : SA11AI.59076

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

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

145.00

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 37 OF 350

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. CRAIN, TIMOTHY, , ,

Mailing Address 2609 PICKWICK LANE

City
PLANO

State
TX

Zip Code
75093

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PRESIDENT/CEO

Occupation (for Individual)
TSC AVIATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 04 / 2019

Transaction ID : SA11AI.52765

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

B. CRAIN, TIMOTHY, , ,

Mailing Address 2609 PICKWICK LANE

City
PLANO

State
TX

Zip Code
75093

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PRESIDENT/CEO

Occupation (for Individual)
TSC AVIATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

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

Transaction ID : SA11AI.50251

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

C. CRAIN, TIMOTHY, , ,

Mailing Address 2609 PICKWICK LANE

City
PLANO

State
TX

Zip Code
75093

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PRESIDENT/CEO

Occupation (for Individual)
TSC AVIATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

435.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 04 / 2019

Transaction ID : SA11AI.48439

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

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

225.00

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

PAGE 38 OF 350

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. CRAIN, TIMOTHY, , ,

Mailing Address 2609 PICKWICK LANE

City
PLANOState
TXZip Code
75093FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PRESIDENT/CEOOccupation (for Individual)
TSC AVIATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
06	04	2019

Transaction ID : SA11AI.47357

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

B. CRAMER, JIM, , ,

Mailing Address 2817 S LIPSCOMB

City
AMARILLOState
TXZip Code
79109FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AUSTIN HOSEOccupation (for Individual)
CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
05	01	2019

Transaction ID : SA11AI.48592

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. CRAMER, JIM, , ,

Mailing Address 2817 S LIPSCOMB

City
AMARILLOState
TXZip Code
79109FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AUSTIN HOSEOccupation (for Individual)
CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
06	01	2019

Transaction ID : SA11AI.47386

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

175.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 39 OF 350

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

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

NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. CRANE, ALFRED, , ,

Mailing Address 45 LAKESHORE DRIVE

City
NEWPORT NEWS

State
VA

Zip Code
23608

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DEPT OF THE ARMY

Occupation (for Individual)
ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 18 / 2019

Transaction ID : SA11AI.47985

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. CRANE, ALFRED, , ,

Mailing Address 45 LAKESHORE DRIVE

City
NEWPORT NEWS

State
VA

Zip Code
23608

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DEPT OF THE ARMY

Occupation (for Individual)
ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 18 / 2019

Transaction ID : SA11AI.46450

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. CROWE, DAVID, R., ,

Mailing Address 79405 HWY 111, STE 9-204

City
LA QUINTA

State
CA

Zip Code
92253

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 13 / 2019

Transaction ID : SA11AI.47067

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

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

135.00

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 40 OF 350

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. CRUZ, RICARDO, , ,

Mailing Address 11243 RIVERRIDGE PARK LN

City
HOUSTON

State
TX

Zip Code
77089

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HOUSTON POLICE DEPARTMENT

Occupation (for Individual)
POLICE SERGEANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 08 / 2019

Transaction ID : SA11AI.52515

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

B. CRUZ, RICARDO, , ,

Mailing Address 11243 RIVERRIDGE PARK LN

City
HOUSTON

State
TX

Zip Code
77089

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HOUSTON POLICE DEPARTMENT

Occupation (for Individual)
POLICE SERGEANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 22 / 2019

Transaction ID : SA11AI.51576

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. CRUZ, RICARDO, , ,

Mailing Address 11243 RIVERRIDGE PARK LN

City
HOUSTON

State
TX

Zip Code
77089

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HOUSTON POLICE DEPARTMENT

Occupation (for Individual)
POLICE SERGEANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 29 / 2019

Transaction ID : SA11AI.51141

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

85.00

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

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

FOR LINE NUMBER: PAGE 41 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. CRUZ, RICARDO, , ,

Mailing Address 11243 RIVERRIDGE PARK LN

City
HOUSTONState
TXZip Code
77089FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HOUSTON POLICE DEPARTMENTOccupation (for Individual)
POLICE SERGEANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : SA11AI.49684

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. DANIELS, GEORGE, G, ,

Mailing Address PO BOX 59-0007

City
ORLANDOState
FLZip Code
32859FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DANIELS MANUFACTURING CORPORATIONOccupation (for Individual)
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

101000.00

Date of Receipt

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

Transaction ID : SA11AI.49988

Amount of Each Receipt this Period

101000.00

☐ Memo Item

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

C. DATTA, DEVIN, , ,

Mailing Address 10350 S TROPICAL TRAIL

City
MERRITT ISLANDState
FLZip Code
32952FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DEVIN DATTAOccupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2019

Transaction ID : SA11AI.53163

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

101275.00

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 42 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. DE ANGELIS, JOSEPH, , ,

Mailing Address 244 ROLLING MEADOWS BLVD

City
OCEAN

State
NJ

Zip Code
07712

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SHORE FUNDING LTD.INC.

Occupation (for Individual)
CEO/PRES.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : SA11AI.69377

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

B. DEARYBURY, CHARLES, WILLIAM, ,

Mailing Address 215 MUIRFIELD DR

City

SPARTANBURG

State

SC

Zip Code

29306

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DEARYBURY OIL GAS

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : SA11AI.52406

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. DELAVACO HOLDINGS INC.

Mailing Address 2300 E LAS OLAS BLVD, 5TH FLOOR

City

FORT LAUDERDALE

State

FL

Zip Code

33301

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

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

Transaction ID : SA11AI.49551

Amount of Each Receipt this Period

100000.00

☐ Memo Item

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

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

100750.00

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

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

FOR LINE NUMBER: PAGE 43 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. DIFRANCO, PAUL, , ,

Mailing Address 213 NORTH DEE ROAD

City
PARK RIDGEState
ILZip Code
60068FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
DENTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 18 / 2019

Transaction ID : SA11AI.46257

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. DIRIENZO, BRIAN, , ,

Mailing Address 3182 SE FAIRWAY WEST

City
STUARTState
FLZip Code
34997FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 13 / 2019

Transaction ID : SA11AI.52074

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. DOLLE, HELEN, , ,

Mailing Address 17272 AMAGANSET WAY

City
TUSTINState
CAZip Code
92780FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 16 / 2019

Transaction ID : SA11AI.48061

Amount of Each Receipt this Period

45.00

☐ Memo Item

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

545.00

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 44 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. DOWD, JOHN, M, ,

Mailing Address 31 HARDING LANE

City
CHATHAM

State
MA

Zip Code
02633

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 29 / 2019

Transaction ID : SA11AI.47636

Amount of Each Receipt this Period

20000.00

☐ Memo Item

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

B. DUBBS, WENDELL, , ,

Mailing Address 5907 6TH AVENUE

City
KEARNEY

State
NE

Zip Code
68845

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
OWNER/MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : SA11AI.69258

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

C. DUBBS, WENDELL, , ,

Mailing Address 5907 6TH AVENUE

City
KEARNEY

State
NE

Zip Code
68845

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
OWNER/MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 15 / 2019

Transaction ID : SA11AI.68477

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

20750.00

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

PAGE 45 OF 350

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. EGGE, VERN, , ,

Mailing Address 90387 EGGE RD

City
EUGENEState
ORZip Code
97408FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
QUARRY OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	01	/	2019

Transaction ID : SA11AI.50974

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

B. ENGSTROM, SHELAGH, , ,

Mailing Address 7580 SR 13 NORTH

City

SAINT AUGUSTINE

State
FLZip Code
32092FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	23	/	2019

Transaction ID : SA11AI.51484

Amount of Each Receipt this Period

45.00

☐ Memo Item

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

C. ENGSTROM, SHELAGH, , ,

Mailing Address 7580 SR 13 NORTH

City

SAINT AUGUSTINE

State
FLZip Code
32092FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	26	/	2019

Transaction ID : SA11AI.51342

Amount of Each Receipt this Period

45.00

☐ Memo Item

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

590.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 46 OF 350
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. ENGSTROM, SHELAGH, , ,

Mailing Address 7580 SR 13 NORTH

City
SAINT AUGUSTINEState
FLZip Code
32092FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
03	31	2019

Transaction ID : SA11AI.50799

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. ENGSTROM, SHELAGH, , ,

Mailing Address 7580 SR 13 NORTH

City
SAINT AUGUSTINEState
FLZip Code
32092FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
04	01	2019

Transaction ID : SA11AI.51050

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. ENGSTROM, SHELAGH, , ,

Mailing Address 7580 SR 13 NORTH

City
SAINT AUGUSTINEState
FLZip Code
32092FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
04	04	2019

Transaction ID : SA11AI.50273

Amount of Each Receipt this Period

45.00

☐ Memo Item

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

95.00

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

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

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

FOR LINE NUMBER: PAGE 47 OF 350

(check only one)

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

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

NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. ENGSTROM, SHELAGH, , ,

Mailing Address 7580 SR 13 NORTH

City

SAINT AUGUSTINE

State

FL

Zip Code

32092

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 06 / 2019

Transaction ID : SA11AI.49928

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. ENGSTROM, SHELAGH, , ,

Mailing Address 7580 SR 13 NORTH

City

SAINT AUGUSTINE

State

FL

Zip Code

32092

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

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

Transaction ID : SA11AI.49619

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. ENGSTROM, SHELAGH, , ,

Mailing Address 7580 SR 13 NORTH

City

SAINT AUGUSTINE

State

FL

Zip Code

32092

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary☐ General☐ Other (specify)

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 08 / 2019

Transaction ID : SA11AI.48358

Amount of Each Receipt this Period

45.00

☐ Memo Item

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

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

95.00

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

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

FOR LINE NUMBER: PAGE 48 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. ENGSTROM, SHELAGH, , ,

Mailing Address 7580 SR 13 NORTH

City
SAINT AUGUSTINE

State
FL

Zip Code
32092

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 30 / 2019

Transaction ID : SA11AI.47576

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. ENGSTROM, SHELAGH, , ,

Mailing Address 7580 SR 13 NORTH

City
SAINT AUGUSTINE

State
FL

Zip Code
32092

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 17 / 2019

Transaction ID : SA11AI.46786

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. ENGSTROM, SHELAGH, , ,

Mailing Address 7580 SR 13 NORTH

City
SAINT AUGUSTINE

State
FL

Zip Code
32092

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 19 / 2019

Transaction ID : SA11AI.45893

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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 49 OF 350

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. ENSIGN, REBECCA, , ,

Mailing Address 716 ROLLINGWOOD DRIVE

City
GREENSBORO

State
NC

Zip Code
27410

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RAE PROPERTIES LLC

Occupation (for Individual)
PROPERTY MGR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2019

Transaction ID : SA11AI.47800

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. ENSIGN, REBECCA, , ,

Mailing Address 716 ROLLINGWOOD DRIVE

City
GREENSBORO

State
NC

Zip Code
27410

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RAE PROPERTIES LLC

Occupation (for Individual)
PROPERTY MGR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 28 / 2019

Transaction ID : SA11AI.47715

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

C. ENSIGN, REBECCA, , ,

Mailing Address 716 ROLLINGWOOD DRIVE

City
GREENSBORO

State
NC

Zip Code
27410

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RAE PROPERTIES LLC

Occupation (for Individual)
PROPERTY MGR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 23 / 2019

Transaction ID : SA11AI.45475

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

55.00

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 50 OF 350

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. EVANS, ANN, M, ,

Mailing Address 2626 PATRICE LANE

City
MAUMEE

State
OH

Zip Code
43537

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 08 / 2019

Transaction ID : SA11AI.58121

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. EVANS, ANN, M, ,

Mailing Address 2626 PATRICE LANE

City
MAUMEE

State
OH

Zip Code
43537

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 16 / 2019

Transaction ID : SA11AI.54695

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. EVANS, ANN, M, ,

Mailing Address 2626 PATRICE LANE

City
MAUMEE

State
OH

Zip Code
43537

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2019

Transaction ID : SA11AI.48689

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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

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

FOR LINE NUMBER: PAGE 51 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. EVANS, ANN, M, ,

Mailing Address 2626 PATRICE LANE

City
MAUMEE

State
OH

Zip Code
43537

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 03 / 2019

Transaction ID : SA11AI.48540

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

B. FALCHI, CHERYL, , ,

Mailing Address 60 TOYON LANE

City
SAUSALITO

State
CA

Zip Code
94965

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 22 / 2019

Transaction ID : SA11AI.51557

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

C. FIDDYMENT, KARYL, LYNN, ,

Mailing Address 6419 RIO DE ONAR WAY

City
ELK GROVE

State
CA

Zip Code
95757

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 26 / 2019

Transaction ID : SA11AI.48944

Amount of Each Receipt this Period

45.00

☐ Memo Item

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

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

560.00

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

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

FOR LINE NUMBER: PAGE 52 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. FIDDYMENT, KARYL, LYNN, ,

Mailing Address 6419 RIO DE ONAR WAY

City
ELK GROVE

State
CA

Zip Code
95757

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 26 / 2019

Transaction ID : SA11AI.47644

Amount of Each Receipt this Period

45.00

☐ Memo Item

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

B. FIDDYMENT, KARYL, LYNN, ,

Mailing Address 6419 RIO DE ONAR WAY

City
ELK GROVE

State
CA

Zip Code
95757

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 26 / 2019

Transaction ID : SA11AI.45336

Amount of Each Receipt this Period

45.00

☐ Memo Item

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

C. FLAUM, DAVID, , ,

Mailing Address 400 ANDREWS STREET
STE 500

City
ROCHESTER

State
NY

Zip Code
14604

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FLAUM MGT. CO INC.

Occupation (for Individual)
REAL ESTATE DEVELOPER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 28 / 2019

Transaction ID : SA11AI.59931

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

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

1090.00

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

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

FOR LINE NUMBER: PAGE 53 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. FLAUM, DAVID, , ,

Mailing Address 400 ANDREWS STREET
STE 500

City
ROCHESTER

State
NY

Zip Code
14604

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FLAUM MGT. CO INC.

Occupation (for Individual)
REAL ESTATE DEVELOPER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 18 / 2019

Transaction ID : SA11AI.55189

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. FLEGENHEIMER, WILLIAM, , ,

Mailing Address 308 LEMONWOOD DRIVE

City

FALLBROOK

State

CA

Zip Code

92028

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : SA11AI.45113

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. FLUTER, RUSSELL, , ,

Mailing Address 812 1ST ST., #32

City

KAMIAH

State

ID

Zip Code

83536

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 16 / 2019

Transaction ID : SA11AI.49335

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

375.00

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

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

FOR LINE NUMBER: PAGE 54 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. FOX, FRED, , ,

Mailing Address 14017 CLEAR WATER LN

City
FORT MYERS

State
FL

Zip Code
33907

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 30 / 2019

Transaction ID : SA11AI.47562

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. FOX, FRED, , ,

Mailing Address 14017 CLEAR WATER LN

City
FORT MYERS

State
FL

Zip Code
33907

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : SA11AI.45212

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. FRANZ, DAWN, , ,

Mailing Address 50 WEST BROAD STREET, #2601

City
COLUMBUS

State
OH

Zip Code
43215

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 09 / 2019

Transaction ID : SA11AI.70039

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

350.00

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

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

FOR LINE NUMBER: PAGE 55 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. FRITZ, BRENDA, , ,

Mailing Address 520 HARRIER HAWK

City
EDMONDState
OKZip Code
73003FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 20 / 2019

Transaction ID : SA11AI.45581

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

B. FUSEK, GARY, , ,

Mailing Address 132 HERRMANN DR.

City
AVON LAKEState
OHZip Code
44012FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LUBRIZOLOccupation (for Individual)
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 04 / 2019

Transaction ID : SA11AI.47363

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

C. GALPERN, ROBERT, , ,

Mailing Address 14 SAINT MARKS PLACE
18BCity
NEW YORKState
NYZip Code
10003FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UNYPO, LLC.Occupation (for Individual)
REAL ESTATE MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 17 / 2019

Transaction ID : SA11AI.66892

Amount of Each Receipt this Period

255.00

☐ Memo Item

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

325.00

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

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

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

FOR LINE NUMBER: PAGE 56 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. GALPERN, ROBERT, , ,

Mailing Address 14 SAINT MARKS PLACE
18B

City
NEW YORK

State
NY

Zip Code
10003

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UNYPO, LLC.

Occupation (for Individual)
REAL ESTATE MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 17 / 2019

Transaction ID : SA11AI.55252

Amount of Each Receipt this Period

255.00

☐ Memo Item

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

B. GALPERN, ROBERT, , ,

Mailing Address 14 SAINT MARKS PLACE
18B

City
NEW YORK

State
NY

Zip Code
10003

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UNYPO, LLC.

Occupation (for Individual)
REAL ESTATE MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

765.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 17 / 2019

Transaction ID : SA11AI.51869

Amount of Each Receipt this Period

255.00

☐ Memo Item

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

C. GARDNER, WILLIAM, , ,

Mailing Address 5880 N DOUGLAS HWY

City
JUNEAU

State
AK

Zip Code
99801

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BARTLETT REGIONAL HOSPITAL

Occupation (for Individual)
CHIEF CLINICAL OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 15 / 2019

Transaction ID : SA11AI.48145

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

560.00

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

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

FOR LINE NUMBER: PAGE 57 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. GARDNER, WILLIAM, , ,

Mailing Address 5880 N DOUGLAS HWY

City
JUNEAU

State
AK

Zip Code
99801

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BARTLETT REGIONAL HOSPITAL

Occupation (for Individual)
CHIEF CLINICAL OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 15 / 2019

Transaction ID : SA11AI.46559

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. GORDON, PIERRETTE, , ,

Mailing Address 1151 LAUREL FORK RD

City
WALLAND

State
TN

Zip Code
37886

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WISCONSIN METALS

Occupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 24 / 2019

Transaction ID : SA11AI.61630

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. GOULDING, DEBBIE, , ,

Mailing Address 1408 BRECON ROAD

City
MOUNT PLEASANT

State
SC

Zip Code
29464

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : SA11AI.70474

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

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

800.00

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

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

FOR LINE NUMBER: PAGE 58 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. GUIDRY, CHAD, , ,

Mailing Address 1901 MANHATTAN BLVD H-101

City
HARVEY

State
LA

Zip Code
70058

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ROBYN GUIDRY INVESTMENTS LLC

Occupation (for Individual)
INVESTMENTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 13 / 2019

Transaction ID : SA11AI.57428

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. HAGEMAN, JOHN, , ,

Mailing Address 1 WATERFORD CIRCLE

City
SPRING

State
TX

Zip Code
77381

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
THE CARNRITE GROUP

Occupation (for Individual)
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 09 / 2019

Transaction ID : SA11AI.69858

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. HAINES, WILLIAM, , ,

Mailing Address PO BOX 13587

City
OKLAHOMA CITY

State
OK

Zip Code
73113

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BANK7

Occupation (for Individual)
BANKING

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 23 / 2019

Transaction ID : SA11AI.65511

Amount of Each Receipt this Period

25000.00

☐ Memo Item

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

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

25500.00

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

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

FOR LINE NUMBER: PAGE 59 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. HALL, CHRISTINA, , ,

Mailing Address 2305 NORWAY MAPLE ST

City
LAS VEGAS

State
NV

Zip Code
89117

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 18 / 2019

Transaction ID : SA11AI.46143

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. HALL, CHRISTINA, , ,

Mailing Address 2305 NORWAY MAPLE ST

City
LAS VEGAS

State
NV

Zip Code
89117

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.99

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 18 / 2019

Transaction ID : SA11AI.46144

Amount of Each Receipt this Period

8.99

☐ Memo Item

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

C. HALL, GLENDA, , ,

Mailing Address 3215 W GOVERNOR JOHN SEVIER

City
KNOXVILLE

State
TN

Zip Code
37920

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ATWORK, INC.

Occupation (for Individual)
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 02 / 2019

Transaction ID : SA11AI.50340

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

508.99

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

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

FOR LINE NUMBER: PAGE 60 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. HANLON, SHIELA, , ,

Mailing Address 10 SKYLAND PLACE

City

THE WOODLANDS

State

TX

Zip Code

77381

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF

Occupation (for Individual)

REALTOR

Receipt For:

☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 14 / 2019

Transaction ID : SA11AI.46922

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

B. HANSEN, TOM, , ,

Mailing Address 513 RIDGE ROAD

City

BELLEVUE

State

NE

Zip Code

68005

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

TOM HANSEN

Occupation (for Individual)

MASON CONTRACTOR

Receipt For:

☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 18 / 2019

Transaction ID : SA11AI.46241

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. HARRIS, BRUCE, , ,

Mailing Address PO BOX 38

City

LAKEBAY

State

WA

Zip Code

98349

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NW FORWARDING

Occupation (for Individual)

EXECUTIVE

Receipt For:

☐
☐

Primary

General

Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 25 / 2019

Transaction ID : SA11AI.47642

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

335.00

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

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

FOR LINE NUMBER: PAGE 61 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. HARRIS, BRUCE, , ,

Mailing Address PO BOX 38

City
LAKEBAY

State
WA

Zip Code
98349

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NW FORWARDING

Occupation (for Individual)
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 25 / 2019

Transaction ID : SA11AI.45353

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. HARRIS, SCOTT, , ,

Mailing Address 345 N LASALLE DRIVE SUITE 3306

City
CHICAGO

State
IL

Zip Code
60654

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FRANCESCA'S

Occupation (for Individual)
CHEF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 06 / 2019

Transaction ID : SA11AI.58611

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

C. HAWK, COLEMAN, , ,

Mailing Address 5041 PARADISE POND LN

City
JACKSONVILLE

State
FL

Zip Code
32207

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 03 / 2019

Transaction ID : SA11AI.71250

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

1300.00

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

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

FOR LINE NUMBER: PAGE 62 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. HAWKINS, GREGG, , ,

Mailing Address 113 SHADOW LAKE DRIVE

City

BUCKHEAD

State

GA

Zip Code

30625

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

THE SILVER MOON

Occupation (for Individual)

OWNER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 14 / 2019

Transaction ID : SA11AI.51997

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. HAWKINS, GREGG, , ,

Mailing Address 113 SHADOW LAKE DRIVE

City

BUCKHEAD

State

GA

Zip Code

30625

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

THE SILVER MOON

Occupation (for Individual)

OWNER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 14 / 2019

Transaction ID : SA11AI.49447

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. HAWKINS, GREGG, , ,

Mailing Address 113 SHADOW LAKE DRIVE

City

BUCKHEAD

State

GA

Zip Code

30625

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

THE SILVER MOON

Occupation (for Individual)

OWNER

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 14 / 2019

Transaction ID : SA11AI.48178

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

300.00

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

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

FOR LINE NUMBER: PAGE 63 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. HAWKINS, GREGG, , ,

Mailing Address 113 SHADOW LAKE DRIVE

City

BUCKHEAD

State

GA

Zip Code

30625

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

THE SILVER MOON

Occupation (for Individual)

OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 14 / 2019

Transaction ID : SA11AI.47015

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. HEGSTROM, JEFFREY, , ,

Mailing Address 7723 DEVINNEY COURT

City

ARVADA

State

CO

Zip Code

80005

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ARCHITECTURAL DOORS INCOccupation (for Individual)
PROJECT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 02 / 2019

Transaction ID : SA11AI.52759

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

C. HELSING, HILLARY, , ,

Mailing Address 641 ST. JAMES ROAD

City

NEWPORT BEACH

State

CA

Zip Code

92663

FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 31 / 2019

Transaction ID : SA11AI.59350

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

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

3600.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
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 Detailed Summary Page

FOR LINE NUMBER: PAGE 64 OF 350

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. HENNING, CHARLES, , ,

Mailing Address 3601 WYNGATE RD

City
DOVERState
PAZip Code
17315FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DAHCOccupation (for Individual)
IT SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 05 / 17 / 2019

Transaction ID : SA11AI.48041

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. HENNING, CHARLES, , ,

Mailing Address 3601 WYNGATE RD

City
DOVERState
PAZip Code
17315FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DAHCOccupation (for Individual)
IT SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 06 / 17 / 2019

Transaction ID : SA11AI.46827

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. HINSON, HERBERT, , ,

Mailing Address 3422 SW 15TH STREET

City
DEERFIELD BEACHState
FLZip Code
33442FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ARAMCOOccupation (for Individual)
ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 01 / 18 / 2019

Transaction ID : SA11AI.66025

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

400.00

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

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

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

FOR LINE NUMBER: PAGE 65 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. HINSON, HERBERT, , ,

Mailing Address 3422 SW 15TH STREET

City
DEERFIELD BEACH

State
FL

Zip Code
33442

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ARAMCO

Occupation (for Individual)
ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 18 / 2019

Transaction ID : SA11AI.54884

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

B. HIZA, SUSAN, , ,

Mailing Address 1902 W BOGIE DRIVE

City
TAMPA

State
FL

Zip Code
33612

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : SA11AI.45217

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

C. HOBBS, STEVEN, , ,

Mailing Address 7201 DRYDEN CT

City
BOYNTON BEACH

State
FL

Zip Code
33436

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CENTURY LINK

Occupation (for Individual)
SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 28 / 2019

Transaction ID : SA11AI.51182

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

435.00

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 66 OF 350

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. HOBBS, STEVEN, , ,

Mailing Address 7201 DRYDEN CT

City

BOYNTON BEACH

State

FL

Zip Code

33436

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

CENTURY LINK

Occupation (for Individual)

SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 28 / 2019

Transaction ID : SA11AI.48753

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. HOBBS, STEVEN, , ,

Mailing Address 7201 DRYDEN CT

City

BOYNTON BEACH

State

FL

Zip Code

33436

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

CENTURY LINK

Occupation (for Individual)

SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 28 / 2019

Transaction ID : SA11AI.47637

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. HOBBS, TERRY, , ,

Mailing Address 17883 FRONT BEACH ROAD

City

PANAMA CITY BEACH

State

FL

Zip Code

32413

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

HOBBS & ASSOCIATES

Occupation (for Individual)

SMALL BUSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : SA11AI.71423

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

450.00

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

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

FOR LINE NUMBER: PAGE 67 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. HOBBS, TERRY, , ,

Mailing Address 17883 FRONT BEACH ROAD

City
PANAMA CITY BEACH

State
FL

Zip Code
32413

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HOBBS & ASSOCIATES

Occupation (for Individual)
SMALL BUSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 30 / 2019

Transaction ID : SA11AI.47572

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. HODGE, CHRIS, , ,

Mailing Address 2180 IDLEWILD RD

City
PALM BEACH GARDENS

State
FL

Zip Code
33410

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
THE WAYS BOATYARD

Occupation (for Individual)
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID : SA11AI.52631

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

C. HODGE, CHRIS, , ,

Mailing Address 2180 IDLEWILD RD

City
PALM BEACH GARDENS

State
FL

Zip Code
33410

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
THE WAYS BOATYARD

Occupation (for Individual)
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : SA11AI.49793

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

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

250.00

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 68 OF 350

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. HODGE, CHRIS, , ,

Mailing Address 2180 IDLEWILD RD

City
PALM BEACH GARDENS

State
FL

Zip Code
33410

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
THE WAYS BOATYARD

Occupation (for Individual)
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 07 / 2019

Transaction ID : SA11AI.48368

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

B. HODGE, CHRIS, , ,

Mailing Address 2180 IDLEWILD RD

City
PALM BEACH GARDENS

State
FL

Zip Code
33410

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
THE WAYS BOATYARD

Occupation (for Individual)
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 07 / 2019

Transaction ID : SA11AI.47277

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

C. HODGES, MICHAEL, LYNN, ,

Mailing Address PO BOX 331513

City
NASHVILLE

State
TN

Zip Code
37203

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ADVANCE FINANCIAL

Occupation (for Individual)
CHAIRMAN/OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2019

Transaction ID : SA11AI.47598

Amount of Each Receipt this Period

250000.00

☐ Memo Item

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

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

250150.00

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

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

FOR LINE NUMBER: PAGE 69 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. HODGES, PAULA, , ,

Mailing Address 123 CHAPEL HILL DR

City
DOUBLE OAKState
TXZip Code
75077-3018FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SUNFINITY RENEWABLE ENERGYOccupation (for Individual)
OFFICE MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 03 / 2019

Transaction ID : SA11AI.48499

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. HODGES, PAULA, , ,

Mailing Address 123 CHAPEL HILL DR

City
DOUBLE OAKState
TXZip Code
75077-3018FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SUNFINITY RENEWABLE ENERGYOccupation (for Individual)
OFFICE MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 03 / 2019

Transaction ID : SA11AI.47389

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. HOLLOWAY, ROBERT, , ,

Mailing Address 921 MILLPOND CT

City
NORTHVILLEState
MIZip Code
48167-1070FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 26 / 2019

Transaction ID : SA11AI.47681

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

150.00

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

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

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

FOR LINE NUMBER: PAGE 70 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. HOLLOWAY, ROBERT, , ,

Mailing Address 921 MILLPOND CT

City
NORTHVILLE

State
MI

Zip Code
48167-1070

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 26 / 2019

Transaction ID : SA11AI.45342

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. HUNTER, JACK, , ,

Mailing Address PO BOX 10300

City
FORT WAYNE

State
IN

Zip Code
46851

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

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

Transaction ID : SA11AI.52349

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. HUNTER, JACK, , ,

Mailing Address PO BOX 10300

City
FORT WAYNE

State
IN

Zip Code
46851

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 05 / 2019

Transaction ID : SA11AI.50124

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

100.00

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

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

FOR LINE NUMBER: PAGE 71 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. HUNTER, JACK, , ,

Mailing Address PO BOX 10300

City
FORT WAYNE

State
IN

Zip Code
46851

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 30 / 2019

Transaction ID : SA11AI.47552

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. INMAN, KRISTINE, , ,

Mailing Address 12348 SW KING GEORGE DR

City
PORTLAND

State
OR

Zip Code
97224

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
01 / 15 / 2019

Transaction ID : SA11AI.68193

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. ISAACS, JON, , ,

Mailing Address 992 S 4TH AVE 100-512

City
BRIGHTON

State
CO

Zip Code
80601

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
NATURAL RESOURCES

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : SA11AI.48238

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

350.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 72 OF 350

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. ISAACS, JON, , ,

Mailing Address 992 S 4TH AVE 100-512

City
BRIGHTON

State
CO

Zip Code
80601

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
NATURAL RESOURCES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 03 / 2019

Transaction ID : SA11AI.47384

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. ISREAL, RICKY, L, ,

Mailing Address 226 HIGH PLACE

City
JACKSON

State
OH

Zip Code
45640

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 17 / 2019

Transaction ID : SA11AI.46719

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

C. JENKINS, NORM, , ,

Mailing Address 6886 CODY TRAIL

City
PARK CITY

State
UT

Zip Code
84098

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MASTER LEASE PLAN

Occupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2019

Transaction ID : SA11AI.53076

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

335.00

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

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

FOR LINE NUMBER: PAGE 73 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. JOBE, RENEE, , ,

Mailing Address 8185 E ALAMEDA RD

City
SCOTTSDALE

State
AZ

Zip Code
85255

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 21 / 2019

Transaction ID : SA11AI.63332

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

B. JOBE, RENEE, , ,

Mailing Address 8185 E ALAMEDA RD

City
SCOTTSDALE

State
AZ

Zip Code
85255

FEC ID number of contributing
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 / D D / Y Y Y Y Y Y
02 / 21 / 2019

Transaction ID : SA11AI.53590

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

C. JOBE, RENEE, , ,

Mailing Address 8185 E ALAMEDA RD

City
SCOTTSDALE

State
AZ

Zip Code
85255

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 21 / 2019

Transaction ID : SA11AI.51673

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

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

1500.00

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

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

FOR LINE NUMBER: PAGE 74 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. JOBE, RENEE, , ,

Mailing Address 8185 E ALAMEDA RD

City
SCOTTSDALE

State
AZ

Zip Code
85255

FEC ID number of contributing
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

M M / D D / Y Y Y Y Y Y
04 / 21 / 2019

Transaction ID : SA11AI.49079

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

B. JOBE, RENEE, , ,

Mailing Address 8185 E ALAMEDA RD

City
SCOTTSDALE

State
AZ

Zip Code
85255

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 21 / 2019

Transaction ID : SA11AI.47894

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

C. JOBE, RENEE, , ,

Mailing Address 8185 E ALAMEDA RD

City
SCOTTSDALE

State
AZ

Zip Code
85255

FEC ID number of contributing
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

M M / D D / Y Y Y Y Y Y
06 / 21 / 2019

Transaction ID : SA11AI.45508

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

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

1500.00

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

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

FOR LINE NUMBER: PAGE 75 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. KEATS, DOUGLAS, , ,

Mailing Address 2244 EAST INDIGO BAY DRIVE

City
GILBERT

State
AZ

Zip Code
85234

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2019

Transaction ID : SA11AI.50378

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. KEATS, DOUGLAS, , ,

Mailing Address 2244 EAST INDIGO BAY DRIVE

City
GILBERT

State
AZ

Zip Code
85234

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : SA11AI.45127

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. KEOWN, JANE, , ,

Mailing Address 8856 STONEPOINTE LN

City
JOHNSTON

State
IA

Zip Code
50131

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID : SA11AI.47318

Amount of Each Receipt this Period

45.00

☐ Memo Item

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

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

145.00

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

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

FOR LINE NUMBER: PAGE 76 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. KEY, ROBERT, , ,

Mailing Address 8908 S. YALE, SUITE 250

City
TULSA

State
OK

Zip Code
74137

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 16 / 2019

Transaction ID : SA11AI.67406

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. KINSMAN, CRAIG, , ,

Mailing Address 6711 NANCY RIDGE DRIVE

City
SAN DIEGO

State
CA

Zip Code
92121

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
PAINTING CONTRACTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : SA11AI.45397

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. KIRBY, DONALD, , ,

Mailing Address 11015 LA PAZ

City
SPRING HILL

State
FL

Zip Code
34608

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 25 / 2019

Transaction ID : SA11AI.60303

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

750.00

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

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

FOR LINE NUMBER: PAGE 77 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. KIRKWOOD, ARCH, , ,

Mailing Address 2752 WALNUT AVE

City
TUSTINState
CAZip Code
92780FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AJ KIRKWOOD & ASSOCIATESOccupation (for Individual)
MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 01 / 2019

Transaction ID : SA11AI.50982

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. KOENNING, JO, , ,

Mailing Address 7403 N. 119 E. AVE

City
OWASSOState
OKZip Code
74055FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 04 / 2019

Transaction ID : SA11AI.47359

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

C. LANEY, DONALD, , ,

Mailing Address 4111 MANORFIELD

City
SEABROOKState
TXZip Code
77586FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 01 / 2019

Transaction ID : SA11AI.52793

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

385.00

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 78 OF 350

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. LANEY, DONALD, , ,

Mailing Address 4111 MANORFIELD

City
SEABROOK

State
TX

Zip Code
77586

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 01 / 2019

Transaction ID : SA11AI.50962

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. LANEY, DONALD, , ,

Mailing Address 4111 MANORFIELD

City
SEABROOK

State
TX

Zip Code
77586

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 01 / 2019

Transaction ID : SA11AI.48585

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. LANEY, DONALD, , ,

Mailing Address 4111 MANORFIELD

City
SEABROOK

State
TX

Zip Code
77586

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 01 / 2019

Transaction ID : SA11AI.47387

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

300.00

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

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

FOR LINE NUMBER: PAGE 79 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. LARSSON, ERIK, , ,

Mailing Address 8741 SW 19TH AVE RD

City
OCALA

State
FL

Zip Code
34476

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
CONTRACTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 10 / 2019

Transaction ID : SA11AI.69510

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. LAWSON, JULIE, , ,

Mailing Address 1440 KINGSFORD DRIVE

City

CARMICHAEL

State

CA

Zip Code

95608

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LAWSON COMMERCIAL REAL ESTATE (SOLE PR

Occupation (for Individual)
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : SA11AI.45096

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

C. LEACH, JOHN, , ,

Mailing Address 2485 RUE DU JARDIN

City

NAPLES

State

FL

Zip Code

34105

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 05 / 2019

Transaction ID : SA11AI.52722

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

850.00

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

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

FOR LINE NUMBER: PAGE 80 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. LEACH, JOHN, , ,

Mailing Address 2485 RUE DU JARDIN

City
NAPLES

State
FL

Zip Code
34105

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 05 / 2019

Transaction ID : SA11AI.50151

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. LEACH, JOHN, , ,

Mailing Address 2485 RUE DU JARDIN

City
NAPLES

State
FL

Zip Code
34105

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : SA11AI.48464

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. LEACH, JOHN, , ,

Mailing Address 2485 RUE DU JARDIN

City
NAPLES

State
FL

Zip Code
34105

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 05 / 2019

Transaction ID : SA11AI.47348

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

300.00

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

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

FOR LINE NUMBER: PAGE 81 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. LEE, ELEANOR, , ,

Mailing Address 1930 W RIVER BEND CT

City
MEQUONState
WIZip Code
53092FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 06 / 2019

Transaction ID : SA11AI.58357

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. LEE, VINCENT, , ,

Mailing Address 7498 CANYON BREEZE DRIVE

City
SAN DIEGOState
CAZip Code
92126FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 29 / 2019

Transaction ID : SA11AI.45111

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. LEGER, CATHERINE, , ,

Mailing Address 96 EDENDALE STREET

City
SPRINGFIELDState
MAZip Code
01104FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIFE LABORATORIESOccupation (for Individual)
MEDICAL TECHNOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 05 / 2019

Transaction ID : SA11AI.70938

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

1500.00

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 82 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. LEIKE, DICK, , ,

Mailing Address 8643 POPLAR PIKE

 City
 GERMANTOWN

 State
 TN

 Zip Code
 38138

 FEC ID number of contributing
 federal political committee.

C

 Name of Employer (for Individual)
 CRYE-LEIKE

 Occupation (for Individual)
 REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 02 / 05 / 2019

Transaction ID : SA11AI.59003

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

B. LEONE, DOUGLAS, M., Mr.,

Mailing Address 13385 ROBLEDA RD

 City
 LOS ALTOS HILLS

 State
 CA

 Zip Code
 94022

 FEC ID number of contributing
 federal political committee.

C

 Name of Employer (for Individual)
 SEQUOIA CAPITAL

 Occupation (for Individual)
 INVESTOR

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
 06 / 07 / 2019

Transaction ID : SA11AI.47335

Amount of Each Receipt this Period

50000.00

☐ Memo Item

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

C. LINDSAY, ANNETTE, , ,

Mailing Address 28835 SUMMIT DRIVE

 City
 NOVI

 State
 MI

 Zip Code
 48377

 FEC ID number of contributing
 federal political committee.

C

 Name of Employer (for Individual)
 RETIRED

 Occupation (for Individual)
 RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2019

Transaction ID : SA11AI.47271

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

50600.00

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

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

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Detailed Summary Page

FOR LINE NUMBER: PAGE 83 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. LIPSEY, SUZANNE, H, ,

Mailing Address PO BOX 7796

City
AVON

State
CO

Zip Code
81620-7796

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 23 / 2019

Transaction ID : SA11AI.45414

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. LOBNER, KEN, , ,

Mailing Address 5420 SAINT ANTONCT.

City

CARMICHAEL

State
CA

Zip Code
95608

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 14 / 2019

Transaction ID : SA11AI.46868

Amount of Each Receipt this Period

45.00

☐ Memo Item

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

C. LOOMIS, BRETT, , ,

Mailing Address PO BOX 4243

City

EL DORADO HILLS

State
CA

Zip Code
95762-0015

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
U.S. FOREST SERVICE

Occupation (for Individual)
FIREFIGHTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

221.00

Date of Receipt

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

Transaction ID : SA11AI.52153

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

170.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 84 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. LORANGER, KEVIN, , ,

Mailing Address 4804 199TH ST NE

City
ARLINGTON

State
WA

Zip Code
98223-6364

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UNIVERSITY OF WASHINGTON

Occupation (for Individual)
SOFTWARE ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 17 / 2019

Transaction ID : SA11AI.46562

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

B. LUBSEN, HENRY, , ,

Mailing Address 2150 SPYGLASS HILL

City
CENTER VALLEY

State
PA

Zip Code
18034

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ALTRONICS, INC.

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : SA11AI.48315

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

C. LUONGO, EILEEN, , ,

Mailing Address 5 TIVED LANE

City
EDISON

State
NJ

Zip Code
08837

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 18 / 2019

Transaction ID : SA11AI.46510

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

1060.00

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

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

FOR LINE NUMBER: PAGE 85 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. LUONGO, EILEEN, , ,

Mailing Address 5 TIVED LANE

City
EDISON

State
NJ

Zip Code
08837

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : SA11AI.45282

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

B. LYON, WILLIAM, , ,

Mailing Address PO BOX 520

City
HEMPSTEAD

State
NY

Zip Code
11551-0520

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PLANT-TECH2O INC.

Occupation (for Individual)
HORTICULUTURIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 30 / 2019

Transaction ID : SA11AI.47591

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. LYON, WILLIAM, , ,

Mailing Address PO BOX 520

City
HEMPSTEAD

State
NY

Zip Code
11551-0520

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PLANT-TECH2O INC.

Occupation (for Individual)
HORTICULUTURIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : SA11AI.45276

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

115.00

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

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

FOR LINE NUMBER: PAGE 86 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. LYSTRA, RENICE, , ,

Mailing Address 1839 E QUEEN CREEK RD

City
CHANDLER

State
AZ

Zip Code
85286

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FREEDOMFROMACCOUNTING

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 05 / 2019

Transaction ID : SA11AI.70661

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. MACKLE, LORETTA, , ,

Mailing Address 409 JUNO DUNES WAY

City
JUNO BEACH

State
FL

Zip Code
33408

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 19 / 2019

Transaction ID : SA11AI.45648

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

C. MANARO, JUDY, , ,

Mailing Address 4028 41ST AVE SO

City
SEATTLE

State
WA

Zip Code
98118

FEC ID number of contributing
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 / D D / Y Y Y Y Y Y
02 / 06 / 2019

Transaction ID : SA11AI.58417

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

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

1285.00

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

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

FOR LINE NUMBER: PAGE 87 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. MARR, JANET, , ,

Mailing Address 8459 US 42 SUITE F PMB 281

City
FLORENCE

State
KY

Zip Code
41042

FEC ID number of contributing
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 / D D / Y Y Y Y Y Y
03 / 31 / 2019

Transaction ID : SA11AI.50733

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

B. MARROCCO, DEREK, , ,

Mailing Address 125 MORRIS AVE

City
LONG BRANCH

State
NJ

Zip Code
07740

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 13 / 2019

Transaction ID : SA11AI.52142

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

C. MARSDEN, JAMES, , ,

Mailing Address PO BOX 700194

City
SAN ANTONIO

State
TX

Zip Code
78270

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DOD

Occupation (for Individual)
IT PROGRAM MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 05 / 2019

Transaction ID : SA11AI.50061

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

1750.00

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

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

FOR LINE NUMBER: PAGE 88 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. MARTINSON, RODNEY, R, ,

Mailing Address 13531 WEST SKY HAWK DRIVE

City

SUN CITY WEST

State

AZ

Zip Code

85375-5832

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 07 / 2019

Transaction ID : SA11AI.48365

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. MARTINSON, RODNEY, R, ,

Mailing Address 13531 WEST SKY HAWK DRIVE

City

SUN CITY WEST

State

AZ

Zip Code

85375-5832

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 10 / 2019

Transaction ID : SA11AI.48260

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

C. MARTINSON, RODNEY, R, ,

Mailing Address 13531 WEST SKY HAWK DRIVE

City

SUN CITY WEST

State

AZ

Zip Code

85375-5832

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2019

Transaction ID : SA11AI.47782

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

85.00

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

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

FOR LINE NUMBER: PAGE 89 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. MARTINSON, RODNEY, R, ,

Mailing Address 13531 WEST SKY HAWK DRIVE

City
SUN CITY WEST

State
AZ

Zip Code
85375-5832

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2019

Transaction ID : SA11AI.47434

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. MARTINSON, RODNEY, R, ,

Mailing Address 13531 WEST SKY HAWK DRIVE

City
SUN CITY WEST

State
AZ

Zip Code
85375-5832

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 19 / 2019

Transaction ID : SA11AI.45712

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. MARTINSON, RODNEY, R, ,

Mailing Address 13531 WEST SKY HAWK DRIVE

City
SUN CITY WEST

State
AZ

Zip Code
85375-5832

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

345.00

Date of Receipt

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

Transaction ID : SA11AI.45409

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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 90 OF 350

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. MCCAFFETY, JUNE, , ,

Mailing Address 270 ROSENWALL ROAD

City
HUNTSVILLE

State
TX

Zip Code
77320

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EPIC HEALTH SERVICES

Occupation (for Individual)
REGISTERED NURSE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 30 / 2019

Transaction ID : SA11AI.47539

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. MCCAFFETY, JUNE, , ,

Mailing Address 270 ROSENWALL ROAD

City
HUNTSVILLE

State
TX

Zip Code
77320

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EPIC HEALTH SERVICES

Occupation (for Individual)
REGISTERED NURSE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : SA11AI.45146

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. MCCOY, ROBERT, , ,

Mailing Address 1973 CHERYL COURT

City
LAKE OSWEGO

State
OR

Zip Code
97034

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MCCOY FREIGHTLINER

Occupation (for Individual)
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 05 / 2019

Transaction ID : SA11AI.70608

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

350.00

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

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

FOR LINE NUMBER: PAGE 91 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. MCCOY, ROBERT, , ,

Mailing Address 1973 CHERYL COURT

City
LAKE OSWEGO

State
OR

Zip Code
97034

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MCCOY FREIGHTLINER

Occupation (for Individual)
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 09 / 2019

Transaction ID : SA11AI.69714

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. MCCULLOUGH, ROBERT, , ,

Mailing Address 89 CLEOPATRA DR.

City
PLEASANT HILL

State
CA

Zip Code
94523

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
JOHN MUIR HEALTH

Occupation (for Individual)
IT ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 10 / 2019

Transaction ID : SA11AI.69433

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

C. MCDONALD, DAVID, , ,

Mailing Address PO BOX 971

City
RENO

State
NV

Zip Code
89504-0971

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FED EX FREIGHT

Occupation (for Individual)
TRUCK DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 05 / 2019

Transaction ID : SA11AI.52713

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

500.00

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 92 OF 350

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. MCDONALD, DAVID, , ,

Mailing Address PO BOX 971

City
RENO

State
NV

Zip Code
89504-0971

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FED EX FREIGHT

Occupation (for Individual)
TRUCK DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 05 / 2019

Transaction ID : SA11AI.49992

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. MCKOWEN, JOHN, , ,

Mailing Address 456 MADISON STREET

City
DENVER

State
CO

Zip Code
80206

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
ENTREPRENEUR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 15 / 2019

Transaction ID : SA11AI.51889

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. MCKOWEN, JOHN, , ,

Mailing Address 456 MADISON STREET

City
DENVER

State
CO

Zip Code
80206

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
ENTREPRENEUR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 15 / 2019

Transaction ID : SA11AI.49481

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

300.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 93 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. MCMAHON, LINDA, E, ,

Mailing Address 1055 WASHINGTON BLVD.

City
STAMFORDState
CTZip Code
06901FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AMERICA FIRST ACTION, INCOccupation (for Individual)
CHAIR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 28 / 2019

Transaction ID : SA11AI.47775

Amount of Each Receipt this Period

1000000.00

☐ Memo Item
& CHAIR OF AMERICA FIRST POLICIES, INC.

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

B. MEDVE, JAKOB, , ,

Mailing Address 3401 LEE PARKWAY
#2203City
DALLASState
TXZip Code
75219FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYEDOccupation (for Individual)
REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 13 / 2019

Transaction ID : SA11AI.52056

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. MEDVE, JAKOB, , ,

Mailing Address 3401 LEE PARKWAY
#2203City
DALLASState
TXZip Code
75219FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYEDOccupation (for Individual)
REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 13 / 2019

Transaction ID : SA11AI.49440

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

1000200.00

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

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

FOR LINE NUMBER: PAGE 94 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. MEDVE, JAKOB, , ,

Mailing Address 3401 LEE PARKWAY
 #2203

City
 DALLAS

State
 TX

Zip Code
 75219

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
 SELF-EMPLOYED

Occupation (for Individual)
 REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 13 / 2019

Transaction ID : SA11AI.48222

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. MEDVE, JAKOB, , ,

Mailing Address 3401 LEE PARKWAY
 #2203

City
 DALLAS

State
 TX

Zip Code
 75219

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 ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 13 / 2019

Transaction ID : SA11AI.47057

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. MELVILLE, GORDON, C, ,

Mailing Address 354 W HILL ROAD A

City
 ELMIRA

State
 NY

Zip Code
 14903-9355

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
 RETIRED

Occupation (for Individual)
 RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID : SA11AI.48316

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

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

235.00

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

PAGE 95 OF 350

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. MELVILLE, GORDON, C, ,

Mailing Address 354 W HILL ROAD A

City
ELMIRAState
NYZip Code
14903-9355FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

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

Transaction ID : SA11AI.47247

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

B. MEOLI, MIKE, , ,

Mailing Address 757 PLEASANT ST

City

BRIDGEWATER

State

MA

Zip Code

02324-2349

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
ROCK MASON

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID : SA11AI.47204

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

C. MERRELL, JEANNE, , ,

Mailing Address PO BOX 4110

City

PRESCOTT

State

AZ

Zip Code

86302

FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
04	30	2019

Transaction ID : SA11AI.48609

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

170.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 96 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. MERRELL, JEANNE, , ,

Mailing Address PO BOX 4110

City
PRESCOTT

State
AZ

Zip Code
86302

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 13 / 2019

Transaction ID : SA11AI.47072

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. MESSICK, WALTER, , ,

Mailing Address 2753 SPRUCE CREEK BLVD

City
PORT ORANGE

State
FL

Zip Code
32128

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 26 / 2019

Transaction ID : SA11AI.51339

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. MESSICK, WALTER, , ,

Mailing Address 2753 SPRUCE CREEK BLVD

City
PORT ORANGE

State
FL

Zip Code
32128

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 26 / 2019

Transaction ID : SA11AI.48952

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

300.00

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 97 OF 350

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. MESSICK, WALTER, , ,

Mailing Address 2753 SPRUCE CREEK BLVD

City
PORT ORANGE

State
FL

Zip Code
32128

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 26 / 2019

Transaction ID : SA11AI.47710

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. MESSICK, WALTER, , ,

Mailing Address 2753 SPRUCE CREEK BLVD

City
PORT ORANGE

State
FL

Zip Code
32128

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 26 / 2019

Transaction ID : SA11AI.45348

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. MEYERSOHN, WILLIAM, , ,

Mailing Address 2645 SOUTH BAYSHORE DRIVE

City
MIAMI

State
FL

Zip Code
33133

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
REAL ESTATE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 16 / 2019

Transaction ID : SA11AI.51838

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

450.00

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 98 OF 350

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. MEYERSON, WILLIAM, , ,

Mailing Address 2645 SOUTH BAYSHORE DRIVE

City
MIAMI

State
FL

Zip Code
33133

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
REAL ESTATE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 22 / 2019

Transaction ID : SA11AI.49122

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. MILLER, SUSAN, , ,

Mailing Address 35 DRIFTING SHADOW WAY

City

LAS VEGAS

State

NV

Zip Code

89135

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 06 / 2019

Transaction ID : SA11AI.49848

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

C. MOFIELD, CHARLES, , ,

Mailing Address 1301 J RD

City

FLORAL

State

AR

Zip Code

72534

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ICI

Occupation (for Individual)
ENVIRONMENTAL CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 18 / 2019

Transaction ID : SA11AI.65815

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

1000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 99 OF 350

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. MONGER, ROBERT, , ,

Mailing Address 4485 NELSON LN

City
COLORADO SPRINGSState
COZip Code
80911-9603FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M	D D	Y Y Y Y
06	09	2019

Transaction ID : SA11AI.47202

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

B. MONTANA, SCOTT, , ,

Mailing Address 11036 FERNBURY DRIVE

City
FORT WORTHState
TXZip Code
76179FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SOUTHWEST AIRLINESOccupation (for Individual)
AVIONICS TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M	D D	Y Y Y Y
02	13	2019

Transaction ID : SA11AI.57133

Amount of Each Receipt this Period

65.00

☐ Memo Item

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

C. MOPPERT, ALBERT, , ,

Mailing Address 3123 ROBINSON ROAD

City
MISSOURI CITYState
TXZip Code
77459FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M	D D	Y Y Y Y
01	04	2019

Transaction ID : SA11AI.71038

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

350.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 100 OF 350

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. MOREY, JOAN, , ,

Mailing Address 209 W JUNIPER

City
WILDWOOD

State
NJ

Zip Code
08260

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LONG & FOSTER REAL ESTATE

Occupation (for Individual)
REALTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 17 / 2019

Transaction ID : SA11AI.46843

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. MOREY, JOAN, , ,

Mailing Address 209 W JUNIPER

City
WILDWOOD

State
NJ

Zip Code
08260

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LONG & FOSTER REAL ESTATE

Occupation (for Individual)
REALTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 18 / 2019

Transaction ID : SA11AI.46517

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. MOREY, JOAN, , ,

Mailing Address 209 W JUNIPER

City
WILDWOOD

State
NJ

Zip Code
08260

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LONG & FOSTER REAL ESTATE

Occupation (for Individual)
REALTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

251.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : SA11AI.45284

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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

PAGE 101 OF 350

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. MORIARTY, GARY, , ,

Mailing Address 1909 VIA APPIA

City
WALNUT CREEKState
CAZip Code
94598FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SWINERTONOccupation (for Individual)
ARCHITECT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : SA11AI.48429

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. MORIARTY, GARY, , ,

Mailing Address 1909 VIA APPIA

City
WALNUT CREEKState
CAZip Code
94598FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SWINERTONOccupation (for Individual)
ARCHITECT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		0	5		2	0	1	9		

Transaction ID : SA11AI.47338

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. MOSES, MARGARITA, , ,

Mailing Address 5889 DEER CROSSING LN

City
QUINLANState
TXZip Code
75474FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EPIC HEALTHCARE SVCSOccupation (for Individual)
RN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : SA11AI.51201

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

200.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 102 OF 350

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. MOSES, MARGARITA, , ,

Mailing Address 5889 DEER CROSSING LN

City
QUINLAN

State
TX

Zip Code
75474

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EPIC HEALTHCARE SVCES

Occupation (for Individual)
RN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 28 / 2019

Transaction ID : SA11AI.48821

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. MOSES, MARGARITA, , ,

Mailing Address 5889 DEER CROSSING LN

City
QUINLAN

State
TX

Zip Code
75474

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EPIC HEALTHCARE SVCES

Occupation (for Individual)
RN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 28 / 2019

Transaction ID : SA11AI.47669

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. MOSES, MARGARITA, , ,

Mailing Address 5889 DEER CROSSING LN

City
QUINLAN

State
TX

Zip Code
75474

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EPIC HEALTHCARE SVCES

Occupation (for Individual)
RN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 28 / 2019

Transaction ID : SA11AI.45305

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

300.00

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

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

FOR LINE NUMBER: PAGE 103 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. MOSKOWITZ, CHERNA, , ,

Mailing Address 4744 NORTH BAY ROAD

City
MIAMI BEACH

State
FL

Zip Code
33140

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HAWAIIAN GARDENS CASINO

Occupation (for Individual)
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 05 / 2019

Transaction ID : SA11AI.50292

Amount of Each Receipt this Period

1000000.00

☐ Memo Item

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

B. MRJ CAPITAL INC.

Mailing Address 441 LEXINGTON AVE
STE 602

City
NEW YORK

State
NY

Zip Code
10017

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

M M / D D / Y Y Y Y Y Y
05 / 08 / 2019

Transaction ID : SA11AI.48416

Amount of Each Receipt this Period

15000.00

☐ Memo Item

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

C. MUKHERJEE, DOROTHY, , ,

Mailing Address 1445 RIVIERA DR

City
KISSIMMEE

State
FL

Zip Code
34744

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
BUSINESS

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 30 / 2019

Transaction ID : SA11AI.47559

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

1015050.00

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

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

FOR LINE NUMBER: PAGE 104 OF 350

(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. MUKHERJEE, DOROTHY, , ,

Mailing Address 1445 RIVIERA DR

City
KISSIMMEE

State
FL

Zip Code
34744

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
BUSINESS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : SA11AI.45204

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. MULDER, LEON, , ,

Mailing Address 310 HUBBARD AVE

City
DOON

State
IA

Zip Code
51235

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MULDER EQUIPMENT SALES INC

Occupation (for Individual)
SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 18 / 2019

Transaction ID : SA11AI.51818

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. MULDER, LEON, , ,

Mailing Address 310 HUBBARD AVE

City
DOON

State
IA

Zip Code
51235

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MULDER EQUIPMENT SALES INC

Occupation (for Individual)
SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 18 / 2019

Transaction ID : SA11AI.49230

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

250.00

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 105 OF 350

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. MULDER, LEON, , ,

Mailing Address 310 HUBBARD AVE

City
DOON

State
IA

Zip Code
51235

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MULDER EQUIPMENT SALES INC

Occupation (for Individual)
SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 18 / 2019

Transaction ID : SA11AI.47962

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. MULDER, LEON, , ,

Mailing Address 310 HUBBARD AVE

City
DOON

State
IA

Zip Code
51235

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MULDER EQUIPMENT SALES INC

Occupation (for Individual)
SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 18 / 2019

Transaction ID : SA11AI.46275

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. MURPHY, ANNE, , ,

Mailing Address 19951 COLLIER ST.

City
WOODLAND HILLS

State
CA

Zip Code
91364

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 29 / 2019

Transaction ID : SA11AI.51125

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

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 106 OF 350

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MURPHY, ANNE, , ,

Mailing Address 19951 COLLIER ST.

City

WOODLAND HILLS

State

CA

Zip Code

91364

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 29 / 2019

Transaction ID : SA11AI.48794

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MURPHY, ANNE, , ,

Mailing Address 19951 COLLIER ST.

City

WOODLAND HILLS

State

CA

Zip Code

91364

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 29 / 2019

Transaction ID : SA11AI.47610

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MURPHY, ANNE, , ,

Mailing Address 19951 COLLIER ST.

City

WOODLAND HILLS

State

CA

Zip Code

91364

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 29 / 2019

Transaction ID : SA11AI.45114

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

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 107 OF 350

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. NASSETTA, TOM, , ,

Mailing Address PO BOX 509

City
CARMEL VALLEY

State
CA

Zip Code
93924

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
CONTRACTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 29 / 2019

Transaction ID : SA11AI.51094

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NELSON, BILL, , ,

Mailing Address 315 CROTON HEIGHTS ROAD

City
YORKTOWN HEIGHTS

State
NY

Zip Code
10598

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 19 / 2019

Transaction ID : SA11AI.62889

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NELSON, BILL, , ,

Mailing Address 315 CROTON HEIGHTS ROAD

City
YORKTOWN HEIGHTS

State
NY

Zip Code
10598

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 13 / 2019

Transaction ID : SA11AI.57186

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

850.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 108 OF 350

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. NELSON, BILL, , ,

Mailing Address 315 CROTON HEIGHTS ROAD

City
YORKTOWN HEIGHTSState
NYZip Code
10598FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
06	/	13	/	2019

Transaction ID : SA11AI.47152

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NEWELL, GUY, , ,Mailing Address 732 S 11TH ST
STE 100City
NILESState
MIZip Code
49120-3368FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LEONARDO DRSOccupation (for Individual)
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	22	/	2019

Transaction ID : SA11AI.47811

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NEWELL, GUY, , ,Mailing Address 732 S 11TH ST
STE 100City
NILESState
MIZip Code
49120-3368FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LEONARDO DRSOccupation (for Individual)
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	22	/	2019

Transaction ID : SA11AI.45445

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

350.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 109 OF 350

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. NORMAN, ROBERT, , ,

Mailing Address 144 SHERWOOD DR

City
GLASTONBURY

State
CT

Zip Code
06033

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 06 / 2019

Transaction ID : SA11AI.58861

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OKEEFFE, WILLIAM, , ,

Mailing Address 820 LAGUNA HONDA BLVD

City
SAN FRANCISCO

State
CA

Zip Code
94127

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SAFTI

Occupation (for Individual)
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 16 / 2019

Transaction ID : SA11AI.67157

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. OWENS, WAYNE, , ,

Mailing Address 942 MEADOWLAND DRIVE

City
CINCINNATI

State
OH

Zip Code
45255

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
OWENS WAYNE

Occupation (for Individual)
SELF-EMPLOYED TRAINING CONSUL

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 17 / 2019

Transaction ID : SA11AI.48026

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

550.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 110 OF 350

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. OWENS, WAYNE, , ,

Mailing Address 942 MEADOWLAND DRIVE

City
CINCINNATI

State
OH

Zip Code
45255

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
OWENS WAYNE

Occupation (for Individual)
SELF-EMPLOYED TRAINING CONSUI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 17 / 2019

Transaction ID : SA11AI.46721

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. P'POOL, MELINDA, GAIL, ,

Mailing Address 3316 NE 42ND CT

City
FORT LAUDERDALE

State
FL

Zip Code
33308

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 19 / 2019

Transaction ID : SA11AI.51697

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. P'POOL, MELINDA, GAIL, ,

Mailing Address 3316 NE 42ND CT

City
FORT LAUDERDALE

State
FL

Zip Code
33308

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 19 / 2019

Transaction ID : SA11AI.49160

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

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 111 OF 350

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. P'POOL, MELINDA, GAIL, ,

Mailing Address 3316 NE 42ND CT

City

FORT LAUDERDALE

State

FL

Zip Code

33308

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 19 / 2019

Transaction ID : SA11AI.47920

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. P'POOL, MELINDA, GAIL, ,

Mailing Address 3316 NE 42ND CT

City

FORT LAUDERDALE

State

FL

Zip Code

33308

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

06 / 19 / 2019

Transaction ID : SA11AI.45869

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PALMER, GEOFFREY, H., ,

Mailing Address 270 N. CANON DRIVE

City

BEVERLY HILLS

State

CA

Zip Code

90210

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

G. H. PALMER ASSOCIATES

Occupation (for Individual)

REAL ESTATE DEVELOPMENT

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

2000000.00

Date of Receipt

04 / 23 / 2019

Transaction ID : SA11AI.49146

Amount of Each Receipt this Period

2000000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2000200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 112 OF 350

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PAPPAS, JOHN, , ,

Mailing Address 504 7TH AVE.

City
LA GRANGE

State
IL

Zip Code
60525

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WESTROCK

Occupation (for Individual)
ACCOUNT EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

- 50.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2019

Transaction ID : SA11AI.53110

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PAVEL, PETER, , ,

Mailing Address 650 E GRAND AVE

City
LAKE VILLA

State
IL

Zip Code
60046

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GRAINGER

Occupation (for Individual)
SOFTWARE ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2019

Transaction ID : SA11AI.50668

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PEDERSON, GRANT, , ,

Mailing Address 19403 JUNIPER BREEZE LANE

City
SPRING

State
TX

Zip Code
77379

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 18 / 2019

Transaction ID : SA11AI.46211

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

525.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 113 OF 350
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PELLETIER, RICHARD, , ,

Mailing Address 58 WEST BERLIN ROAD

City
BOLTONState
MAZip Code
01740FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NASHOBA VALLEY SPIRITSOccupation (for Individual)
FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		08		2019

Transaction ID : SA11AI.52623

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PENROD, R, WAYNE, ,

Mailing Address PO BOX

City
DAYTONState
OHZip Code
45429FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		04		2019

Transaction ID : SA11AI.52770

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PENROD, R, WAYNE, ,

Mailing Address PO BOX

City
DAYTONState
OHZip Code
45429FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		04		2019

Transaction ID : SA11AI.50259

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

450.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 114 OF 350

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PERKINS-LEONE, PATRICIA, , Ms.,

Mailing Address 13385 ROBLEDA RD

City

LOS ALTOS HILLS

State

CA

Zip Code

94022

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

HOMEMAKER

Occupation (for Individual)

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 07 / 2019

Transaction ID : SA11AI.47337

Amount of Each Receipt this Period

50000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PETTIT, PAT, , ,

Mailing Address 2668 DORSET MEADOWS DR

City

POWHATAN

State

VA

Zip Code

23139

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 04 / 2019

Transaction ID : SA11AI.52775

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PETTIT, PAT, , ,

Mailing Address 2668 DORSET MEADOWS DR

City

POWHATAN

State

VA

Zip Code

23139

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 17 / 2019

Transaction ID : SA11AI.51853

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

50060.00

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 115 OF 350

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PETTIT, PAT, , ,

Mailing Address 2668 DORSET MEADOWS DR

City
POWHATAN

State
VA

Zip Code
23139

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 04 / 2019

Transaction ID : SA11AI.50278

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PETTIT, PAT, , ,

Mailing Address 2668 DORSET MEADOWS DR

City
POWHATAN

State
VA

Zip Code
23139

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 17 / 2019

Transaction ID : SA11AI.49285

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PETTIT, PAT, , ,

Mailing Address 2668 DORSET MEADOWS DR

City
POWHATAN

State
VA

Zip Code
23139

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 04 / 2019

Transaction ID : SA11AI.48477

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

95.00

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 116 OF 350

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PETTIT, PAT, , ,

Mailing Address 2668 DORSET MEADOWS DR

City
POWHATAN

State
VA

Zip Code
23139

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 17 / 2019

Transaction ID : SA11AI.48040

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PETTIT, PAT, , ,

Mailing Address 2668 DORSET MEADOWS DR

City
POWHATAN

State
VA

Zip Code
23139

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 04 / 2019

Transaction ID : SA11AI.47369

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PETTIT, PAT, , ,

Mailing Address 2668 DORSET MEADOWS DR

City
POWHATAN

State
VA

Zip Code
23139

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 17 / 2019

Transaction ID : SA11AI.46805

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

85.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 117 OF 350

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PICKARD, TINA, , ,

Mailing Address 430 PICKARD RD

City
FORT VALLEY

State
GA

Zip Code
31030

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PICKARD SALES CO

Occupation (for Individual)
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 07 / 2019

Transaction ID : SA11AI.52641

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PICKARD, TINA, , ,

Mailing Address 430 PICKARD RD

City
FORT VALLEY

State
GA

Zip Code
31030

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PICKARD SALES CO

Occupation (for Individual)
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 07 / 2019

Transaction ID : SA11AI.49934

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PICKARD, TINA, , ,

Mailing Address 430 PICKARD RD

City
FORT VALLEY

State
GA

Zip Code
31030

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PICKARD SALES CO

Occupation (for Individual)
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 07 / 2019

Transaction ID : SA11AI.48401

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 118 OF 350

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PICKARD, TINA, , ,

Mailing Address 430 PICKARD RD

City
FORT VALLEY

State
GA

Zip Code
31030

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PICKARD SALES CO

Occupation (for Individual)
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 07 / 2019

Transaction ID : SA11AI.47281

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PIZZA, JOSEPH, , ,

Mailing Address 50 MIDDLE RD

City
PALM BEACH

State
NJ

Zip Code
33480

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PHARMASPHERE, INC

Occupation (for Individual)
CEO/PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 10 / 2019

Transaction ID : SA11AI.49983

Amount of Each Receipt this Period

25000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PLAKOSH, GEORGE, , ,

Mailing Address 3220 NORTHWIND RD

City
PARKVILLE

State
MD

Zip Code
21233

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 16 / 2019

Transaction ID : SA11AI.67896

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

25350.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 119 OF 350
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PLEMMONS, KIM, , ,

Mailing Address 1950 NE 6 STREET #1719

City
POMPANO BEACHState
FLZip Code
33061FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ESRM COMMUNICATIONS LLCOccupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M	D D	Y Y Y Y
06	10	2019

Transaction ID : SA11AI.47240

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. POND, CHRIS, , ,

Mailing Address 26 N.MIDLAND BLVD

City
STANLEYState
NDZip Code
58784FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EPCON PARTNERSOccupation (for Individual)
CHIEF INSPECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M	D D	Y Y Y Y
06	17	2019

Transaction ID : SA11AI.46700

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. POST, WILLIAM, , ,

Mailing Address 5882 W STERLING LN

City
BOISEState
IDZip Code
83703-3028FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M	D D	Y Y Y Y
05	08	2019

Transaction ID : SA11AI.48323

Amount of Each Receipt this Period

65.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

135.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 120 OF 350

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. POST, WILLIAM, , ,

Mailing Address 5882 W STERLING LN

City
BOISE

State
ID

Zip Code
83703-3028

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 08 / 2019

Transaction ID : SA11AI.47216

Amount of Each Receipt this Period

65.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. POTTS, CYRUS, , ,

Mailing Address 672 BALDWIN DR

City

BRENTWOOD

State

CA

Zip Code

94513-6907

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 26 / 2019

Transaction ID : SA11AI.53372

Amount of Each Receipt this Period

65.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. POTTS, CYRUS, , ,

Mailing Address 672 BALDWIN DR

City

BRENTWOOD

State

CA

Zip Code

94513-6907

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

321.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2019

Transaction ID : SA11AI.52952

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

230.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 121 OF 350

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. POTTS, CYRUS, , ,

Mailing Address 672 BALDWIN DR

City
BRENTWOOD

State
CA

Zip Code
94513-6907

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

421.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2019

Transaction ID : SA11AI.50357

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. POTTS, CYRUS, , ,

Mailing Address 672 BALDWIN DR

City
BRENTWOOD

State
CA

Zip Code
94513-6907

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

471.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 01 / 2019

Transaction ID : SA11AI.50954

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PROTHERO, GLEN, , , JR.

Mailing Address 1109 E CAPITOL AVE

City
ELLENSBURG

State
WA

Zip Code
98926-3539

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 18 / 2019

Transaction ID : SA11AI.51721

Amount of Each Receipt this Period

150.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 122 OF 350

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RASTIN, THOMAS, , ,

Mailing Address PO BOX 243

City
MOUNT VERNON

State
OH

Zip Code
43050

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ARIEL CORPORATION

Occupation (for Individual)
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

125000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 11 / 2019

Transaction ID : SA11AI.70361

Amount of Each Receipt this Period

125000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. REESE, BETSY, , ,

Mailing Address 142 S. SHOREWOOD DR.

City
GRANITE SHOALS

State
TX

Zip Code
78654

FEC ID number of contributing
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 / D D / Y Y Y Y Y Y
05 / 16 / 2019

Transaction ID : SA11AI.48109

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. REEVES, MARGARET, , ,

Mailing Address 1102 SPRING VALLEY ROAD

City
PARADISE

State
TX

Zip Code
76073

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 09 / 2019

Transaction ID : SA11AI.69870

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

126250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 123 OF 350

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. REID, DONNA, , ,

Mailing Address 1574 HWY 70 W

City
DE QUEEN

State
AR

Zip Code
71832

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
TRANSPORTATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 03 / 2019

Transaction ID : SA11AI.52767

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. REID, DONNA, , ,

Mailing Address 1574 HWY 70 W

City
DE QUEEN

State
AR

Zip Code
71832

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
TRANSPORTATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 03 / 2019

Transaction ID : SA11AI.50311

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. REID, DONNA, , ,

Mailing Address 1574 HWY 70 W

City
DE QUEEN

State
AR

Zip Code
71832

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
TRANSPORTATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 03 / 2019

Transaction ID : SA11AI.48532

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 124 OF 350

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. REID, DONNA, , ,

Mailing Address 1574 HWY 70 W

City
DE QUEEN

State
AR

Zip Code
71832

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
TRANSPORTATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 03 / 2019

Transaction ID : SA11AI.47390

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. REITZ, BONNIE, , ,

Mailing Address 4998 62ND AVENUE SOUTH

City
SAINT PETERSBURG

State
FL

Zip Code
33715

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INSIDE OUT--CULTURE TO CUSTOMER

Occupation (for Individual)
BUSINESS ADVISOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 30 / 2019

Transaction ID : SA11AI.47563

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RICKETTS, MARLENE, M., ,

Mailing Address 412 NORTH ELMWOOD ROAD

City
OMAHA

State
NE

Zip Code
68132-2603

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 18 / 2019

Transaction ID : SA11AI.46857

Amount of Each Receipt this Period

500000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

500200.00

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 125 OF 350

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RIZZUTO, LEANDRO, , ,

Mailing Address 961 JASMINE DRIVE

City
DELRAY BEACH

State
FL

Zip Code
33483

FEC ID number of contributing
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 / D D / Y Y Y Y Y
01 / 19 / 2019

Transaction ID : SA11AI.64546

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROBISON, RAYMOND, , ,

Mailing Address 5472 WATERPOINTE COVE

City
TUPELO

State
MS

Zip Code
38801

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FEDEX

Occupation (for Individual)
PILOT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2019

Transaction ID : SA11AI.50416

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROGERS, MARY, , ,

Mailing Address 27 WINDSOR DR

City
ROCKWALL

State
TX

Zip Code
75032-7447

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 25 / 2019

Transaction ID : SA11AI.59992

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1275.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 126 OF 350

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ROGERS, MARY, , ,

Mailing Address 27 WINDSOR DR

City
ROCKWALL

State
TX

Zip Code
75032-7447

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 14 / 2019

Transaction ID : SA11AI.55796

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROOT, BARBARA, , ,

Mailing Address 106 PAMELA DR

City
WALKER LAKE

State
NV

Zip Code
89415

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 06 / 2019

Transaction ID : SA11AI.58492

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROSS, CYNTHIA, , ,

Mailing Address 611 KINGFISHER AVE

City
SHERIDAN

State
WY

Zip Code
82801

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 30 / 2019

Transaction ID : SA11AI.59572

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

700.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 127 OF 350

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ROSS, CYNTHIA, , ,

Mailing Address 611 KINGFISHER AVE

City
SHERIDAN

State
WY

Zip Code
82801

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 14 / 2019

Transaction ID : SA11AI.55770

Amount of Each Receipt this Period

1.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROSS, CYNTHIA, , ,

Mailing Address 611 KINGFISHER AVE

City
SHERIDAN

State
WY

Zip Code
82801

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 16 / 2019

Transaction ID : SA11AI.53763

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RUPPERT, RICHARD, J, ,

Mailing Address 5509 RIVER BLUFF CURVE

City
BLOOMINGTON

State
MN

Zip Code
55437

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 23 / 2019

Transaction ID : SA11AI.65517

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

526.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 128 OF 350
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SANCHEZ, PETE, , ,

Mailing Address 6515 BRIARSTONE LN

City
SPRING

State
TX

Zip Code
77379

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UTEX INDUSTRIES, INC

Occupation (for Individual)
FINANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 19 / 2019

Transaction ID : SA11AI.51707

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SANCHEZ, PETE, , ,

Mailing Address 6515 BRIARSTONE LN

City
SPRING

State
TX

Zip Code
77379

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UTEX INDUSTRIES, INC

Occupation (for Individual)
FINANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 19 / 2019

Transaction ID : SA11AI.49170

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SANCHEZ, PETE, , ,

Mailing Address 6515 BRIARSTONE LN

City
SPRING

State
TX

Zip Code
77379

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UTEX INDUSTRIES, INC

Occupation (for Individual)
FINANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 19 / 2019

Transaction ID : SA11AI.47950

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 129 OF 350

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SANCHEZ, PETE, , ,

Mailing Address 6515 BRIARSTONE LN

City
SPRING

State
TX

Zip Code
77379

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UTEX INDUSTRIES, INC

Occupation (for Individual)
FINANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 19 / 2019

Transaction ID : SA11AI.45752

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SAVELICH, ROBERT, , ,

Mailing Address 20524 NOBLE LN

City
WEST LINN

State
OR

Zip Code
97068-7220

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UNITEDHEALTH GROUP

Occupation (for Individual)
SALES MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 16 / 2019

Transaction ID : SA11AI.49295

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCHINNERER, DEBRA, , ,

Mailing Address 40 VIA TIBERIUS WAY

City
HENDERSON

State
NV

Zip Code
89011

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 17 / 2019

Transaction ID : SA11AI.66409

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

400.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 130 OF 350

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SCHLATHER, GARY, , ,

Mailing Address 2086 ALTWEIN LM

City

NEW BRAUNFELS

State

TX

Zip Code

78130

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 18 / 2019

Transaction ID : SA11AI.51739

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCHLATHER, GARY, , ,

Mailing Address 2086 ALTWEIN LM

City

NEW BRAUNFELS

State

TX

Zip Code

78130

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 18 / 2019

Transaction ID : SA11AI.49222

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCHLATHER, GARY, , ,

Mailing Address 2086 ALTWEIN LM

City

NEW BRAUNFELS

State

TX

Zip Code

78130

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 18 / 2019

Transaction ID : SA11AI.47948

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

300.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 131 OF 350

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SCHLATHER, GARY, , ,

Mailing Address 2086 ALTWEIN LM

City

NEW BRAUNFELS

State

TX

Zip Code

78130

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 18 / 2019

Transaction ID : SA11AI.46202

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCHWAN, MARY, ANNE, ,

Mailing Address 964 PUTNAM AVE

City

MERRICK

State

NY

Zip Code

11566

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

GAMA REALTY

Occupation (for Individual)

REAL ESTATE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 15 / 2019

Transaction ID : SA11AI.51941

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCHWEMMER, LYNDA, , ,

Mailing Address 6062 SHALLOWS WAY

City

NAPLES

State

FL

Zip Code

34109

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 17 / 2019

Transaction ID : SA11AI.48030

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

850.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 132 OF 350

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SCHWOEBEL, WILLI, , ,

Mailing Address 4111 MANORFIELD

City
CARMEL

State
ID

Zip Code
46032

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2019

Transaction ID : SA11AI.47468

Amount of Each Receipt this Period

65.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SEARS, MARGARITA, , ,

Mailing Address P.O. BOX 1909

City
NEW YORK

State
NY

Zip Code
10024

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
THEATRE PRODUCER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2019

Transaction ID : SA11AI.49562

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SENKBEIL, KURT, , ,

Mailing Address 25980 MONROE STREET

City
ESPARTO

State
CA

Zip Code
95627

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2019

Transaction ID : SA11AI.48418

Amount of Each Receipt this Period

45.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

210.00

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 133 OF 350

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SENKBEIL, KURT, , ,

Mailing Address 25980 MONROE STREET

City
ESPARTO

State
CA

Zip Code
95627

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 06 / 2019

Transaction ID : SA11AI.47298

Amount of Each Receipt this Period

45.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SHANNON, KATHLEEN, , ,

Mailing Address 45 SUTTON SQUARE SW

City
WASHINGTON

State
DC

Zip Code
20024

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UNITED STATES GOVERNMENT

Occupation (for Individual)
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2019

Transaction ID : SA11AI.47803

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SHEPHERD, ERMA, , ,

Mailing Address 2455ROHNERVILLE RD.

City
FORTUNA

State
CA

Zip Code
95540

FEC ID number of contributing
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 / D D / Y Y Y Y Y Y
01 / 20 / 2019

Transaction ID : SA11AI.63045

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1295.00

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 134 OF 350

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SHOLES, RON, , ,

Mailing Address 1000 RIVER MIST BEND

City
PALATKA

State
FL

Zip Code
32177

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
LEGAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 04 / 2019

Transaction ID : SA11AI.71118

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SMITH, JAMES, , ,

Mailing Address 3253 HUMMEL RD.

City
SHELBY

State
OH

Zip Code
44875

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 24 / 2019

Transaction ID : SA11AI.53452

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SMITH, JAMES, , ,

Mailing Address 3253 HUMMEL RD.

City
SHELBY

State
OH

Zip Code
44875

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

236.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 16 / 2019

Transaction ID : SA11AI.51753

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

320.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 135 OF 350

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SMITH, JAMES, , ,

Mailing Address 3253 HUMMEL RD.

City
SHELBY

State
OH

Zip Code
44875

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

271.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 22 / 2019

Transaction ID : SA11AI.51526

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SMITH, JAMES, , ,

Mailing Address 3253 HUMMEL RD.

City
SHELBY

State
OH

Zip Code
44875

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 05 / 2019

Transaction ID : SA11AI.50130

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SMITH, JAMES, , ,

Mailing Address 3253 HUMMEL RD.

City
SHELBY

State
OH

Zip Code
44875

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

331.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 19 / 2019

Transaction ID : SA11AI.49181

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

95.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 136 OF 350

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SMITH, JAMES, , ,

Mailing Address 3253 HUMMEL RD.

City
SHELBY

State
OH

Zip Code
44875

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 19 / 2019

Transaction ID : SA11AI.49182

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SMITH, JAMES, , ,

Mailing Address 3253 HUMMEL RD.

City
SHELBY

State
OH

Zip Code
44875

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

391.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 22 / 2019

Transaction ID : SA11AI.49106

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SMITH, JAMES, , ,

Mailing Address 3253 HUMMEL RD.

City
SHELBY

State
OH

Zip Code
44875

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

416.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 25 / 2019

Transaction ID : SA11AI.48976

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

85.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 137 OF 350

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SMITH, JAMES, , ,

Mailing Address 3253 HUMMEL RD.

City
SHELBY

State
OH

Zip Code
44875

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

441.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 29 / 2019

Transaction ID : SA11AI.48844

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SMITH, JAMES, , ,

Mailing Address 3253 HUMMEL RD.

City
SHELBY

State
OH

Zip Code
44875

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

446.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 30 / 2019

Transaction ID : SA11AI.48686

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SMITH, JAMES, , ,

Mailing Address 3253 HUMMEL RD.

City
SHELBY

State
OH

Zip Code
44875

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

481.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 16 / 2019

Transaction ID : SA11AI.48118

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

65.00

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 138 OF 350

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SMITH, JAMES, , ,

Mailing Address 3253 HUMMEL RD.

City
SHELBY

State
OH

Zip Code
44875

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

516.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 19 / 2019

Transaction ID : SA11AI.47968

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SMITH, JAMES, , ,

Mailing Address 3253 HUMMEL RD.

City
SHELBY

State
OH

Zip Code
44875

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

551.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 16 / 2019

Transaction ID : SA11AI.46724

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SMITH, JAMES, , ,

Mailing Address 3253 HUMMEL RD.

City
SHELBY

State
OH

Zip Code
44875

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

586.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 19 / 2019

Transaction ID : SA11AI.45826

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

105.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 139 OF 350

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SMITH, KENNETH, , ,

Mailing Address 1912 CHESTNUT DR

City
PAMPA

State
TX

Zip Code
79065

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 12 / 2019

Transaction ID : SA11AI.47165

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SMITH, KENNETH, , ,

Mailing Address 1912 CHESTNUT DR

City
PAMPA

State
TX

Zip Code
79065

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 22 / 2019

Transaction ID : SA11AI.45416

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SMITH, LEE, , ,

Mailing Address 411 MORRISON FARM RD

City
TROUTMAN

State
NC

Zip Code
28166-7693

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RL SMITH INC.

Occupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 18 / 2019

Transaction ID : SA11AI.65599

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 140 OF 350

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SMITH, LEE, , ,

Mailing Address 411 MORRISON FARM RD

City
TROUTMAN

State
NC

Zip Code
28166-7693

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RL SMITH INC.

Occupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2019

Transaction ID : SA11AI.53003

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SMITH, THOMAS, W., ,

Mailing Address 2200 BUTTS RD, SUITE 320

City
BOCA RATON

State
FL

Zip Code
33431

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PRESCOTT INVESTORS, INC.

Occupation (for Individual)
INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 26 / 2019

Transaction ID : SA11AI.45375

Amount of Each Receipt this Period

50000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STALNAKER, DAVID, , ,

Mailing Address 2936 STANFORD AVE.

City
DALLAS

State
TX

Zip Code
75225

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SYMMETRY CAPITAL ADVISORS LLC

Occupation (for Individual)
WEALTH MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 03 / 2019

Transaction ID : SA11AI.48531

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

51100.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 141 OF 350
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STEWART, EVELYN, SUE, ,

Mailing Address 205 MAHOGANY DRIVE

City
SEFFNERState
FLZip Code
33584FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M	D D	Y Y Y Y
06	04	2019

Transaction ID : SA11AI.47368

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ST GEORGE, DEBRA, , ,Mailing Address 13335 WATERTOWN PLANK RD
APT 318City
ELM GROVEState
WIZip Code
53122-2223FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BADGER BLDG MAINTOccupation (for Individual)
EXEC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M	D D	Y Y Y Y
06	04	2019

Transaction ID : SA11AI.47361

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STITZER, MARK, , ,

Mailing Address 290 ROUNDHILL RD.

City
GREENWICHState
CTZip Code
06831FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HAMLIN CAPITAL MANAGEMENT, LLCOccupation (for Individual)
FINANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

125000.00

Date of Receipt

M M	D D	Y Y Y Y
06	18	2019

Transaction ID : SA11AI.46539

Amount of Each Receipt this Period

125000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

125070.00

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 142 OF 350

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STOCKER, RONALD, C, ,

Mailing Address 110 URQUHART RD

City
CHEHALIS

State
WA

Zip Code
98532-8909

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 27 / 2019

Transaction ID : SA11AI.47641

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STOCKER, RONALD, C, ,

Mailing Address 110 URQUHART RD

City
CHEHALIS

State
WA

Zip Code
98532-8909

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 27 / 2019

Transaction ID : SA11AI.45321

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SUN, SALLY, , ,

Mailing Address 3047 W PEMBROOK LOOP

City
FRESNO

State
CA

Zip Code
93711

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 25 / 2019

Transaction ID : SA11AI.53473

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 143 OF 350

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SUN, SALLY, , ,

Mailing Address 3047 W PEMBROOK LOOP

City
FRESNO

State
CA

Zip Code
93711

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 25 / 2019

Transaction ID : SA11AI.51406

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SUN, SALLY, , ,

Mailing Address 3047 W PEMBROOK LOOP

City
FRESNO

State
CA

Zip Code
93711

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 25 / 2019

Transaction ID : SA11AI.48967

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SUN, SALLY, , ,

Mailing Address 3047 W PEMBROOK LOOP

City
FRESNO

State
CA

Zip Code
93711

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 25 / 2019

Transaction ID : SA11AI.47647

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 144 OF 350

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SZUSTER, DAVID, , ,

Mailing Address 11 STATION ROAD

City
GREAT NECK

State
NY

Zip Code
11023

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DAVID SZUSTER PSYCHIATRY PC

Occupation (for Individual)
MD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 03 / 2019

Transaction ID : SA11AI.47414

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TABANKIN, HOWARD, , ,

Mailing Address 10829 BROADVIEW BAY PT

City
BOYNTON BEACH

State
FL

Zip Code
33473-4904

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2019

Transaction ID : SA11AI.50426

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TABANKIN, HOWARD, , ,

Mailing Address 10829 BROADVIEW BAY PT

City
BOYNTON BEACH

State
FL

Zip Code
33473-4904

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 19 / 2019

Transaction ID : SA11AI.45863

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

235.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 145 OF 350

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. THEODORE, MICHAEL, , , JR.

Mailing Address 11825 SYCAMORE DR

City
PLYMOUTH

State
MI

Zip Code
48170-4491

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HANON SYSTEMS USA LLC

Occupation (for Individual)
MECHANICAL ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 06 / 2019

Transaction ID : SA11AI.58359

Amount of Each Receipt this Period

45.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. THEODORE, MICHAEL, , , JR.

Mailing Address 11825 SYCAMORE DR

City
PLYMOUTH

State
MI

Zip Code
48170-4491

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HANON SYSTEMS USA LLC

Occupation (for Individual)
MECHANICAL ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 23 / 2019

Transaction ID : SA11AI.51368

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. THORNBERRY, DAVID, , ,

Mailing Address P.O. BOX 469

City
NEW WAVERLY

State
TX

Zip Code
77358

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
RANCHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 15 / 2019

Transaction ID : SA11AI.68398

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

395.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 146 OF 350

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TOCCO, JESSICA, , ,

Mailing Address 20 EDGEMERE STREET

City
MELROSE

State
MA

Zip Code
02176

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
A10 ASSOCIATES

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 13 / 2019

Transaction ID : SA11AI.52144

Amount of Each Receipt this Period

55000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TREZEVANT, JOHN, , ,

Mailing Address 9063 CORPORATE GARDENS DRIVE

City
GERMANTOWN

State
TN

Zip Code
38138

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TREZEVANT REALTY CORPORATION

Occupation (for Individual)
REAL ESTATE DEVELOPER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 13 / 2019

Transaction ID : SA11AI.57547

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TRUONG, HUGH, , ,

Mailing Address 2228 67TH STREET

City
GALVESTON

State
TX

Zip Code
77551

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 17 / 2019

Transaction ID : SA11AI.46654

Amount of Each Receipt this Period

150.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55650.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 147 OF 350

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TUDOR, MARIN, , ,

Mailing Address 18 MOORE RD

City
BRONXVILLE

State
NY

Zip Code
10708

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 14 / 2019

Transaction ID : SA11AI.48180

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. UIHLEIN, ELIZABETH, A, ,

Mailing Address 1396 N WAUKEGAN RD

City
LAKE FOREST

State
IL

Zip Code
60045-1147

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ULINE

Occupation (for Individual)
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 22 / 2019

Transaction ID : SA11AI.51680

Amount of Each Receipt this Period

500000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. UIHLEIN, RICHARD, , ,

Mailing Address 12575 ULINE DR

City
PLEASANT PRAIRIE

State
WI

Zip Code
53158

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ULINE

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 21 / 2019

Transaction ID : SA11AI.51682

Amount of Each Receipt this Period

500000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1000100.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 148 OF 350
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VER STEEG, KYLE, , ,

Mailing Address 5318 LAKEVIEW DR.

City
CLEAR LAKEState
IAZip Code
50428FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
GENERAL SURGEON

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	28	/	2019

Transaction ID : SA11AI.59873

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VER STEEG, KYLE, , ,

Mailing Address 5318 LAKEVIEW DR.

City
CLEAR LAKEState
IAZip Code
50428FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
GENERAL SURGEON

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	24	/	2019

Transaction ID : SA11AI.53506

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VITAL PHARMACEUTICALS, INC

Mailing Address 1600 N PARK DR

City
WESTONState
FLZip Code
33326-3278FEC 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 ▼

250000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	15	/	2019

Transaction ID : SA11AI.52048

Amount of Each Receipt this Period

250000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

250350.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 149 OF 350

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VORWERK, FRED, , ,

Mailing Address 1103 6TH AVE

City
NEPTUNE

State
NJ

Zip Code
07753-5149

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 11 / 2019

Transaction ID : SA11AI.49574

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WARRIX, LORA, , ,

Mailing Address 4500 FRANKLIN PIKE

City
NASHVILLE

State
TN

Zip Code
37204-4413

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 28 / 2019

Transaction ID : SA11AI.59804

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WARRIX, LORA, , ,

Mailing Address 4500 FRANKLIN PIKE

City
NASHVILLE

State
TN

Zip Code
37204-4413

FEC ID number of contributing
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 / D D / Y Y Y Y Y Y
02 / 28 / 2019

Transaction ID : SA11AI.52988

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1050.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 150 OF 350

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WARRIX, LORA, , ,

Mailing Address 4500 FRANKLIN PIKE

City
NASHVILLE

State
TN

Zip Code
37204-4413

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 28 / 2019

Transaction ID : SA11AI.51181

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WEBB, JEAN, , ,

Mailing Address 304 PARRY DRIVE

City
MOORESTOWN

State
NJ

Zip Code
08057

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 09 / 2019

Transaction ID : SA11AI.52219

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WEEDA, VITO, , ,

Mailing Address 7401 CASTLE PINES LN.

City
WEST CHESTER

State
OH

Zip Code
45069

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 03 / 2019

Transaction ID : SA11AI.71235

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1100.00

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 151 OF 350

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WETZEL, JIM, , ,

Mailing Address 5500 INVERARY DR

City
EDMOND

State
OK

Zip Code
73025-2722

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 14 / 2019

Transaction ID : SA11AI.55800

Amount of Each Receipt this Period

45.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WHITESIDE, BRET, , ,

Mailing Address 3048 VALLEY OF HEARTS DELIGHT PL

City
SAN JOSE

State
CA

Zip Code
95136

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
ENGINEERING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 29 / 2019

Transaction ID : SA11AI.51113

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WHITESIDE, BRET, , ,

Mailing Address 3048 VALLEY OF HEARTS DELIGHT PL

City
SAN JOSE

State
CA

Zip Code
95136

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
ENGINEERING

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 29 / 2019

Transaction ID : SA11AI.48780

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

245.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 152 OF 350

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WHITESIDE, BRET, , ,

Mailing Address 3048 VALLEY OF HEARTS DELIGHT PL

City
SAN JOSE

State
CA

Zip Code
95136

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
ENGINEERING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 29 / 2019

Transaction ID : SA11AI.47604

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WHITESIDE, BRET, , ,

Mailing Address 3048 VALLEY OF HEARTS DELIGHT PL

City
SAN JOSE

State
CA

Zip Code
95136

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
ENGINEERING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 29 / 2019

Transaction ID : SA11AI.45098

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WHITMAN, GERALD, , ,

Mailing Address 3708 ELGIN STREET

City
METAIRIE

State
LA

Zip Code
70001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 19 / 2019

Transaction ID : SA11AI.45777

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

450.00

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 153 OF 350

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WILLIAMSON, VICTORIA, , ,

Mailing Address 517 LAS FUENTES DR

City

SANTA BARBARA

State

CA

Zip Code

93108

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 24 / 2019

Transaction ID : SA11AI.60859

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WILLMON, ALLAN, , ,

Mailing Address PO BOX 32007

City

MYRTLE BEACH

State

SC

Zip Code

29588-0034

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 18 / 2019

Transaction ID : SA11AI.47922

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WITKIN, JACK, , ,

Mailing Address 1535 HIGH ST

City

BOULDER

State

CO

Zip Code

80304

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 03 / 2019

Transaction ID : SA11AI.48498

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

400.00

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 154 OF 350

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WITTS, DEBRA, , ,

Mailing Address PO BOX 26

City
FORSYTH

State
IL

Zip Code
62535

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COMPUTER WITS CONSULTING, LLC

Occupation (for Individual)
SOFTWARE APPLICATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 19 / 2019

Transaction ID : SA11AI.45786

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WOLD, ELAINE, J, ,

Mailing Address 1515 S FEDERAL HWY STE 201

City
BOCA RATON

State
FL

Zip Code
33432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 08 / 2019

Transaction ID : SA11AI.49987

Amount of Each Receipt this Period

250000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WOLD, KEITH, , ,

Mailing Address 1515 S. FEDERAL HIGHWAY STE. 201

City
BOCA RATON

State
FL

Zip Code
33432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
ATTORNEY/INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 10 / 2019

Transaction ID : SA11AI.49985

Amount of Each Receipt this Period

250000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

500250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 155 OF 350

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WRIGHT, STEPHEN, , ,

Mailing Address 3132 EL CAMINO RD

City
LAS VEGAS

State
NV

Zip Code
89146

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ACCREDITO HEALTH

Occupation (for Individual)
PHARMACIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 30 / 2019

Transaction ID : SA11AI.47528

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WRIGHT, STEPHEN, , ,

Mailing Address 3132 EL CAMINO RD

City
LAS VEGAS

State
NV

Zip Code
89146

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ACCREDITO HEALTH

Occupation (for Individual)
PHARMACIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : SA11AI.45120

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

50.00

8554320.98

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 156 OF 350
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. AMERICA FIRST POLICIES INC

Mailing Address 1400 CRYSTAL DRIVE
STE 850

City
ARLINGTON

State
VA

Zip Code
22202

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 ▼

208.21

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 29 / 2019

Transaction ID : SA15.59949

Amount of Each Receipt this Period

208.21

☐ Memo Item

OFFSET: TRAVEL: AIR

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CONVERGENCE MEDIA

Mailing Address 1010 N. FAIRFAX ST. STE 250

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 ▼

2618.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 13 / 2019

Transaction ID : SA15.57981

Amount of Each Receipt this Period

2618.20

☐ Memo Item

VENDOR REFUND - OVERPAYMENT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2826.41

2826.41

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 157 OF 350

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE

City
MCLEAN

State
VA

Zip Code
22101

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

519.34

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 31 / 2019

Transaction ID : SA17.59758

Amount of Each Receipt this Period

519.34

☐ Memo Item
INTEREST

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE

City
MCLEAN

State
VA

Zip Code
22101

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

988.87

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2019

Transaction ID : SA17.53371

Amount of Each Receipt this Period

469.53

☐ Memo Item
INTEREST

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE

City
MCLEAN

State
VA

Zip Code
22101

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2957.99

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2019

Transaction ID : SA17.51229

Amount of Each Receipt this Period

1969.12

☐ Memo Item
INTEREST

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2957.99

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 158 OF 350

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE

City
MCLEAN

State
VA

Zip Code
22101

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8327.92

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2019

Transaction ID : SA17.48941

Amount of Each Receipt this Period

5369.93

☐ Memo Item

INTEREST

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE

City
MCLEAN

State
VA

Zip Code
22101

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

14806.74

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2019

Transaction ID : SA17.47599

Amount of Each Receipt this Period

6478.82

☐ Memo Item

INTEREST

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE

City
MCLEAN

State
VA

Zip Code
22101

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

15481.74

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 31 / 2019

Transaction ID : SA17.47600

Amount of Each Receipt this Period

675.00

☐ Memo Item

INTEREST

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

12523.75

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 159 OF 350
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE

City
MCLEAN

State
VA

Zip Code
22101

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

17170.37

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : SA17.45331

Amount of Each Receipt this Period

1688.63

☐ Memo Item
INTEREST

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE

City
MCLEAN

State
VA

Zip Code
22101

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

23995.65

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : SA17.45332

Amount of Each Receipt this Period

6825.28

☐ Memo Item
INTEREST

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

8513.91

23995.65

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 160 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. 1ST BANKCARDMailing Address COMMERCIAL CARD PAYMENT PROCESSING
P.O. BOX 2818City
OMAHAState
NEZip Code
68103-2818Purpose of Disbursement
CREDIT CARD PAYMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	2			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44473**

Amount of Each Disbursement this Period

 2959.93☐ Memo Item

Full Name (Last, First, Middle Initial)

B. 1ST BANKCARDMailing Address COMMERCIAL CARD PAYMENT PROCESSING
P.O. BOX 2818City
OMAHAState
NEZip Code
68103-2818Purpose of Disbursement
CREDIT CARD PAYMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	8			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44474**

Amount of Each Disbursement this Period

 11829.86☐ Memo Item

Full Name (Last, First, Middle Initial)

C. 1ST BANKCARDMailing Address COMMERCIAL CARD PAYMENT PROCESSING
P.O. BOX 2818City
OMAHAState
NEZip Code
68103-2818Purpose of Disbursement
CREDIT CARD PAYMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	1			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44475**

Amount of Each Disbursement this Period

 53.02☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶ 14842.81

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 161 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. 1ST BANKCARDMailing Address **COMMERCIAL CARD PAYMENT PROCESSING**
P.O. BOX 2818City
OMAHAState
NEZip Code
68103-2818Purpose of Disbursement
CREDIT CARD PAYMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		01		2019

FEC Identification Number

C **Transaction ID : SB21B.44476**

Amount of Each Disbursement this Period

 175.00☐ Memo Item

Full Name (Last, First, Middle Initial)

B. 1ST BANKCARDMailing Address **COMMERCIAL CARD PAYMENT PROCESSING**
P.O. BOX 2818City
OMAHAState
NEZip Code
68103-2818Purpose of Disbursement
CREDIT CARD PAYMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify)Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		08		2019

FEC Identification Number

C **Transaction ID : SB21B.44477**

Amount of Each Disbursement this Period

 2387.77☐ Memo Item

Full Name (Last, First, Middle Initial)

C. 1ST BANKCARDMailing Address **COMMERCIAL CARD PAYMENT PROCESSING**
P.O. BOX 2818City
OMAHAState
NEZip Code
68103-2818Purpose of Disbursement
CREDIT CARD PAYMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		12		2019

FEC Identification Number

C **Transaction ID : SB21B.44478**

Amount of Each Disbursement this Period

 205.14☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 2767.91

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 162 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. 1ST BANKCARDMailing Address **COMMERCIAL CARD PAYMENT PROCESSING
P.O. BOX 2818**City
OMAHAState
NEZip Code
68103-2818Purpose of Disbursement
CREDIT CARD PAYMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	2			2	0	1	9		

FEC Identification Number

C Transaction ID : **SB21B.44479**

Amount of Each Disbursement this Period

291.86

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. 1ST BANKCARDMailing Address **COMMERCIAL CARD PAYMENT PROCESSING
P.O. BOX 2818**City
OMAHAState
NEZip Code
68103-2818Purpose of Disbursement
CREDIT CARD PAYMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify)Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	7			2	0	1	9		

FEC Identification Number

C Transaction ID : **SB21B.44480**

Amount of Each Disbursement this Period

1518.72

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. 1ST BANKCARDMailing Address **COMMERCIAL CARD PAYMENT PROCESSING
P.O. BOX 2818**City
OMAHAState
NEZip Code
68103-2818Purpose of Disbursement
CREDIT CARD PAYMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	2			2	0	1	9		

FEC Identification Number

C Transaction ID : **SB21B.44481**

Amount of Each Disbursement this Period

9121.02

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

10931.60

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 163 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. 1ST BANKCARDMailing Address **COMMERCIAL CARD PAYMENT PROCESSING
P.O. BOX 2818**City
OMAHAState
NEZip Code
68103-2818Purpose of Disbursement
CREDIT CARD PAYMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		01		2019

FEC Identification Number

C Transaction ID : **SB21B.44482**

Amount of Each Disbursement this Period

4993.78

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. 1ST BANKCARDMailing Address **COMMERCIAL CARD PAYMENT PROCESSING
P.O. BOX 2818**City
OMAHAState
NEZip Code
68103-2818Purpose of Disbursement
CREDIT CARD PAYMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify)Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		26		2019

FEC Identification Number

C Transaction ID : **SB21B.44483**

Amount of Each Disbursement this Period

2759.43

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. 1ST BANKCARDMailing Address **COMMERCIAL CARD PAYMENT PROCESSING
P.O. BOX 2818**City
OMAHAState
NEZip Code
68103-2818Purpose of Disbursement
CREDIT CARD PAYMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		30		2019

FEC Identification Number

C Transaction ID : **SB21B.44484**

Amount of Each Disbursement this Period

472.30

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

8225.51

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 164 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. 1ST BANKCARDMailing Address COMMERCIAL CARD PAYMENT PROCESSING
P.O. BOX 2818City
OMAHAState
NEZip Code
68103-2818Purpose of Disbursement
CREDIT CARD PAYMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	17	/	2019

FEC Identification Number

C Transaction ID : SB21B.44485

Amount of Each Disbursement this Period

14749.86

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. 1ST BANKCARDMailing Address COMMERCIAL CARD PAYMENT PROCESSING
P.O. BOX 2818City
OMAHAState
NEZip Code
68103-2818Purpose of Disbursement
CREDIT CARD PAYMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify)Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	29	/	2019

FEC Identification Number

C Transaction ID : SB21B.44486

Amount of Each Disbursement this Period

2438.41

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. 1ST BANKCARDMailing Address COMMERCIAL CARD PAYMENT PROCESSING
P.O. BOX 2818City
OMAHAState
NEZip Code
68103-2818Purpose of Disbursement
CREDIT CARD PAYMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	13	/	2019

FEC Identification Number

C Transaction ID : SB21B.44487

Amount of Each Disbursement this Period

10141.31

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

27329.58

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 165 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. AHEARN, JOSEPH, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		17		2019

Mailing Address C/O AMERICA FIRST ACTION INC
1400 CRYSTAL DRIVE STE 850City
ARLINGTONState
VAZip Code
22202Purpose of Disbursement
REIMBURSEMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.44415**

Amount of Each Disbursement this Period

2025.88

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. AHEARN, JOSEPH, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		19		2019

Mailing Address C/O AMERICA FIRST ACTION INC
1400 CRYSTAL DRIVE STE 850City
ARLINGTONState
VAZip Code
22202Purpose of Disbursement
REIMBURSEMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.44416**

Amount of Each Disbursement this Period

3762.86

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. AIRPORT SEDAN SERVICE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		05		2018

Mailing Address P.O BOX 166115

City
IRVINGState
TXZip Code
75016Purpose of Disbursement
REIMBURSEMENT [SB21B.44424]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.44842**

Amount of Each Disbursement this Period

90.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5788.74

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 166 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. AIRPORT SEDAN SERVICE

Mailing Address P.O BOX 166115

City
IRVINGState
TXZip Code
75016Purpose of Disbursement
REIMBURSEMENT [SB21B.44425]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	7			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44843**

Amount of Each Disbursement this Period

45.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. AIRPORT SEDAN SERVICE

Mailing Address P.O BOX 166115

City
IRVINGState
TXZip Code
75016Purpose of Disbursement
REIMBURSEMENT [SB21B.44425]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	9			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44846**

Amount of Each Disbursement this Period

45.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. AIRPORT SEDAN SERVICE

Mailing Address P.O BOX 166115

City
IRVINGState
TXZip Code
75016Purpose of Disbursement
REIMBURSEMENT [SB21B.44425]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			3	1			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44847**

Amount of Each Disbursement this Period

45.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 167 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. AIRPORT SEDAN SERVICE

Mailing Address P.O BOX 166115

City
IRVINGState
TXZip Code
75016Purpose of Disbursement
REIMBURSEMENT [SB21B.44425]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	4			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44844**

Amount of Each Disbursement this Period

45.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. AIRPORT SEDAN SERVICE

Mailing Address P.O BOX 166115

City
IRVINGState
TXZip Code
75016Purpose of Disbursement
REIMBURSEMENT [SB21B.44425]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	7			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44845**

Amount of Each Disbursement this Period

45.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. AIRPORT SEDAN SERVICE

Mailing Address P.O BOX 166115

City
IRVINGState
TXZip Code
75016Purpose of Disbursement
REIMBURSEMENT [SB21B.44426]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	6			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44846**

Amount of Each Disbursement this Period

90.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 168 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. AIRPORT SEDAN SERVICE

Mailing Address P.O BOX 166115

City
IRVINGState
TXZip Code
75016Purpose of Disbursement
REIMBURSEMENT [SB21B.44426]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		07		2019

FEC Identification Number

C Transaction ID : SB21B.44848

Amount of Each Disbursement this Period

90.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. ALLIANZ TRAVEL INSURANCE

Mailing Address 9950 MAYLAND DR

City
RICHMONDState
VAZip Code
23233Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44482]: TRAVEL: INSURANCE
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		21		2019

FEC Identification Number

C Transaction ID : SB21B.44729

Amount of Each Disbursement this Period

71.36

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. AMAZON

Mailing Address 410 TERRY AVE

City
NORTH SEATTLEState
WAZip Code
98109Purpose of Disbursement
REIMBURSEMENT [SB21B.44401]: OFFICE SUPPLIES
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		03		2019

FEC Identification Number

C Transaction ID : SB21B.45030

Amount of Each Disbursement this Period

56.93

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 169 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. AMERICA FIRST POLICIES, INC.

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			3	0			2	0	1	9		

Mailing Address 1400 CRYSTAL DRIVE
SUITE 850City
ARLINGTONState
VAZip Code
22202Purpose of Disbursement
IN-KIND: PAYROLL / OFFICE EXPENSES

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.71472**

Amount of Each Disbursement this Period

195626.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN AIRLINES

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	4			2	0	1	8		

Mailing Address 4333 AMON CARTER BLVD

City
FORT WORTHState
TXZip Code
76155Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: AIR

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.44859**

Amount of Each Disbursement this Period

85.43

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN AIRLINES

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			0	5			2	0	1	8		

Mailing Address 4333 AMON CARTER BLVD

City
FORT WORTHState
TXZip Code
76155Purpose of Disbursement
REIMBURSEMENT [SB21B.44424]: TRAVEL: AIR

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.44862**

Amount of Each Disbursement this Period

364.20

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

195626.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 170 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BLVD

City
FORT WORTHState
TXZip Code
76155Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44473]: TRAVEL: AIR

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President
 State: District:

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼
Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				24				2018					

FEC Identification Number

C**Transaction ID : SB21B.44647**

Amount of Each Disbursement this Period

208.21

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BLVD

City
FORT WORTHState
TXZip Code
76155Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44473]: TRAVEL: AIR

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President
 State: District:

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼
Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				24				2018					

FEC Identification Number

C**Transaction ID : SB21B.44648**

Amount of Each Disbursement this Period

208.21

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BLVD

City
FORT WORTHState
TXZip Code
76155Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44474]: TRAVEL: AIR

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President
 State: District:

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼
Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				29				2018					

FEC Identification Number

C**Transaction ID : SB21B.44665**

Amount of Each Disbursement this Period

31.06

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 171 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BLVD

City
FORT WORTHState
TXZip Code
76155Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44474]: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		29		2018

FEC Identification Number

C**Transaction ID : SB21B.44666**

Amount of Each Disbursement this Period

31.06

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BLVD

City
FORT WORTHState
TXZip Code
76155Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44474]: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		29		2018

FEC Identification Number

C**Transaction ID : SB21B.44667**

Amount of Each Disbursement this Period

811.50

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BLVD

City
FORT WORTHState
TXZip Code
76155Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44474]: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		29		2018

FEC Identification Number

C**Transaction ID : SB21B.44668**

Amount of Each Disbursement this Period

811.50

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 172 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BLVD

City
FORT WORTHState
TXZip Code
76155Purpose of Disbursement
REIMBURSEMENT [SB21B.44418]: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	1			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44861**

Amount of Each Disbursement this Period

 353.30☒ Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BLVD

City
FORT WORTHState
TXZip Code
76155Purpose of Disbursement
REIMBURSEMENT [SB21B.44425]: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	7			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44863**

Amount of Each Disbursement this Period

 362.15☒ Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BLVD

City
FORT WORTHState
TXZip Code
76155Purpose of Disbursement
REIMBURSEMENT [SB21B.44425]: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	9			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44866**

Amount of Each Disbursement this Period

 200.80☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 173 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BLVD

City
FORT WORTHState
TXZip Code
76155Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44477]: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			3	1			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44681**

Amount of Each Disbursement this Period

 1160.60☒ Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BLVD

City
FORT WORTHState
TXZip Code
76155Purpose of Disbursement
REIMBURSEMENT [SB21B.44425]: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			3	1			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44867**

Amount of Each Disbursement this Period

 362.15☒ Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BLVD

City
FORT WORTHState
TXZip Code
76155Purpose of Disbursement
REIMBURSEMENT [SB21B.44425]: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	4			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44864**

Amount of Each Disbursement this Period

 242.15☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 174 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BLVD

City
FORT WORTHState
TXZip Code
76155Purpose of Disbursement
REIMBURSEMENT [SB21B.44425]: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		07		2019

FEC Identification Number

C **Transaction ID : SB21B.44865**

Amount of Each Disbursement this Period

 362.15☒ Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BLVD

City
FORT WORTHState
TXZip Code
76155Purpose of Disbursement
REIMBURSEMENT [SB21B.44416]: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		06		2019

FEC Identification Number

C **Transaction ID : SB21B.44860**

Amount of Each Disbursement this Period

 490.30☒ Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BLVD

City
FORT WORTHState
TXZip Code
76155Purpose of Disbursement
REIMBURSEMENT [SB21B.44426]: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		11		2019

FEC Identification Number

C **Transaction ID : SB21B.44866**

Amount of Each Disbursement this Period

 663.30☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶ 0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 175 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BLVD

City
FORT WORTHState
TXZip Code
76155Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44481]: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		13		2019

FEC Identification Number

C**Transaction ID : SB21B.44699**

Amount of Each Disbursement this Period

376.30

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BLVD

City
FORT WORTHState
TXZip Code
76155Purpose of Disbursement
REIMBURSEMENT [SB21B.44406]: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		13		2019

FEC Identification Number

C**Transaction ID : SB21B.44857**

Amount of Each Disbursement this Period

120.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BLVD

City
FORT WORTHState
TXZip Code
76155Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44481]: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		18		2019

FEC Identification Number

C**Transaction ID : SB21B.44702**

Amount of Each Disbursement this Period

36.96

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 176 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BLVD

City
FORT WORTHState
TXZip Code
76155Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44481]: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	8			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44703**

Amount of Each Disbursement this Period

308.30

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BLVD

City
FORT WORTHState
TXZip Code
76155Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44482]: CREDIT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	0			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44714**

Amount of Each Disbursement this Period

- 308.30

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BLVD

City
FORT WORTHState
TXZip Code
76155Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44482]: CREDIT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	0			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44715**

Amount of Each Disbursement this Period

- 36.96

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 177 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BLVD

City
FORT WORTHState
TXZip Code
76155Purpose of Disbursement
REIMBURSEMENT [SB21B.44406]: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		29		2019

FEC Identification Number

C**Transaction ID : SB21B.44856**

Amount of Each Disbursement this Period

308.30

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BLVD

City
FORT WORTHState
TXZip Code
76155Purpose of Disbursement
REIMBURSEMENT [SB21B.44407]: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		26		2019

FEC Identification Number

C**Transaction ID : SB21B.44858**

Amount of Each Disbursement this Period

394.30

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. AM STRATEGY GROUP

Mailing Address 4722 9TH STREET, NW

City
WASHINGTONState
DCZip Code
20011Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2019

FEC Identification Number

C**Transaction ID : SB21B.44634**

Amount of Each Disbursement this Period

11350.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

11350.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 178 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. AM STRATEGY GROUP

Mailing Address 4722 9TH STREET, NW

City
WASHINGTONState
DCZip Code
20011Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	1			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44635**

Amount of Each Disbursement this Period

112500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. AMTRAK

Mailing Address 60 MASSACHUSETTS AVE NE

City
WASHINGTONState
DCZip Code
20002Purpose of Disbursement
REIMBURSEMENT [SB21B.44424]: TRAVEL: RAIL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			0	6			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.44769**

Amount of Each Disbursement this Period

455.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. AMTRAK

Mailing Address 60 MASSACHUSETTS AVE NE

City
WASHINGTONState
DCZip Code
20002Purpose of Disbursement
REIMBURSEMENT [SB21B.44416]: TRAVEL: RAIL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	6			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44768**

Amount of Each Disbursement this Period

315.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

112500.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 179 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. AMTRAK

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	1	9		

Mailing Address 60 MASSACHUSETTS AVE NE

City
WASHINGTONState
DCZip Code
20002Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44486]: TRAVEL: RAIL

Candidate Name

Category/
TypeOffice 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:

FEC Identification Number

C**Transaction ID : SB21B.44748**

Amount of Each Disbursement this Period

156.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. AMTRAK

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	5			2	0	1	9		

Mailing Address 60 MASSACHUSETTS AVE NE

City
WASHINGTONState
DCZip Code
20002Purpose of Disbursement
REIMBURSEMENT [SB21B.44410]: TRAVEL: RAIL

Candidate Name

Category/
TypeOffice 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:

FEC Identification Number

C**Transaction ID : SB21B.44767**

Amount of Each Disbursement this Period

96.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. AMTRAK

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	6			2	0	1	9		

Mailing Address 60 MASSACHUSETTS AVE NE

City
WASHINGTONState
DCZip Code
20002Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44487]: TRAVEL: RAIL

Candidate Name

Category/
TypeOffice 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:

FEC Identification Number

C**Transaction ID : SB21B.44754**

Amount of Each Disbursement this Period

513.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 180 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. BAILEY, ROY, W, ,Mailing Address 5956 SHERRY LANE
SUITE 800City
DALLASState
TXZip Code
75225Purpose of Disbursement
REIMBURSEMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	5			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44424**

Amount of Each Disbursement this Period

1650.55

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BAILEY, ROY, W, ,Mailing Address 5956 SHERRY LANE
SUITE 800City
DALLASState
TXZip Code
75225Purpose of Disbursement
REIMBURSEMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	1			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44425**

Amount of Each Disbursement this Period

4216.76

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BAILEY, ROY, W, ,Mailing Address 5956 SHERRY LANE
SUITE 800City
DALLASState
TXZip Code
75225Purpose of Disbursement
REIMBURSEMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	3			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44426**

Amount of Each Disbursement this Period

2931.47

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

8798.78

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 181 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. BLAKEMORE & ASSOCIATES

Mailing Address 1 E GREENWAY PLAZA STE 225

City
HOUSTONState
TXZip Code
77046-0106Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		05		2019

FEC Identification Number

C **Transaction ID : SB21B.44491**

Amount of Each Disbursement this Period

 94500.00☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BLT PRIME

Mailing Address 1100 PENNSYLVANIA AVE NW

City
WASHINGTONState
DCZip Code
20004Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: MEETING EXPENSE: MEALS

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		04		2018

FEC Identification Number

C **Transaction ID : SB21B.44787**

Amount of Each Disbursement this Period

 98.50☒ Memo Item

Full Name (Last, First, Middle Initial)

C. BLT PRIME

Mailing Address 1100 PENNSYLVANIA AVE NW

City
WASHINGTONState
DCZip Code
20004Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: MEETING EXPENSE: MEALS

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		26		2018

FEC Identification Number

C **Transaction ID : SB21B.44788**

Amount of Each Disbursement this Period

 150.50☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 94500.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 182 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. BLT PRIME

Mailing Address 1100 PENNSYLVANIA AVE NW

City
WASHINGTONState
DCZip Code
20004Purpose of Disbursement
REIMBURSEMENT [SB21B.44418]: MEETING EXPENSE: MEALS

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	2			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44790**

Amount of Each Disbursement this Period

 158.30☒ Memo Item

Full Name (Last, First, Middle Initial)

B. BLT PRIME

Mailing Address 1100 PENNSYLVANIA AVE NW

City
WASHINGTONState
DCZip Code
20004Purpose of Disbursement
REIMBURSEMENT [SB21B.44416]: MEETING EXPENSE: MEALS

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	6			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44789**

Amount of Each Disbursement this Period

 218.50☒ Memo Item

Full Name (Last, First, Middle Initial)

C. BLT PRIME

Mailing Address 1100 PENNSYLVANIA AVE NW

City
WASHINGTONState
DCZip Code
20004Purpose of Disbursement
REIMBURSEMENT [SB21B.44425]: MEETING EXPENSE: MEALS

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			3	0			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44792**

Amount of Each Disbursement this Period

 167.50☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 183 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. BLT PRIME

Mailing Address 1100 PENNSYLVANIA AVE NW

City
WASHINGTONState
DCZip Code
20004Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44479]: EVENT EXPENSE: FACILITY
RENTAL AND CATERING SERVICES
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	5			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44684**

Amount of Each Disbursement this Period

109.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. BLT PRIME

Mailing Address 1032 LEXINGTON AVE

City
NEW YORKState
NYZip Code
10021Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44480]: EVENT EXPENSE: FACILITY
RENTAL AND CATERING SERVICES
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	5			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44688**

Amount of Each Disbursement this Period

1023.72

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. BLT PRIME

Mailing Address 1032 LEXINGTON AVE

City
NEW YORKState
NYZip Code
10021Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44481]: CREDIT: EVENT EXPENSE:
FACILITY RENTAL AND CATERING SERVICES
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	5			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44691**

Amount of Each Disbursement this Period

- 1023.72

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0	0	0	0	0	0	0	0	0	0	0	0	0	0

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 184 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. BLT PRIME

Mailing Address 1100 PENNSYLVANIA AVE NW

City
WASHINGTONState
DCZip Code
20004Purpose of Disbursement
REIMBURSEMENT [SB21B.44407]: MEETING EXPENSE: MEALS

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		24		2019

FEC Identification Number

C **Transaction ID : SB21B.44780**

Amount of Each Disbursement this Period

 310.30☒ Memo Item

Full Name (Last, First, Middle Initial)

B. BLT PRIME

Mailing Address 1100 PENNSYLVANIA AVE NW

City
WASHINGTONState
DCZip Code
20004Purpose of Disbursement
REIMBURSEMENT [SB21B.44407]: MEETING EXPENSE: MEALS

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		25		2019

FEC Identification Number

C **Transaction ID : SB21B.44781**

Amount of Each Disbursement this Period

 317.30☒ Memo Item

Full Name (Last, First, Middle Initial)

C. BLT PRIME

Mailing Address 1100 PENNSYLVANIA AVE NW

City
WASHINGTONState
DCZip Code
20004Purpose of Disbursement
REIMBURSEMENT [SB21B.44407]: MEETING EXPENSE: MEALS

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		26		2019

FEC Identification Number

C **Transaction ID : SB21B.44775**

Amount of Each Disbursement this Period

 79.00☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 185 OF 350

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. BLT PRIME

Mailing Address 1100 PENNSYLVANIA AVE NW

City
WASHINGTONState
DCZip Code
20004Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44486]: EVENT EXPENSE: FACILITY
RENTAL AND CATERING SERVICES
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44746**

Amount of Each Disbursement this Period

 119.00☒ Memo Item

Full Name (Last, First, Middle Initial)

B. BRITANNICA LTS

Mailing Address 12597 WESTHAMPTON CIR

City
WELLINGTONState
FLZip Code
33414Purpose of Disbursement
REIMBURSEMENT [SB21B.44426]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	7			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44817**

Amount of Each Disbursement this Period

 96.00☒ Memo Item

Full Name (Last, First, Middle Initial)

C. BRITANNICA LTS

Mailing Address 12597 WESTHAMPTON CIR

City
WELLINGTONState
FLZip Code
33414Purpose of Disbursement
REIMBURSEMENT [SB21B.44426]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	0			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44818**

Amount of Each Disbursement this Period

 96.00☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 186 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. BUDGET RENT A CAR

Mailing Address 6 SYLVAN WAY

City
PARSIPPANYState
NJZip Code
07054Purpose of Disbursement
REIMBURSEMENT [SB21B.44406]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2019

FEC Identification Number

C**Transaction ID : SB21B.44756**

Amount of Each Disbursement this Period

98.40

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. BUDGET RENT A CAR

Mailing Address 6 SYLVAN WAY

City
PARSIPPANYState
NJZip Code
07054Purpose of Disbursement
REIMBURSEMENT [SB21B.44407]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		09		2019

FEC Identification Number

C**Transaction ID : SB21B.44757**

Amount of Each Disbursement this Period

5.45

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. BULLDOG COMPLIANCEMailing Address 138 CONANT ST
2ND FLOORCity
BEVERLYState
MAZip Code
01915Purpose of Disbursement
COMPLIANCE CONSULTING
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		14		2019

FEC Identification Number

C**Transaction ID : SB21B.44466**

Amount of Each Disbursement this Period

3014.25

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3014.25

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 187 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. BULLDOG COMPLIANCEMailing Address 138 CONANT ST
2ND FLOORCity
BEVERLYState
MAZip Code
01915Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	6			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44467**

Amount of Each Disbursement this Period

3003.55

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BULLDOG COMPLIANCEMailing Address 138 CONANT ST
2ND FLOORCity
BEVERLYState
MAZip Code
01915Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	0			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44468**

Amount of Each Disbursement this Period

6002.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BULLDOG COMPLIANCEMailing Address 138 CONANT ST
2ND FLOORCity
BEVERLYState
MAZip Code
01915Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			3	0			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44469**

Amount of Each Disbursement this Period

3052.99

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

12059.04

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 188 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. BULLDOG COMPLIANCE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		10		2019

Mailing Address 138 CONANT ST
2ND FLOORCity
BEVERLYState
MAZip Code
01915Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.44470**

Amount of Each Disbursement this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CAFE BOULUD

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		07		2019

Mailing Address 301 AUSTRALIAN AVE

City
PALM BEACHState
FLZip Code
33480Purpose of Disbursement
REIMBURSEMENT [SB21B.44426]: MEETING EXPENSE: MEALS

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.44825**

Amount of Each Disbursement this Period

461.99

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. CAPITAL RESEARCH GROUP, LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		07		2019

Mailing Address 1101 K STREET, NW
SUITE 800City
WASHINGTONState
DCZip Code
20005Purpose of Disbursement
RESEARCH CONSULTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.44431**

Amount of Each Disbursement this Period

7500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

10500.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 189 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. CAPITOL HILL CLUB

Mailing Address 300 FIRST ST SE

City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
REIMBURSEMENT [SB21B.44403]: EVENT EXPENSE: FACILITY RENTAL
AND CATERING SERVICES
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			20			2018			

FEC Identification Number

C**Transaction ID : SB21B.44778**

Amount of Each Disbursement this Period

4353.08

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. CAR2GO N.A. LLC

Mailing Address 1717 W. 6TH STREET

City
AUSTINState
TXZip Code
78703Purpose of Disbursement
REIMBURSEMENT [SB21B.44401]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
01			07			2019			

FEC Identification Number

C**Transaction ID : SB21B.44870**

Amount of Each Disbursement this Period

26.71

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. CAR2GO N.A. LLC

Mailing Address 1717 W. 6TH STREET

City
AUSTINState
TXZip Code
78703Purpose of Disbursement
REIMBURSEMENT [SB21B.44401]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
01			07			2019			

FEC Identification Number

C**Transaction ID : SB21B.44871**

Amount of Each Disbursement this Period

22.05

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 190 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. CAR2GO N.A. LLC

Mailing Address 1717 W. 6TH STREET

City
AUSTINState
TXZip Code
78703Purpose of Disbursement
REIMBURSEMENT [SB21B.44401]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	9			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44872**

Amount of Each Disbursement this Period

22.05

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. CAREY INTERNATIONAL

Mailing Address 7445 NEW TECHNOLOGY WAY

City
FREDERICKState
MDZip Code
21703Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44482]: GROUND TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	7			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44716**

Amount of Each Disbursement this Period

269.82

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. CHAR BAR

Mailing Address 2142 L ST NW

City
WASHINGTONState
DCZip Code
20037Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44479]: MEETING EXPENSE: MEALS
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	5			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44688**

Amount of Each Disbursement this Period

158.40

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 191 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. CHARTERUP

Mailing Address 3340 PEACHTREE RD NE SUITE 100

City
ATLANTAState
GAZip Code
30326Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44481]: EVENT EXPENSE: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	4			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44693**

Amount of Each Disbursement this Period

139.50

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. CHICK-FIL-A

Mailing Address 1500 APALACHEE PKWY STE 1040

City
TALLAHASSEEState
FLZip Code
32301Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44474]: TRAVEL: MEALS
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	8			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44672**

Amount of Each Disbursement this Period

20.77

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. CHICK-FIL-A

Mailing Address 2200 CRYSTAL DR G

City
ARLINGTONState
VAZip Code
22202Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44474]: MEETING EXPENSE: MEALS
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	9			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44664**

Amount of Each Disbursement this Period

24.52

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 192 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. CHICK-FIL-A

Mailing Address 2200 CRYSTAL DR G

City
ARLINGTONState
VAZip Code
22202Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44485]: MEETING EXPENSE: MEALS

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	9			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44743**

Amount of Each Disbursement this Period

196.42

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. CHICK-FIL-A

Mailing Address 2200 CRYSTAL DR G

City
ARLINGTONState
VAZip Code
22202Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44487]: MEETING EXPENSE: MEALS

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	6			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44751**

Amount of Each Disbursement this Period

131.49

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. CHRISTOPHER KOJAIAN

Mailing Address 1901 CONNECTICUT AVE NW APT 614

City
WASHINGTONState
DCZip Code
20009Purpose of Disbursement
EVENT CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	8			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44431**

Amount of Each Disbursement this Period

342.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

342.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 193 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. COGENCY GLOBAL

Mailing Address 1025 VERMONT AVE, NW, STE 1130

City
WASHINGTONState
DCZip Code
20005Purpose of Disbursement
STATE REGISTRATION FILING FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			3	1			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44434**

Amount of Each Disbursement this Period

 261.00☐ Memo Item

Full Name (Last, First, Middle Initial)

B. COURTYARD BY MARRIOTT

Mailing Address 1018 APALACHEE PKWY

City
TALLAHASSEEState
FLZip Code
32301Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44474]: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	0			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44670**

Amount of Each Disbursement this Period

 595.35☒ Memo Item

Full Name (Last, First, Middle Initial)

C. COURTYARD BY MARRIOTT

Mailing Address 4620 SOUTH 5TH STREET

City
MILWAUKEEState
WIZip Code
53207Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44481]: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	5			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44711**

Amount of Each Disbursement this Period

 177.50☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

<input type="text"/>	261.00
<input type="text"/>	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 194 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. COURTYARD BY MARRIOTT

Mailing Address 4620 SOUTH 5TH STREET

City
MILWAUKEEState
WIZip Code
53207Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44481]: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	5			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44713**

Amount of Each Disbursement this Period

174.50

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. DCA REAGAN PARKING

Mailing Address 2400 S SMITH BLVD

City
ARLINGTONState
VAZip Code
22202Purpose of Disbursement
REIMBURSEMENT [SB21B.44407]: TRAVEL: PARKING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	1			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44807**

Amount of Each Disbursement this Period

25.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. DCA REAGAN PARKING

Mailing Address 2400 S SMITH BLVD

City
ARLINGTONState
VAZip Code
22202Purpose of Disbursement
REIMBURSEMENT [SB21B.44407]: TRAVEL: PARKING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	7			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44808**

Amount of Each Disbursement this Period

50.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0	0	0	0	0	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 195 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. DELTA AIRLINESMailing Address 1030 DELTA BLVD
SUITE 200City
ATLANTAState
GAZip Code
30354Purpose of Disbursement
REIMBURSEMENT [SB21B.44406]: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		29		2019

FEC Identification Number

C**Transaction ID : SB21B.44811**

Amount of Each Disbursement this Period

531.30

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. DELTA AIRLINESMailing Address 1030 DELTA BLVD
SUITE 200City
ATLANTAState
GAZip Code
30354Purpose of Disbursement
REIMBURSEMENT [SB21B.44406]: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		30		2019

FEC Identification Number

C**Transaction ID : SB21B.44809**

Amount of Each Disbursement this Period

19.99

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. DELTA AIRLINESMailing Address 1030 DELTA BLVD
SUITE 200City
ATLANTAState
GAZip Code
30354Purpose of Disbursement
REIMBURSEMENT [SB21B.44406]: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		30		2019

FEC Identification Number

C**Transaction ID : SB21B.44811**

Amount of Each Disbursement this Period

163.30

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 196 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. DELTA AIRLINESMailing Address 1030 DELTA BLVD
SUITE 200City
ATLANTAState
GAZip Code
30354Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44484]: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		23		2019

FEC Identification Number

C**Transaction ID : SB21B.44738**

Amount of Each Disbursement this Period

472.30

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. DOUG COULTER PHOTOGRAPHY

Mailing Address 1415 HORSESHOE CREEK LANE

City
CUMMINGState
GAZip Code
30041Purpose of Disbursement
EVENT EXPENSE: PHOTOGRAPHY SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		04		2019

FEC Identification Number

C**Transaction ID : SB21B.44488**

Amount of Each Disbursement this Period

3025.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. EDGE FLORAL EVENT DESIGNERS

Mailing Address 8517 MUSCATELLO CT

City
GAITHERSBURGState
MDZip Code
20877Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44477]: EVENT STAGING EXPENSE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		01		2019

FEC Identification Number

C**Transaction ID : SB21B.44675**

Amount of Each Disbursement this Period

1175.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3025.65

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 197 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. ENTERPRISE RENT-A-CAR

Mailing Address 600 CORPORATE PARK DR

City
ST. LOUISState
MOZip Code
63105Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44481]: GROUND TRANSPORTATION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3				1	1		2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44694**

Amount of Each Disbursement this Period

 376.31☒ Memo Item

Full Name (Last, First, Middle Initial)

B. ENTERPRISE RENT-A-CAR

Mailing Address 600 CORPORATE PARK DR

City
ST. LOUISState
MOZip Code
63105Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44483]: GROUND TRANSPORTATION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4				0	5		2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44732**

Amount of Each Disbursement this Period

 2177.55☒ Memo Item

Full Name (Last, First, Middle Initial)

C. ENTERPRISE RENT-A-CAR

Mailing Address 600 CORPORATE PARK DR

City
ST. LOUISState
MOZip Code
63105Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44483]: GROUND TRANSPORTATION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4				1	1		2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44733**

Amount of Each Disbursement this Period

 60.83☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 199 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. FEDERAL EXPRESS

Mailing Address 461 WINCHESTER RD

City
MEMPHISState
TNZip Code
38109Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44473]: DELIVERY SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				21				2018					

FEC Identification Number

C **Transaction ID : SB21B.44640**

Amount of Each Disbursement this Period

 15.83☒ Memo Item

Full Name (Last, First, Middle Initial)

B. FEDERAL EXPRESS

Mailing Address 461 WINCHESTER RD

City
MEMPHISState
TNZip Code
38109Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44473]: DELIVERY SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				24				2018					

FEC Identification Number

C **Transaction ID : SB21B.44641**

Amount of Each Disbursement this Period

 254.09☒ Memo Item

Full Name (Last, First, Middle Initial)

C. FEDERAL EXPRESS

Mailing Address 461 WINCHESTER RD

City
MEMPHISState
TNZip Code
38109Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44473]: DELIVERY SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				26				2018					

FEC Identification Number

C **Transaction ID : SB21B.44642**

Amount of Each Disbursement this Period

 48.90☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ► 0.00**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 200 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. FEDERAL EXPRESS

Mailing Address 461 WINCHESTER RD

City
MEMPHISState
TNZip Code
38109Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44473]: DELIVERY SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				26				2018					

FEC Identification Number

C**Transaction ID : SB21B.44643**

Amount of Each Disbursement this Period

212.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. FEDERAL EXPRESS

Mailing Address 461 WINCHESTER RD

City
MEMPHISState
TNZip Code
38109Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44473]: DELIVERY SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				28				2018					

FEC Identification Number

C**Transaction ID : SB21B.44646**

Amount of Each Disbursement this Period

2582.32

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. FEDERAL EXPRESS

Mailing Address 461 WINCHESTER RD

City
MEMPHISState
TNZip Code
38109Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44474]: DELIVERY SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				29				2018					

FEC Identification Number

C**Transaction ID : SB21B.44646**

Amount of Each Disbursement this Period

346.05

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 201 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. FEDERAL EXPRESS

Mailing Address 461 WINCHESTER RD

City
MEMPHISState
TNZip Code
38109Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44474]: DELIVERY SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	1			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44650**

Amount of Each Disbursement this Period

 42.67☒ Memo Item

Full Name (Last, First, Middle Initial)

B. FEDERAL EXPRESS

Mailing Address 461 WINCHESTER RD

City
MEMPHISState
TNZip Code
38109Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44474]: DELIVERY SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	3			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44651**

Amount of Each Disbursement this Period

 112.04☒ Memo Item

Full Name (Last, First, Middle Initial)

C. FEDERAL EXPRESS

Mailing Address 461 WINCHESTER RD

City
MEMPHISState
TNZip Code
38109Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44474]: DELIVERY SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	5			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44652**

Amount of Each Disbursement this Period

 219.64☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 202 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. FEDERAL EXPRESS

Mailing Address 461 WINCHESTER RD

City
MEMPHISState
TNZip Code
38109Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44474]: DELIVERY SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	8			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44653**

Amount of Each Disbursement this Period

 274.15☒ Memo Item

Full Name (Last, First, Middle Initial)

B. FEDERAL EXPRESS

Mailing Address 461 WINCHESTER RD

City
MEMPHISState
TNZip Code
38109Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44474]: DELIVERY SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	9			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44654**

Amount of Each Disbursement this Period

 893.12☒ Memo Item

Full Name (Last, First, Middle Initial)

C. FEDERAL EXPRESS

Mailing Address 461 WINCHESTER RD

City
MEMPHISState
TNZip Code
38109Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44474]: DELIVERY SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	2			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44655**

Amount of Each Disbursement this Period

 79.40☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 203 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. FEDERAL EXPRESS

Mailing Address 461 WINCHESTER RD

City
MEMPHISState
TNZip Code
38109Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44474]: DELIVERY SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	5			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44656**

Amount of Each Disbursement this Period

 70.67☒ Memo Item

Full Name (Last, First, Middle Initial)

B. FEDERAL EXPRESS

Mailing Address 461 WINCHESTER RD

City
MEMPHISState
TNZip Code
38109Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44474]: DELIVERY SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	6			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44657**

Amount of Each Disbursement this Period

 302.38☒ Memo Item

Full Name (Last, First, Middle Initial)

C. FEDERAL EXPRESS

Mailing Address 461 WINCHESTER RD

City
MEMPHISState
TNZip Code
38109Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44474]: DELIVERY SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	7			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44658**

Amount of Each Disbursement this Period

 20.66☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 204 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. FEDERAL EXPRESS

Mailing Address 461 WINCHESTER RD

City
MEMPHISState
TNZip Code
38109Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44474]: DELIVERY SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	1			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44659**

Amount of Each Disbursement this Period

 106.34☒ Memo Item

Full Name (Last, First, Middle Initial)

B. FEDERAL EXPRESS

Mailing Address 461 WINCHESTER RD

City
MEMPHISState
TNZip Code
38109Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44474]: DELIVERY SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	2			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44660**

Amount of Each Disbursement this Period

 74.32☒ Memo Item

Full Name (Last, First, Middle Initial)

C. FEDERAL EXPRESS

Mailing Address 461 WINCHESTER RD

City
MEMPHISState
TNZip Code
38109Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44475]: DELIVERY SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	6			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44671**

Amount of Each Disbursement this Period

 38.03☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 205 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. FEDERAL EXPRESS

Mailing Address 461 WINCHESTER RD

City
MEMPHISState
TNZip Code
38109Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44477]: DELIVERY SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		02		2019

FEC Identification Number

C **Transaction ID : SB21B.44678**

Amount of Each Disbursement this Period

 37.65☒ Memo Item

Full Name (Last, First, Middle Initial)

B. FEDEX

Mailing Address 942 SOUTH SHADY GROVE RD

City
MEMPHISState
TNZip Code
38120Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: DELIVERY SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		22		2018

FEC Identification Number

C **Transaction ID : SB21B.44829**

Amount of Each Disbursement this Period

 6.01☒ Memo Item

Full Name (Last, First, Middle Initial)

C. FEDEX

Mailing Address 942 SOUTH SHADY GROVE RD

City
MEMPHISState
TNZip Code
38120Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: DELIVERY SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		22		2018

FEC Identification Number

C **Transaction ID : SB21B.44831**

Amount of Each Disbursement this Period

 35.68☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 206 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. FEDEX OFFICE

Mailing Address 2110 CRYSTAL DRIVE STE B

City
ARLINGTONState
VAZip Code
22202Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44481]: PRINTING SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		06		2019

FEC Identification Number

C**Transaction ID : SB21B.44696**

Amount of Each Disbursement this Period

177.44

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. FEDEX OFFICE

Mailing Address 2110 CRYSTAL DRIVE STE B

City
ARLINGTONState
VAZip Code
22202Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44482]: PRINTING SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		25		2019

FEC Identification Number

C**Transaction ID : SB21B.44717**

Amount of Each Disbursement this Period

96.99

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. FEDEX OFFICE

Mailing Address 2110 CRYSTAL DRIVE STE B

City
ARLINGTONState
VAZip Code
22202Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44487]: CREDIT: PRINTING SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		07		2019

FEC Identification Number

C**Transaction ID : SB21B.44745**

Amount of Each Disbursement this Period

- 42.32

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 207 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. FEDEX OFFICE

Mailing Address 2110 CRYSTAL DRIVE STE B

City
ARLINGTONState
VAZip Code
22202Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44487]: PRINTING SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		07		2019

FEC Identification Number

C**Transaction ID : SB21B.44752**

Amount of Each Disbursement this Period

10.58

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. FEDEX OFFICE

Mailing Address 2110 CRYSTAL DRIVE STE B

City
ARLINGTONState
VAZip Code
22202Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44487]: PRINTING SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		07		2019

FEC Identification Number

C**Transaction ID : SB21B.44753**

Amount of Each Disbursement this Period

121.66

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. FLORIES

Mailing Address 2800 S OCEAN BLVD

City
PALM BEACHState
FLZip Code
33480Purpose of Disbursement
REIMBURSEMENT [SB21B.44416]: TRAVEL: MEALS

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		11		2019

FEC Identification Number

C**Transaction ID : SB21B.44821**

Amount of Each Disbursement this Period

50.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 208 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. FOUR CORNERS FUNDRAISING LLCMailing Address ONE OLD COUNTRY RD.
STE. 240City
CARLE PLACEState
NYZip Code
11514Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	4			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44492**

Amount of Each Disbursement this Period

7500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FOUR CORNERS FUNDRAISING LLCMailing Address ONE OLD COUNTRY RD.
STE. 240City
CARLE PLACEState
NYZip Code
11514Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	7			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44493**

Amount of Each Disbursement this Period

5696.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FOUR CORNERS FUNDRAISING LLCMailing Address ONE OLD COUNTRY RD.
STE. 240City
CARLE PLACEState
NYZip Code
11514Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	8			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44494**

Amount of Each Disbursement this Period

7500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

20696.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 209 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. FOUR CORNERS FUNDRAISING LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		25		2019

Mailing Address ONE OLD COUNTRY RD.
STE. 240City
CARLE PLACEState
NYZip Code
11514Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.44495

Amount of Each Disbursement this Period

7500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FOUR CORNERS FUNDRAISING LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		26		2019

Mailing Address ONE OLD COUNTRY RD.
STE. 240City
CARLE PLACEState
NYZip Code
11514Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.44496

Amount of Each Disbursement this Period

4762.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FOUR CORNERS FUNDRAISING LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		26		2019

Mailing Address ONE OLD COUNTRY RD.
STE. 240City
CARLE PLACEState
NYZip Code
11514Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.44497

Amount of Each Disbursement this Period

7500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

19762.10

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 210 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. FOUR CORNERS FUNDRAISING LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		08		2019

Mailing Address ONE OLD COUNTRY RD.
STE. 240City
CARLE PLACEState
NYZip Code
11514Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.44498**

Amount of Each Disbursement this Period

1570.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FOUR CORNERS FUNDRAISING LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		25		2019

Mailing Address ONE OLD COUNTRY RD.
STE. 240City
CARLE PLACEState
NYZip Code
11514Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.44499**

Amount of Each Disbursement this Period

7500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FOUR CORNERS FUNDRAISING LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		13		2019

Mailing Address ONE OLD COUNTRY RD.
STE. 240City
CARLE PLACEState
NYZip Code
11514Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.44500**

Amount of Each Disbursement this Period

12707.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

21777.30

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 211 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. FOUR CORNERS FUNDRAISING LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		03		2019

Mailing Address ONE OLD COUNTRY RD.
STE. 240City
CARLE PLACEState
NYZip Code
11514Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.44501

Amount of Each Disbursement this Period

23288.77

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FOUR SEASONS HOTEL

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		12		2019

Mailing Address 525 N FORT LAUDERDALE BEACH BLVD

City
FORT LAUDERDALEState
FLZip Code
33304Purpose of Disbursement
REIMBURSEMENT [SB21B.44406]: TRAVEL: LODGING

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.44813

Amount of Each Disbursement this Period

577.58

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. FOUR SEASONS PALM BEACH

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		12		2019

Mailing Address 2800 S OCEAN BLVD

City
PALM BEACHState
FLZip Code
33480Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44481]: TRAVEL: LODGING

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.44707

Amount of Each Disbursement this Period

2000.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

23288.77

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 212 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. FOUR SEASONS PALM BEACH

Mailing Address 2800 S OCEAN BLVD

City
PALM BEACHState
FLZip Code
33480Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44481]: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3				1	3		2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44708**

Amount of Each Disbursement this Period

2531.53

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. GUILFOYLE, KIMBERLY, , ,Mailing Address C/O AMERICA FIRST ACTION INC
1400 CRYSTAL DRIVE STE 850City
ARLINGTONState
VAZip Code
22202Purpose of Disbursement
REIMBURSEMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				0	5		2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44418**

Amount of Each Disbursement this Period

511.60

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. HERTZ RENT-A-CAR

Mailing Address 14501 HERTZ QUAIL SPRNGS PKWY

City
OKLAHOMA CITYState
OKZip Code
73126Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				1	8		2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.4484c**

Amount of Each Disbursement this Period

175.70

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

511.60

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 213 OF 350

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. HERTZ RENT-A-CAR

Mailing Address 14501 HERTZ QUAIL SPRNGS PKWY

City
OKLAHOMA CITYState
OKZip Code
73126Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M		D	D		Y	Y	Y	Y		
10			15			2018					

FEC Identification Number

C**Transaction ID : SB21B.44839**

Amount of Each Disbursement this Period

196.78

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. HERTZ RENT-A-CAR

Mailing Address 14501 HERTZ QUAIL SPRNGS PKWY

City
OKLAHOMA CITYState
OKZip Code
73126Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44474]: GROUND TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M		D	D		Y	Y	Y	Y		
01			12			2019					

FEC Identification Number

C**Transaction ID : SB21B.44663**

Amount of Each Disbursement this Period

301.53

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. HERTZ RENT-A-CAR

Mailing Address 14501 HERTZ QUAIL SPRNGS PKWY

City
OKLAHOMA CITYState
OKZip Code
73126Purpose of Disbursement
REIMBURSEMENT [SB21B.44406]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M		D	D		Y	Y	Y	Y		
03			11			2019					

FEC Identification Number

C**Transaction ID : SB21B.44834**

Amount of Each Disbursement this Period

182.61

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 214 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. HERTZ RENT-A-CAR

Mailing Address 14501 HERTZ QUAIL SPRNGS PKWY

City
OKLAHOMA CITYState
OKZip Code
73126Purpose of Disbursement
REIMBURSEMENT [SB21B.44416]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		11		2019

FEC Identification Number

C**Transaction ID : SB21B.44841**

Amount of Each Disbursement this Period

335.30

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. HERTZ RENT-A-CAR

Mailing Address 14501 HERTZ QUAIL SPRNGS PKWY

City
OKLAHOMA CITYState
OKZip Code
73126Purpose of Disbursement
REIMBURSEMENT [SB21B.44406]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		21		2019

FEC Identification Number

C**Transaction ID : SB21B.44835**

Amount of Each Disbursement this Period

163.59

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. HERTZ RENT-A-CAR

Mailing Address 14501 HERTZ QUAIL SPRNGS PKWY

City
OKLAHOMA CITYState
OKZip Code
73126Purpose of Disbursement
REIMBURSEMENT [SB21B.44407]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		01		2019

FEC Identification Number

C**Transaction ID : SB21B.44838**

Amount of Each Disbursement this Period

84.71

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 215 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. HERTZ RENT-A-CAR

Mailing Address 14501 HERTZ QUAIL SPRNGS PKWY

City
OKLAHOMA CITYState
OKZip Code
73126Purpose of Disbursement
REIMBURSEMENT [SB21B.44407]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		27		2019

FEC Identification Number

C**Transaction ID : SB21B.44837**

Amount of Each Disbursement this Period

55.90

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. HILTON TIMES SQ

Mailing Address 234 W 42ND ST

City
NEW YORKState
NYZip Code
10036Purpose of Disbursement
REIMBURSEMENT [SB21B.44410]: TRAVEL: LODGING
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		03		2019

FEC Identification Number

C**Transaction ID : SB21B.44766**

Amount of Each Disbursement this Period

401.87

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. INTERNATIONAL LIMOUSINE

Mailing Address 2300 T STREET NE

City
WASHINGTONState
DCZip Code
20002Purpose of Disbursement
REIMBURSEMENT [SB21B.44424]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		05		2018

FEC Identification Number

C**Transaction ID : SB21B.4477C**

Amount of Each Disbursement this Period

100.60

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 216 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. INTERNATIONAL LIMOUSINE

Mailing Address 2300 T STREET NE

City
WASHINGTONState
DCZip Code
20002Purpose of Disbursement
REIMBURSEMENT [SB21B.44424]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				06				2018					

FEC Identification Number

C**Transaction ID : SB21B.44771**

Amount of Each Disbursement this Period

81.90

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. INTERNATIONAL LIMOUSINE

Mailing Address 2300 T STREET NE

City
WASHINGTONState
DCZip Code
20002Purpose of Disbursement
REIMBURSEMENT [SB21B.44425]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
01				16				2019					

FEC Identification Number

C**Transaction ID : SB21B.44772**

Amount of Each Disbursement this Period

67.14

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. INTERNATIONAL LIMOUSINE

Mailing Address 2300 T STREET NE

City
WASHINGTONState
DCZip Code
20002Purpose of Disbursement
REIMBURSEMENT [SB21B.44425]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
01				17				2019					

FEC Identification Number

C**Transaction ID : SB21B.44773**

Amount of Each Disbursement this Period

47.30

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 217 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. INTERNATIONAL LIMOUSINE

Mailing Address 2300 T STREET NE

City
WASHINGTONState
DCZip Code
20002Purpose of Disbursement
REIMBURSEMENT [SB21B.44425]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	9		2	0	1	9

FEC Identification Number

C

Transaction ID : SB21B.44776

Amount of Each Disbursement this Period

50.30

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. INTERNATIONAL LIMOUSINE

Mailing Address 2300 T STREET NE

City
WASHINGTONState
DCZip Code
20002Purpose of Disbursement
REIMBURSEMENT [SB21B.44425]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	1	9

FEC Identification Number

C

Transaction ID : SB21B.44777

Amount of Each Disbursement this Period

47.30

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. INTERNATIONAL LIMOUSINE

Mailing Address 2300 T STREET NE

City
WASHINGTONState
DCZip Code
20002Purpose of Disbursement
REIMBURSEMENT [SB21B.44425]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	4		2	0	1	9

FEC Identification Number

C

Transaction ID : SB21B.44774

Amount of Each Disbursement this Period

47.30

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 218 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. INTERNATIONAL LIMOUSINE

Mailing Address 2300 T STREET NE

City
WASHINGTONState
DCZip Code
20002Purpose of Disbursement
REIMBURSEMENT [SB21B.44425]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		07		2019

FEC Identification Number

C**Transaction ID : SB21B.44775**

Amount of Each Disbursement this Period

47.30

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E STE G20

City
SALT LAKE CTYState
UTZip Code
84121-6922Purpose of Disbursement
REIMBURSEMENT [SB21B.44406]: TRAVEL: AIR
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		01		2019

FEC Identification Number

C**Transaction ID : SB21B.45032**

Amount of Each Disbursement this Period

30.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E STE G20

City
SALT LAKE CTYState
UTZip Code
84121-6922Purpose of Disbursement
REIMBURSEMENT [SB21B.44406]: TRAVEL: AIR
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		01		2019

FEC Identification Number

C**Transaction ID : SB21B.45033**

Amount of Each Disbursement this Period

383.30

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 219 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E STE G20

City
SALT LAKE CTYState
UTZip Code
84121-6922Purpose of Disbursement
REIMBURSEMENT [SB21B.44416]: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3				1	1		2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.45034**

Amount of Each Disbursement this Period

757.59

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E STE G20

City
SALT LAKE CTYState
UTZip Code
84121-6922Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44481]: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3				1	3		2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44701**

Amount of Each Disbursement this Period

283.30

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E STE G20

City
SALT LAKE CTYState
UTZip Code
84121-6922Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44482]: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3				1	9		2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44711**

Amount of Each Disbursement this Period

592.85

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 220 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E STE G20

City
SALT LAKE CTYState
UTZip Code
84121-6922Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44482]: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	9			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44719**

Amount of Each Disbursement this Period

684.69

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E STE G20

City
SALT LAKE CTYState
UTZip Code
84121-6922Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44482]: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	0			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44721**

Amount of Each Disbursement this Period

1097.70

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E STE G20

City
SALT LAKE CTYState
UTZip Code
84121-6922Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44482]: CREDIT: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	0			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44722**

Amount of Each Disbursement this Period

- 548.85

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0	0	0	0	0	0	0	0	0	0	0	0	0	0

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 221 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E STE G20

City
SALT LAKE CTYState
UTZip Code
84121-6922Purpose of Disbursement
REIMBURSEMENT [SB21B.44406]: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		21		2019

FEC Identification Number

C**Transaction ID : SB21B.45031**

Amount of Each Disbursement this Period

592.85

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. JONES DAYMailing Address PO BOX 7805
BEN FRANKLIN STATIONCity
WASHINGTONState
DCZip Code
20044Purpose of Disbursement
LEGAL CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		23		2019

FEC Identification Number

C**Transaction ID : SB21B.44502**

Amount of Each Disbursement this Period

8443.75

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. JONES DAYMailing Address PO BOX 7805
BEN FRANKLIN STATIONCity
WASHINGTONState
DCZip Code
20044Purpose of Disbursement
LEGAL CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		22		2019

FEC Identification Number

C**Transaction ID : SB21B.44503**

Amount of Each Disbursement this Period

18581.25

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

27025.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 222 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. JONES DAY

Mailing Address PO BOX 7805

BEN FRANKLIN STATION

City
WASHINGTONState
DCZip Code
20044Purpose of Disbursement
LEGAL CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3				2	2		2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44504**

Amount of Each Disbursement this Period

13508.19

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. JONES DAY

Mailing Address PO BOX 7805

BEN FRANKLIN STATION

City
WASHINGTONState
DCZip Code
20044Purpose of Disbursement
LEGAL CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4				1	2		2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44505**

Amount of Each Disbursement this Period

18418.75

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. JONES DAY

Mailing Address PO BOX 7805

BEN FRANKLIN STATION

City
WASHINGTONState
DCZip Code
20044Purpose of Disbursement
LEGAL CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5				1	5		2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44506**

Amount of Each Disbursement this Period

21518.75

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

53445.69

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 223 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. JW MARRIOTT

Mailing Address 235 LOUIS ST NW

City
GRAND RAPIDSState
MIZip Code
49503Purpose of Disbursement
REIMBURSEMENT [SB21B.44407]: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	9			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44832**

Amount of Each Disbursement this Period

345.25

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. KAPNOS TAVERNA

Mailing Address 2401 S SMITH BLVD

City
ARLINGTONState
VAZip Code
22203Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: MEALS

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	7			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44808**

Amount of Each Disbursement this Period

59.53

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. LANDMARK LIMO

Mailing Address 722 RIVER MIST DRIVE

City
NATIONAL HARBORState
MDZip Code
20745Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44481]: TRAVEL: GROUND
TRANSPORTATION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	2			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44705**

Amount of Each Disbursement this Period

1485.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 224 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. LFYT

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		16		2019

Mailing Address 185 BERRY ST
SUITE 5000City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
REIMBURSEMENT [SB21B.44410]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
Type

FEC Identification Number

C**Transaction ID : SB21B.45024**

Amount of Each Disbursement this Period

10.28

☒ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. LYFT

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2019

Mailing Address 185 BERRY ST
SUITE 5000City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
REIMBURSEMENT [SB21B.44428]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
Type

FEC Identification Number

C**Transaction ID : SB21B.45029**

Amount of Each Disbursement this Period

26.93

☒ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. LYFT

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		22		2019

Mailing Address 185 BERRY ST
SUITE 5000City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
REIMBURSEMENT [SB21B.44409]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
Type

FEC Identification Number

C**Transaction ID : SB21B.45021**

Amount of Each Disbursement this Period

12.76

☒ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 225 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. LYFT

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		24		2019

Mailing Address 185 BERRY ST
SUITE 5000City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
REIMBURSEMENT [SB21B.44409]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
Type

FEC Identification Number

C

Transaction ID : SB21B.45022

Amount of Each Disbursement this Period

10.96

☒ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. LYFT

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		22		2019

Mailing Address 185 BERRY ST
SUITE 5000City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
REIMBURSEMENT [SB21B.44410]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
Type

FEC Identification Number

C

Transaction ID : SB21B.45025

Amount of Each Disbursement this Period

7.48

☒ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. LYFT

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		22		2019

Mailing Address 185 BERRY ST
SUITE 5000City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
REIMBURSEMENT [SB21B.44410]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
Type

FEC Identification Number

C

Transaction ID : SB21B.45026

Amount of Each Disbursement this Period

12.01

☒ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 226 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. LYFTMailing Address 185 BERRY ST
SUITE 5000City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
REIMBURSEMENT [SB21B.44410]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		31		2019

FEC Identification Number

C**Transaction ID : SB21B.45027**

Amount of Each Disbursement this Period

10.68

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. LYFTMailing Address 185 BERRY ST
SUITE 5000City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
REIMBURSEMENT [SB21B.44410]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		04		2019

FEC Identification Number

C**Transaction ID : SB21B.45028**

Amount of Each Disbursement this Period

22.85

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. MANDY, CORA, , ,Mailing Address C/O AMERICA FIRST ACTION INC
1400 CRYSTAL DRIVE STE 850City
ARLINGTONState
VAZip Code
22202Purpose of Disbursement
REIMBURSEMENT: SEE MEMO ENTRIES IF REQUIRED
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		01		2019

FEC Identification Number

C**Transaction ID : SB21B.44405**

Amount of Each Disbursement this Period

291.90

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

291.90

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 227 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. MANDY, CORA, , ,

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	6			2	0	1	9		

Mailing Address C/O AMERICA FIRST ACTION INC
1400 CRYSTAL DRIVE STE 850City
ARLINGTONState
VAZip Code
22202Purpose of Disbursement
REIMBURSEMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.44410**

Amount of Each Disbursement this Period

1018.05

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MARIOTT

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	5			2	0	1	9		

Mailing Address 1001 OKEECHOBEE BLVD

City
WEST PALM BEACHState
FLZip Code
33401Purpose of Disbursement
REIMBURSEMENT [SB21B.44407]: TRAVEL: LODGING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.44815**

Amount of Each Disbursement this Period

225.68

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. MASON STRATEGIES LLC

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	6			2	0	1	9		

Mailing Address 611 PENNSYLVANIA AVE
SE # 385City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.44488**

Amount of Each Disbursement this Period

10000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

11018.05

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 228 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. MASTRO'S STEAKHOUSE

Mailing Address 1285 6TH AVE

City
NEW YORKState
NYZip Code
10019Purpose of Disbursement
REIMBURSEMENT [SB21B.44410]: MEETING EXPENSE: MEALS

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		03		2019

FEC Identification Number

C**Transaction ID : SB21B.44762**

Amount of Each Disbursement this Period

395.87

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. MCCORMICK & SCHMICK'S

Mailing Address 1652 K ST NW

City
WASHINGTONState
DCZip Code
20006Purpose of Disbursement
REIMBURSEMENT [SB21B.44412]: MEETING EXPENSE: MEALS

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2018

FEC Identification Number

C**Transaction ID : SB21B.44798**

Amount of Each Disbursement this Period

118.01

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. METRO GUITAR SERVICE

Mailing Address 775 23RD ST. S., LOWER LEVEL

City
ARLINGTONState
VAZip Code
22202Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44476]: EVENT EXPENSE: COLLATERAL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		22		2019

FEC Identification Number

C**Transaction ID : SB21B.44677**

Amount of Each Disbursement this Period

175.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 229 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. MILLER'S ALE HOUSE

Mailing Address 722 APALACHEE PKWY

City
TALLAHASSEEState
FLZip Code
32301Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44474]: TRAVEL: MEALS

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	8			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44674**

Amount of Each Disbursement this Period

 74.15 ☒ Memo Item

Full Name (Last, First, Middle Initial)

B. MJ VALET

Mailing Address 1606 17TH ST NW

City
WASHINGTONState
DCZip Code
20009Purpose of Disbursement
REIMBURSEMENT [SB21B.44403]: MEETING EXPENSE: PARKING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			2	1			2	0	1	8		

FEC Identification Number

C **Transaction ID : SB21B.44800**

Amount of Each Disbursement this Period

 26.00 ☒ Memo Item

Full Name (Last, First, Middle Initial)

C. MJ VALET

Mailing Address 1606 17TH ST NW

City
WASHINGTONState
DCZip Code
20009Purpose of Disbursement
REIMBURSEMENT [SB21B.44404]: MEETING EXPENSE: PARKING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	5			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44801**

Amount of Each Disbursement this Period

 26.00 ☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 230 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. MJ VALET

Mailing Address 1606 17TH ST NW

City
WASHINGTONState
DCZip Code
20009Purpose of Disbursement
REIMBURSEMENT [SB21B.44405]: MEETING EXPENSE: PARKING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		28		2019

FEC Identification Number

C **Transaction ID : SB21B.44802**

Amount of Each Disbursement this Period

 26.00☒ Memo Item

Full Name (Last, First, Middle Initial)

B. PARK CENTRAL HOTEL

Mailing Address 870 7TH AVE

City
NEW YORKState
NYZip Code
10019Purpose of Disbursement
REIMBURSEMENT [SB21B.44409]: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		21		2019

FEC Identification Number

C **Transaction ID : SB21B.44759**

Amount of Each Disbursement this Period

 173.90☒ Memo Item

Full Name (Last, First, Middle Initial)

C. PARK CENTRAL HOTEL

Mailing Address 870 7TH AVE

City
NEW YORKState
NYZip Code
10019Purpose of Disbursement
REIMBURSEMENT [SB21B.44409]: TRAVEL: MEALS

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		22		2019

FEC Identification Number

C **Transaction ID : SB21B.44761**

Amount of Each Disbursement this Period

 5.99☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 231 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. PIERCE, ANN, , ,Mailing Address 1400 CRYSTAL DRIVE
SUITE 850City
ARLINGTONState
VAZip Code
22202Purpose of Disbursement
REIMBURSEMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	3			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44400**

Amount of Each Disbursement this Period

284.20

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. PIERCE, ANN, , ,Mailing Address 1400 CRYSTAL DRIVE
SUITE 850City
ARLINGTONState
VAZip Code
22202Purpose of Disbursement
REIMBURSEMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			3	1			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44401**

Amount of Each Disbursement this Period

529.24

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. PJ CLARKE'S

Mailing Address 915 3RD AVE

City
NEW YORKState
NYZip Code
10022Purpose of Disbursement
REIMBURSEMENT [SB21B.44404]: MEETING EXPENSE: MEALS

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	9			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44764**

Amount of Each Disbursement this Period

207.98

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

813.44

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 232 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. RADISSON HOTEL

Mailing Address 3155 S VAUGHN WAY

City
AURORAState
COZip Code
80014Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44480]: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	9			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44690**

Amount of Each Disbursement this Period

 495.00☒ Memo Item

Full Name (Last, First, Middle Initial)

B. RED STATE DATA AND DIGITALMailing Address 611 PENNSYLVANIA AVE SE
#454City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
WEBSITE DESIGN AND DEVELOPMENT

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	0			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44436**

Amount of Each Disbursement this Period

 3336.98☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RED STATE DATA AND DIGITALMailing Address 611 PENNSYLVANIA AVE SE
#454City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	0			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44437**

Amount of Each Disbursement this Period

 10000.00☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 13336.98

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 233 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. RED STATE DATA AND DIGITALMailing Address 611 PENNSYLVANIA AVE SE
#454City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	1			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44438**

Amount of Each Disbursement this Period

10000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RED STATE DATA AND DIGITALMailing Address 611 PENNSYLVANIA AVE SE
#454City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	1			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44439**

Amount of Each Disbursement this Period

10000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RED STATE DATA AND DIGITALMailing Address 611 PENNSYLVANIA AVE SE
#454City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
WEBSITE DESIGN AND DEVELOPMENT

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	4			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44440**

Amount of Each Disbursement this Period

4186.98

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

24186.98

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 234 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. RED STATE DATA AND DIGITALMailing Address 611 PENNSYLVANIA AVE SE
#454City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	1			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44441**

Amount of Each Disbursement this Period

 10000.00☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RED STATE DATA AND DIGITALMailing Address 611 PENNSYLVANIA AVE SE
#454City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
WEBSITE DESIGN AND DEVELOPMENT

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	7			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44442**

Amount of Each Disbursement this Period

 4880.00☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RED STATE DATA AND DIGITALMailing Address 611 PENNSYLVANIA AVE SE
#454City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	0			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44443**

Amount of Each Disbursement this Period

 10000.00☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2	4	8	8	0	0	0	0						
---	---	---	---	---	---	---	---	--	--	--	--	--	--

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 235 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. RED STATE DATA AND DIGITALMailing Address 611 PENNSYLVANIA AVE SE
#454City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	3			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44444**

Amount of Each Disbursement this Period

10000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RIGWIL LLCMailing Address 2308 MT. VERNON AVE
SUITE 415City
ALEXANDRIAState
VAZip Code
22301Purpose of Disbursement
COMMUNICATIONS CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	6			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44444**

Amount of Each Disbursement this Period

7500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RIGWIL LLCMailing Address 2308 MT. VERNON AVE
SUITE 415City
ALEXANDRIAState
VAZip Code
22301Purpose of Disbursement
COMMUNICATIONS CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	8			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44444**

Amount of Each Disbursement this Period

7500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

25000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 236 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. RIGWIL LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		25		2019

Mailing Address 2308 MT. VERNON AVE
SUITE 415City
ALEXANDRIAState
VAZip Code
22301Purpose of Disbursement
COMMUNICATIONS CONSULTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.44447**

Amount of Each Disbursement this Period

7500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RIGWIL LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		26		2019

Mailing Address 2308 MT. VERNON AVE
SUITE 415City
ALEXANDRIAState
VAZip Code
22301Purpose of Disbursement
COMMUNICATIONS CONSULTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.44448**

Amount of Each Disbursement this Period

7500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RIGWIL LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		25		2019

Mailing Address 2308 MT. VERNON AVE
SUITE 415City
ALEXANDRIAState
VAZip Code
22301Purpose of Disbursement
COMMUNICATIONS CONSULTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.44449**

Amount of Each Disbursement this Period

7500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

22500.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 237 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. RIGWIL LLCMailing Address 2308 MT. VERNON AVE
SUITE 415City
ALEXANDRIAState
VAZip Code
22301Purpose of Disbursement
COMMUNICATIONS CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	8			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44450**

Amount of Each Disbursement this Period

 7500.00☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RIGWIL LLCMailing Address 2308 MT. VERNON AVE
SUITE 415City
ALEXANDRIAState
VAZip Code
22301Purpose of Disbursement
COMMUNICATIONS CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	0			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44451**

Amount of Each Disbursement this Period

 7500.00☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RUTH'S CHRIS STEAK HOUSE

Mailing Address 2231 CRYSTAL DRIVE 11TH FLOOR

City
ARLINGTONState
VAZip Code
22202Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44485]: EVENT EXPENSE: FACILITY
RENTAL DEPOSIT
Candidate NameOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	6			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44742**

Amount of Each Disbursement this Period

 250.00☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ► 15000.00**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 238 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. RUTH'S CHRIS STEAK HOUSE

Mailing Address 2231 CRYSTAL DRIVE 11TH FLOOR

City
ARLINGTONState
VAZip Code
22202Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44485]: EVENT EXPENSE: FACILITY
RENTAL AND CATERING SERVICES
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		09		2019

FEC Identification Number

C

Transaction ID : SB21B.44740

Amount of Each Disbursement this Period

1303.44

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. SAVOYAMailing Address 1845 WOODALL RODGERS FWY
#1700City
DALLASState
TXZip Code
75201Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44483]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		28		2019

FEC Identification Number

C

Transaction ID : SB21B.44737

Amount of Each Disbursement this Period

268.75

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. SOUTHWEST AIRLINES

Mailing Address 2702 LOVE FIELD DRIVE

City
DALLASState
TXZip Code
75235Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: AIR WIFI
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		04		2018

FEC Identification Number

C

Transaction ID : SB21B.44853

Amount of Each Disbursement this Period

8.00

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 239 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. SOUTHWEST AIRLINES

Mailing Address 2702 LOVE FIELD DRIVE

City
DALLASState
TXZip Code
75235Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: AIR WIFI

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				04				2018					

FEC Identification Number

C**Transaction ID : SB21B.44854**

Amount of Each Disbursement this Period

8.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. SOUTHWEST AIRLINES

Mailing Address 2702 LOVE FIELD DRIVE

City
DALLASState
TXZip Code
75235Purpose of Disbursement
REIMBURSEMENT [SB21B.44406]: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
03				02				2019					

FEC Identification Number

C**Transaction ID : SB21B.44850**

Amount of Each Disbursement this Period

482.98

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. SOUTHWEST AIRLINES

Mailing Address 2702 LOVE FIELD DRIVE

City
DALLASState
TXZip Code
75235Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44481]: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
03				04				2019					

FEC Identification Number

C**Transaction ID : SB21B.44697**

Amount of Each Disbursement this Period

373.48

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 240 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. SOUTHWEST AIRLINES

Mailing Address 2702 LOVE FIELD DRIVE

City
DALLASState
TXZip Code
75235Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44481]: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		04		2019

FEC Identification Number

C**Transaction ID : SB21B.44698**

Amount of Each Disbursement this Period

373.48

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. SOUTHWEST AIRLINES

Mailing Address 2702 LOVE FIELD DRIVE

City
DALLASState
TXZip Code
75235Purpose of Disbursement
REIMBURSEMENT [SB21B.44406]: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		13		2019

FEC Identification Number

C**Transaction ID : SB21B.44851**

Amount of Each Disbursement this Period

482.98

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. SOUTHWEST AIRLINES

Mailing Address 2702 LOVE FIELD DRIVE

City
DALLASState
TXZip Code
75235Purpose of Disbursement
REIMBURSEMENT [SB21B.44416]: TRAVEL: AIR WIFI

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		13		2019

FEC Identification Number

C**Transaction ID : SB21B.44855**

Amount of Each Disbursement this Period

8.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 241 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. SOUTHWEST AIRLINES

Mailing Address 2702 LOVE FIELD DRIVE

City
DALLASState
TXZip Code
75235Purpose of Disbursement
REIMBURSEMENT [SB21B.44406]: TRAVEL: AIR WIFI

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		21		2019

FEC Identification Number

C**Transaction ID : SB21B.44852**

Amount of Each Disbursement this Period

8.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. SQUARE INCMailing Address 1455 MARKET ST
SUITE 600City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44474]: GROUND TRANSPORTATION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		09		2019

FEC Identification Number

C**Transaction ID : SB21B.44662**

Amount of Each Disbursement this Period

15.08

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. ST. JAMES STRATEGIESMailing Address 45 NORTH HILL DRIVE
SUITE 100City
WARRENTONState
VAZip Code
20186Purpose of Disbursement
COMMUNICATIONS CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		02		2019

FEC Identification Number

C**Transaction ID : SB21B.44452**

Amount of Each Disbursement this Period

7500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

7500.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 242 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	3			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44508**

Amount of Each Disbursement this Period

862.58

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	4			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44509**

Amount of Each Disbursement this Period

180.33

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	7			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44511**

Amount of Each Disbursement this Period

150.60

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1193.51

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 243 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		08		2019

FEC Identification Number

C**Transaction ID : SB21B.44511**

Amount of Each Disbursement this Period

214.63

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		09		2019

FEC Identification Number

C**Transaction ID : SB21B.44512**

Amount of Each Disbursement this Period

491.04

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		10		2019

FEC Identification Number

C**Transaction ID : SB21B.44513**

Amount of Each Disbursement this Period

159.14

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

864.81

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 244 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	1		2	0	1	9

FEC Identification Number

C**Transaction ID : SB21B.44514**

Amount of Each Disbursement this Period

675.06

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	4		2	0	1	9

FEC Identification Number

C**Transaction ID : SB21B.44515**

Amount of Each Disbursement this Period

168.95

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	5		2	0	1	9

FEC Identification Number

C**Transaction ID : SB21B.44516**

Amount of Each Disbursement this Period

260.55

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1104.56

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 245 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	6		2	0	1	9

FEC Identification Number

C**Transaction ID : SB21B.44517**

Amount of Each Disbursement this Period

203.29

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	7		2	0	1	9

FEC Identification Number

C**Transaction ID : SB21B.44518**

Amount of Each Disbursement this Period

389.96

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	8		2	0	1	9

FEC Identification Number

C**Transaction ID : SB21B.44519**

Amount of Each Disbursement this Period

510.60

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1103.85

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 246 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	2			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44520**

Amount of Each Disbursement this Period

336.95

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	3			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44521**

Amount of Each Disbursement this Period

320.27

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	3			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44522**

Amount of Each Disbursement this Period

1211.81

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1869.03

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 247 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	5		2	0	1	9

FEC Identification Number

C**Transaction ID : SB21B.44523**

Amount of Each Disbursement this Period

28.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	8		2	0	1	9

FEC Identification Number

C**Transaction ID : SB21B.44524**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	8		2	0	1	9

FEC Identification Number

C**Transaction ID : SB21B.44525**

Amount of Each Disbursement this Period

802.33

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

835.41

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 248 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		29		2019

FEC Identification Number

C**Transaction ID : SB21B.44526**

Amount of Each Disbursement this Period

301.60

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		30		2019

FEC Identification Number

C**Transaction ID : SB21B.44527**

Amount of Each Disbursement this Period

160.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		31		2019

FEC Identification Number

C**Transaction ID : SB21B.44528**

Amount of Each Disbursement this Period

25.91

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

487.76

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 249 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		01		2019

FEC Identification Number

C**Transaction ID : SB21B.44529**

Amount of Each Disbursement this Period

156.79

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		04		2019

FEC Identification Number

C**Transaction ID : SB21B.44530**

Amount of Each Disbursement this Period

349.68

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		05		2019

FEC Identification Number

C**Transaction ID : SB21B.44531**

Amount of Each Disbursement this Period

148.95

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

655.42

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 250 OF 350

<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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MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		06		2019

FEC Identification Number

C**Transaction ID : SB21B.44532**

Amount of Each Disbursement this Period

48.84

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		07		2019

FEC Identification Number

C**Transaction ID : SB21B.44533**

Amount of Each Disbursement this Period

145.53

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		08		2019

FEC Identification Number

C**Transaction ID : SB21B.44534**

Amount of Each Disbursement this Period

515.52

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

709.89

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 251 OF 350

<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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94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
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☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		11		2019

FEC Identification Number

C**Transaction ID : SB21B.44535**

Amount of Each Disbursement this Period

114.31

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		12		2019

FEC Identification Number

C**Transaction ID : SB21B.44536**

Amount of Each Disbursement this Period

139.97

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		13		2019

FEC Identification Number

C**Transaction ID : SB21B.44537**

Amount of Each Disbursement this Period

83.68

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

337.96

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 252 OF 350

<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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MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		14		2019

FEC Identification Number

C**Transaction ID : SB21B.44538**

Amount of Each Disbursement this Period

6.91

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		15		2019

FEC Identification Number

C**Transaction ID : SB21B.44539**

Amount of Each Disbursement this Period

333.58

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		19		2019

FEC Identification Number

C**Transaction ID : SB21B.44544**

Amount of Each Disbursement this Period

482.53

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

823.02

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 253 OF 350

<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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AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		20		2019

FEC Identification Number

C**Transaction ID : SB21B.44541**

Amount of Each Disbursement this Period

172.76

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		21		2019

FEC Identification Number

C**Transaction ID : SB21B.44542**

Amount of Each Disbursement this Period

844.79

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		22		2019

FEC Identification Number

C**Transaction ID : SB21B.44543**

Amount of Each Disbursement this Period

22.52

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1040.07

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 254 OF 350

<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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A. STRIPE

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CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				2	5		2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44544**

Amount of Each Disbursement this Period

46.85

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				2	6		2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44545**

Amount of Each Disbursement this Period

20.09

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				2	7		2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44546**

Amount of Each Disbursement this Period

83.55

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

150.49

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 255 OF 350

<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)

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A. STRIPE

Mailing Address 3180 18TH STREET

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94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		28		2019

FEC Identification Number

C**Transaction ID : SB21B.44547**

Amount of Each Disbursement this Period

56.44

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
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CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		01		2019

FEC Identification Number

C**Transaction ID : SB21B.44548**

Amount of Each Disbursement this Period

113.13

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		04		2019

FEC Identification Number

C**Transaction ID : SB21B.44549**

Amount of Each Disbursement this Period

328.52

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

498.09

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 256 OF 350

<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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CAZip Code
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MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		05		2019

FEC Identification Number

C**Transaction ID : SB21B.44550**

Amount of Each Disbursement this Period

143.13

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		06		2019

FEC Identification Number

C**Transaction ID : SB21B.44551**

Amount of Each Disbursement this Period

84.89

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		07		2019

FEC Identification Number

C**Transaction ID : SB21B.44552**

Amount of Each Disbursement this Period

16.37

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

244.39

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 257 OF 350

<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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A. STRIPE

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City
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CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	8			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44553**

Amount of Each Disbursement this Period

48.78

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

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☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	1			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44554**

Amount of Each Disbursement this Period

51.35

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	2			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44555**

Amount of Each Disbursement this Period

155.13

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

255.26

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 258 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		13		2019

FEC Identification Number

C**Transaction ID : SB21B.44556**

Amount of Each Disbursement this Period

246.49

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		14		2019

FEC Identification Number

C**Transaction ID : SB21B.44557**

Amount of Each Disbursement this Period

32.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		15		2019

FEC Identification Number

C**Transaction ID : SB21B.44558**

Amount of Each Disbursement this Period

31.91

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

310.50

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 259 OF 350

<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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A. STRIPE

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City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		18		2019

FEC Identification Number

C**Transaction ID : SB21B.44559**

Amount of Each Disbursement this Period

59.85

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		19		2019

FEC Identification Number

C**Transaction ID : SB21B.44560**

Amount of Each Disbursement this Period

66.57

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		20		2019

FEC Identification Number

C**Transaction ID : SB21B.44561**

Amount of Each Disbursement this Period

189.76

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

316.18

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 260 OF 350

<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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A. STRIPE

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SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		21		2019

FEC Identification Number

C**Transaction ID : SB21B.44562**

Amount of Each Disbursement this Period

22.90

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		22		2019

FEC Identification Number

C**Transaction ID : SB21B.44563**

Amount of Each Disbursement this Period

12.15

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2019

FEC Identification Number

C**Transaction ID : SB21B.44564**

Amount of Each Disbursement this Period

78.16

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

113.21

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 261 OF 350

<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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CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		26		2019

FEC Identification Number

C**Transaction ID : SB21B.44565**

Amount of Each Disbursement this Period

120.32

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		27		2019

FEC Identification Number

C**Transaction ID : SB21B.44566**

Amount of Each Disbursement this Period

120.85

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		28		2019

FEC Identification Number

C**Transaction ID : SB21B.44567**

Amount of Each Disbursement this Period

37.18

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

278.35

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 262 OF 350

<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)

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A. STRIPE

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SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3				2	9				2	0	1	9

FEC Identification Number

C**Transaction ID : SB21B.44568**

Amount of Each Disbursement this Period

58.16

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4				0	1				2	0	1	9

FEC Identification Number

C**Transaction ID : SB21B.44569**

Amount of Each Disbursement this Period

58.76

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4				0	2				2	0	1	9

FEC Identification Number

C**Transaction ID : SB21B.44571**

Amount of Each Disbursement this Period

105.56

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

222.48

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 263 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	3			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44571**

Amount of Each Disbursement this Period

 655.09☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	4			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44572**

Amount of Each Disbursement this Period

 22.17☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	5			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44573**

Amount of Each Disbursement this Period

 28.26☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ► 705.52**TOTAL** This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 264 OF 350

<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)

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A. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		08		2019

FEC Identification Number

C**Transaction ID : SB21B.44574**

Amount of Each Disbursement this Period

84.11

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		09		2019

FEC Identification Number

C**Transaction ID : SB21B.44575**

Amount of Each Disbursement this Period

163.88

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		10		2019

FEC Identification Number

C**Transaction ID : SB21B.44576**

Amount of Each Disbursement this Period

136.04

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

384.03

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 265 OF 350

<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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A. STRIPE

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CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	1		2	0	1	9

FEC Identification Number

C**Transaction ID : SB21B.44577**

Amount of Each Disbursement this Period

10.96

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	2		2	0	1	9

FEC Identification Number

C**Transaction ID : SB21B.44578**

Amount of Each Disbursement this Period

90.85

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	5		2	0	1	9

FEC Identification Number

C**Transaction ID : SB21B.44579**

Amount of Each Disbursement this Period

47.18

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

148.99

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 266 OF 350

<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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AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	6			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44580**

Amount of Each Disbursement this Period

 4074.20☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	7			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44581**

Amount of Each Disbursement this Period

 74.33☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	8			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44582**

Amount of Each Disbursement this Period

 79.48☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 4228.01

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 267 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	9		2	0	1	9

FEC Identification Number

C**Transaction ID : SB21B.44583**

Amount of Each Disbursement this Period

32.11

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	2		2	0	1	9

FEC Identification Number

C**Transaction ID : SB21B.44584**

Amount of Each Disbursement this Period

37.07

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	1	9

FEC Identification Number

C**Transaction ID : SB21B.44585**

Amount of Each Disbursement this Period

39.04

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

108.22

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 268 OF 350

<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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MERCHANT FEE

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Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		24		2019

FEC Identification Number

C**Transaction ID : SB21B.44586**

Amount of Each Disbursement this Period

100.68

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		25		2019

FEC Identification Number

C**Transaction ID : SB21B.44587**

Amount of Each Disbursement this Period

18.69

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		26		2019

FEC Identification Number

C**Transaction ID : SB21B.44588**

Amount of Each Disbursement this Period

14.04

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

133.41

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 269 OF 350

<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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Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		29		2019

FEC Identification Number

C**Transaction ID : SB21B.44589**

Amount of Each Disbursement this Period

28.64

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		30		2019

FEC Identification Number

C**Transaction ID : SB21B.44590**

Amount of Each Disbursement this Period

19.52

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		01		2019

FEC Identification Number

C**Transaction ID : SB21B.44591**

Amount of Each Disbursement this Period

141.05

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

189.21

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 270 OF 350

<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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94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		02		2019

FEC Identification Number

C**Transaction ID : SB21B.44592**

Amount of Each Disbursement this Period

94.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		03		2019

FEC Identification Number

C**Transaction ID : SB21B.44593**

Amount of Each Disbursement this Period

23.36

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		06		2019

FEC Identification Number

C**Transaction ID : SB21B.44594**

Amount of Each Disbursement this Period

23.87

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

141.88

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 271 OF 350

<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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MERCHANT FEE

Candidate Name

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☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		07		2019

FEC Identification Number

C**Transaction ID : SB21B.44595**

Amount of Each Disbursement this Period

79.66

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		08		2019

FEC Identification Number

C**Transaction ID : SB21B.44596**

Amount of Each Disbursement this Period

62.43

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		09		2019

FEC Identification Number

C**Transaction ID : SB21B.44597**

Amount of Each Disbursement this Period

51.12

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

193.21

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 272 OF 350

<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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94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		10		2019

FEC Identification Number

C**Transaction ID : SB21B.44598**

Amount of Each Disbursement this Period

23.75

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		13		2019

FEC Identification Number

C**Transaction ID : SB21B.44599**

Amount of Each Disbursement this Period

290.89

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		14		2019

FEC Identification Number

C**Transaction ID : SB21B.44600**

Amount of Each Disbursement this Period

163.92

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

478.56

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 273 OF 350

<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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94110Purpose of Disbursement
MERCHANT FEE

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☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	5			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44601**

Amount of Each Disbursement this Period

93.75

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	6			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44602**

Amount of Each Disbursement this Period

32.64

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	7			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44603**

Amount of Each Disbursement this Period

34.78

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

161.17

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 274 OF 350

<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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☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	0			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44604**

Amount of Each Disbursement this Period

83.06

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

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☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	1			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44605**

Amount of Each Disbursement this Period

41.12

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

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94110Purpose of Disbursement
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Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44606**

Amount of Each Disbursement this Period

68.19

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

192.37

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 275 OF 350

<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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CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		23		2019

FEC Identification Number

C**Transaction ID : SB21B.44607**

Amount of Each Disbursement this Period

58.28

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		24		2019

FEC Identification Number

C**Transaction ID : SB21B.44608**

Amount of Each Disbursement this Period

78.97

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		28		2019

FEC Identification Number

C**Transaction ID : SB21B.44609**

Amount of Each Disbursement this Period

43.70

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

180.95

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 276 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	9			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44610**

Amount of Each Disbursement this Period

 18.08☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			3	0			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44611**

Amount of Each Disbursement this Period

 97.55☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			3	1			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44612**

Amount of Each Disbursement this Period

 55.15☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 170.78

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 277 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	3			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44613**

Amount of Each Disbursement this Period

80.68

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	4			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44614**

Amount of Each Disbursement this Period

107.36

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	5			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44615**

Amount of Each Disbursement this Period

56.43

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

244.47

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 278 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		06		2019

FEC Identification Number

C**Transaction ID : SB21B.44616**

Amount of Each Disbursement this Period

14.88

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		07		2019

FEC Identification Number

C**Transaction ID : SB21B.44617**

Amount of Each Disbursement this Period

10.99

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		10		2019

FEC Identification Number

C**Transaction ID : SB21B.44618**

Amount of Each Disbursement this Period

22.91

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

48.78

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 279 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	1			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44619**

Amount of Each Disbursement this Period

35.53

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	2			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44620**

Amount of Each Disbursement this Period

35.43

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	3			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44621**

Amount of Each Disbursement this Period

15.14

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

86.10

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 280 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		14		2019

FEC Identification Number

C**Transaction ID : SB21B.44622**

Amount of Each Disbursement this Period

6.58

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		17		2019

FEC Identification Number

C**Transaction ID : SB21B.44623**

Amount of Each Disbursement this Period

192.52

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		18		2019

FEC Identification Number

C**Transaction ID : SB21B.44624**

Amount of Each Disbursement this Period

311.89

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

510.99

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 281 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	9			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44625**

Amount of Each Disbursement this Period

 822.69☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	0			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44626**

Amount of Each Disbursement this Period

 5519.93☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	1			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44627**

Amount of Each Disbursement this Period

 456.23☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 6798.85

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 282 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	4			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44628**

Amount of Each Disbursement this Period

409.11

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	5			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44629**

Amount of Each Disbursement this Period

83.04

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	6			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44630**

Amount of Each Disbursement this Period

85.46

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

577.61

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 283 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		27		2019

FEC Identification Number

C**Transaction ID : SB21B.44631**

Amount of Each Disbursement this Period

13.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		28		2019

FEC Identification Number

C**Transaction ID : SB21B.44632**

Amount of Each Disbursement this Period

14.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SUNNY'S EXECUTIVE SEDAN

Mailing Address 23765 PEBBLE RUN PL # 100

City
STERLINGState
VAZip Code
20166Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44478]: GROUND TRANSPORTATION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		07		2019

FEC Identification Number

C**Transaction ID : SB21B.44683**

Amount of Each Disbursement this Period

205.14

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

27.90

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 284 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. THE COLONY

Mailing Address 155 HAMMON AVE

City
PALM BEACHState
FLZip Code
33480Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44473]: CREDIT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				24				2018					

FEC Identification Number

C**Transaction ID : SB21B.44637**

Amount of Each Disbursement this Period

- 439.57

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. THE COLONY

Mailing Address 155 HAMMON AVE

City
PALM BEACHState
FLZip Code
33480Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44473]: CREDIT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				24				2018					

FEC Identification Number

C**Transaction ID : SB21B.44638**

Amount of Each Disbursement this Period

- 439.57

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. THE COLONY

Mailing Address 155 HAMMON AVE

City
PALM BEACHState
FLZip Code
33480Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44481]: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
03				13				2019					

FEC Identification Number

C**Transaction ID : SB21B.44705**

Amount of Each Disbursement this Period

665.57

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 285 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. THE COLONY

Mailing Address 155 HAMMON AVE

City
PALM BEACHState
FLZip Code
33480Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44481]: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	3			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44710**

Amount of Each Disbursement this Period

 665.57☒ Memo Item

Full Name (Last, First, Middle Initial)

B. THE COLONY

Mailing Address 155 HAMMON AVE

City
PALM BEACHState
FLZip Code
33480Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44482]: TRAVEL: MEALS

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	0			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44730**

Amount of Each Disbursement this Period

 25.33☒ Memo Item

Full Name (Last, First, Middle Initial)

C. THE COLONY

Mailing Address 155 HAMMON AVE

City
PALM BEACHState
FLZip Code
33480Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44482]: TRAVEL: MEALS

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	0			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44731**

Amount of Each Disbursement this Period

 28.25☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 286 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. THE MAR-A-LAGO CLUB

Mailing Address 1100 SOUTH OCEAN BLVD

City
PALM BEACHState
FLZip Code
33480Purpose of Disbursement
EVENT EXPENSE: FACILITY RENTAL AND CATERING SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	3			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44453**

Amount of Each Disbursement this Period

18355.21

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. THE MAR-A-LAGO CLUB

Mailing Address 1100 SOUTH OCEAN BLVD

City
PALM BEACHState
FLZip Code
33480Purpose of Disbursement
EVENT EXPENSE: FACILITY RENTAL AND CATERING SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	5			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44454**

Amount of Each Disbursement this Period

2150.70

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. THE PALM

Mailing Address 1225 19TH ST NW

City
WASHINGTONState
DCZip Code
20036Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44486]: EVENT EXPENSE: FACILITY
RENTAL AND CATERING SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	1			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44745**

Amount of Each Disbursement this Period

45.20

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

20505.91

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 287 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. THE PALM

Mailing Address 1225 19TH ST NW

City
WASHINGTONState
DCZip Code
20036Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44486]: EVENT EXPENSE: FACILITY
RENTAL AND CATERING SERVICES
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44747**

Amount of Each Disbursement this Period

2050.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. THE UPS STORE

Mailing Address 2664 TIMBER DR

City
GARNERState
NCZip Code
27529Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44473]: DELIVERY SERVICES
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			2	7			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.44645**

Amount of Each Disbursement this Period

168.97

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. TIDELINE

Mailing Address 2842 S OCEAN BLVD

City
PALM BEACHState
FLZip Code
33480Purpose of Disbursement
REIMBURSEMENT [SB21B.44426]: TRAVEL: LODGING
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	7			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44826**

Amount of Each Disbursement this Period

475.11

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 288 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. TIDELINE

Mailing Address 2842 S OCEAN BLVD

City
PALM BEACHState
FLZip Code
33480Purpose of Disbursement
REIMBURSEMENT [SB21B.44426]: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	8			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44827**

Amount of Each Disbursement this Period

 959.07☒ Memo Item

Full Name (Last, First, Middle Initial)

B. TIDELINE

Mailing Address 2842 S OCEAN BLVD

City
PALM BEACHState
FLZip Code
33480Purpose of Disbursement
REIMBURSEMENT [SB21B.44416]: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	2			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44822**

Amount of Each Disbursement this Period

 754.23☒ Memo Item

Full Name (Last, First, Middle Initial)

C. TIDELINE

Mailing Address 2842 S OCEAN BLVD

City
PALM BEACHState
FLZip Code
33480Purpose of Disbursement
REIMBURSEMENT [SB21B.44416]: TRAVEL: MEALS

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	2			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44823**

Amount of Each Disbursement this Period

 84.80☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 289 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. TINY JEWEL BOX INC

Mailing Address 1155 CONNECTICUT AVE NW

City
WASHINGTONState
DCZip Code
20036Purpose of Disbursement
CONTRIBUTOR COLLATERAL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	1			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44455**

Amount of Each Disbursement this Period

 15204.03☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TRUMP INTERNATIONAL HOTEL

Mailing Address 1100 PENNSYLVANIA AVE. NW

City
WASHINGTONState
DCZip Code
20004Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: MEETING EXPENSE: PARKING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	1			2	0	1	8		

FEC Identification Number

C **Transaction ID : SB21B.44788**

Amount of Each Disbursement this Period

 35.70☒ Memo Item

Full Name (Last, First, Middle Initial)

C. TRUMP INTERNATIONAL HOTEL

Mailing Address 1100 PENNSYLVANIA AVE. NW

City
WASHINGTONState
DCZip Code
20004Purpose of Disbursement
REIMBURSEMENT [SB21B.44424]: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			0	5			2	0	1	8		

FEC Identification Number

C **Transaction ID : SB21B.44791**

Amount of Each Disbursement this Period

 558.85☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1	5	2	0	4	.	0	3
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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 290 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. TRUMP INTERNATIONAL HOTEL

Mailing Address 1100 PENNSYLVANIA AVE. NW

City
WASHINGTONState
DCZip Code
20004Purpose of Disbursement
REIMBURSEMENT [SB21B.44412]: MEETING EXPENSE: PARKING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			1	7			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.44783**

Amount of Each Disbursement this Period

15.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. TRUMP INTERNATIONAL HOTEL

Mailing Address 1100 PENNSYLVANIA AVE. NW

City
WASHINGTONState
DCZip Code
20004Purpose of Disbursement
REIMBURSEMENT [SB21B.44425]: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	6			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44793**

Amount of Each Disbursement this Period

273.58

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. TRUMP INTERNATIONAL HOTEL

Mailing Address 1100 PENNSYLVANIA AVE. NW

City
WASHINGTONState
DCZip Code
20004Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44474]: EVENT EXPENSE: FACILITY
RENTAL AND CATERING SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	2			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44661**

Amount of Each Disbursement this Period

6500.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 291 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. TRUMP INTERNATIONAL HOTEL

Mailing Address 1100 PENNSYLVANIA AVE. NW

City
WASHINGTONState
DCZip Code
20004Purpose of Disbursement
REIMBURSEMENT [SB21B.44425]: TRAVEL: MEALS

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	9			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44795**

Amount of Each Disbursement this Period

 18.20☒ Memo Item

Full Name (Last, First, Middle Initial)

B. TRUMP INTERNATIONAL HOTEL

Mailing Address 1100 PENNSYLVANIA AVE. NW

City
WASHINGTONState
DCZip Code
20004Purpose of Disbursement
REIMBURSEMENT [SB21B.44425]: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	9			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44796**

Amount of Each Disbursement this Period

 528.77☒ Memo Item

Full Name (Last, First, Middle Initial)

C. TRUMP INTERNATIONAL HOTEL

Mailing Address 1100 PENNSYLVANIA AVE. NW

City
WASHINGTONState
DCZip Code
20004Purpose of Disbursement
REIMBURSEMENT [SB21B.44413]: MEETING EXPENSE: PARKING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	5			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44784**

Amount of Each Disbursement this Period

 17.00☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 292 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. TRUMP INTERNATIONAL HOTEL

Mailing Address 1100 PENNSYLVANIA AVE. NW

City
WASHINGTONState
DCZip Code
20004Purpose of Disbursement
REIMBURSEMENT [SB21B.44425]: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		05		2019

FEC Identification Number

C**Transaction ID : SB21B.44794**

Amount of Each Disbursement this Period

703.52

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. TRUMP INTERNATIONAL HOTEL

Mailing Address 1100 PENNSYLVANIA AVE. NW

City
WASHINGTONState
DCZip Code
20004Purpose of Disbursement
REIMBURSEMENT [SB21B.44413]: MEETING EXPENSE: PARKING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		06		2019

FEC Identification Number

C**Transaction ID : SB21B.44785**

Amount of Each Disbursement this Period

20.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. TRUMP INTERNATIONAL HOTEL

Mailing Address 1100 PENNSYLVANIA AVE. NW

City
WASHINGTONState
DCZip Code
20004Purpose of Disbursement
EVENT EXPENSE: FACILITY RENTAL AND CATERING SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		07		2019

FEC Identification Number

C**Transaction ID : SB21B.44457**

Amount of Each Disbursement this Period

26902.18

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

26902.18

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 293 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. TRUMP INTERNATIONAL HOTEL

Mailing Address 1100 PENNSYLVANIA AVE. NW

City
WASHINGTONState
DCZip Code
20004Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44485]: EVENT EXPENSE: FACILITY
RENTAL AND CATERING SERVICES
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	3			2	0	1	9		

FEC Identification Number

C Transaction ID : SB21B.44741

Amount of Each Disbursement this Period

13000.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. TRUMP INTERNATIONAL HOTEL

Mailing Address 1100 PENNSYLVANIA AVE. NW

City
WASHINGTONState
DCZip Code
20004Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44487]: EVENT EXPENSE: FACILITY
RENTAL AND CATERING SERVICES
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	4			2	0	1	9		

FEC Identification Number

C Transaction ID : SB21B.44750

Amount of Each Disbursement this Period

9406.90

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	4			2	0	1	8		

FEC Identification Number

C Transaction ID : SB21B.44965

Amount of Each Disbursement this Period

11.42

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 294 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	4			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.44970**

Amount of Each Disbursement this Period

10.27

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	4			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.44983**

Amount of Each Disbursement this Period

12.37

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	5			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.44971**

Amount of Each Disbursement this Period

7.83

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 295 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	5			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.44972**

Amount of Each Disbursement this Period

7.73

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	6			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.44982**

Amount of Each Disbursement this Period

11.11

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	4			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.44928**

Amount of Each Disbursement this Period

10.47

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 296 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	8			2	0	1	8		

FEC Identification Number

C **Transaction ID : SB21B.44925**

Amount of Each Disbursement this Period

 11.04☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	9			2	0	1	8		

FEC Identification Number

C **Transaction ID : SB21B.44984**

Amount of Each Disbursement this Period

 15.56☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	7			2	0	1	8		

FEC Identification Number

C **Transaction ID : SB21B.44947**

Amount of Each Disbursement this Period

 14.10☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ► 0.00**TOTAL** This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 297 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	8			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.44941

Amount of Each Disbursement this Period

16.07

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	8			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.44942

Amount of Each Disbursement this Period

10.01

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			0	2			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.44951

Amount of Each Disbursement this Period

9.74

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 298 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				02				2018					

FEC Identification Number

C

Transaction ID : SB21B.44951

Amount of Each Disbursement this Period

11.80

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				02				2018					

FEC Identification Number

C

Transaction ID : SB21B.44952

Amount of Each Disbursement this Period

10.61

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				03				2018					

FEC Identification Number

C

Transaction ID : SB21B.44951

Amount of Each Disbursement this Period

11.72

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 299 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				03				2018					

FEC Identification Number

C

Transaction ID : SB21B.44960

Amount of Each Disbursement this Period

 41.30☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				03				2018					

FEC Identification Number

C

Transaction ID : SB21B.44961

Amount of Each Disbursement this Period

 6.56☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				04				2018					

FEC Identification Number

C

Transaction ID : SB21B.44944

Amount of Each Disbursement this Period

 14.97☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

 0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 300 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				04				2018					

FEC Identification Number

C**Transaction ID : SB21B.44948**

Amount of Each Disbursement this Period

29.06

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				08				2018					

FEC Identification Number

C**Transaction ID : SB21B.44943**

Amount of Each Disbursement this Period

16.62

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				10				2018					

FEC Identification Number

C**Transaction ID : SB21B.44966**

Amount of Each Disbursement this Period

17.42

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 301 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	0			2	0	1	8		

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
Type

FEC Identification Number

C**Transaction ID : SB21B.44967**

Amount of Each Disbursement this Period

9.87

☒ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. UBER

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	2			2	0	1	8		

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
Type

FEC Identification Number

C**Transaction ID : SB21B.44973**

Amount of Each Disbursement this Period

37.37

☒ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. UBER

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	2			2	0	1	8		

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
Type

FEC Identification Number

C**Transaction ID : SB21B.44976**

Amount of Each Disbursement this Period

10.80

☒ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 302 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	4			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.44945**

Amount of Each Disbursement this Period

25.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	6			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.44936**

Amount of Each Disbursement this Period

7.68

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	6			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.44951**

Amount of Each Disbursement this Period

60.55

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 303 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	6			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.44968**

Amount of Each Disbursement this Period

35.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	7			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.44957**

Amount of Each Disbursement this Period

9.62

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	7			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB21B.44958**

Amount of Each Disbursement this Period

10.04

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 304 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M		D	D		Y	Y	Y	Y
10			17			2018			

FEC Identification Number

C**Transaction ID : SB21B.44959**

Amount of Each Disbursement this Period

11.26

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M		D	D		Y	Y	Y	Y
10			17			2018			

FEC Identification Number

C**Transaction ID : SB21B.44962**

Amount of Each Disbursement this Period

45.29

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M		D	D		Y	Y	Y	Y
10			17			2018			

FEC Identification Number

C**Transaction ID : SB21B.44963**

Amount of Each Disbursement this Period

16.35

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 305 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				17				2018					

FEC Identification Number

C

Transaction ID : SB21B.44964

Amount of Each Disbursement this Period

11.93

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				17				2018					

FEC Identification Number

C

Transaction ID : SB21B.44965

Amount of Each Disbursement this Period

28.76

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				18				2018					

FEC Identification Number

C

Transaction ID : SB21B.44945

Amount of Each Disbursement this Period

12.28

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 306 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				21				2018					

FEC Identification Number

C **Transaction ID : SB21B.44935**

Amount of Each Disbursement this Period

 5.81☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				21				2018					

FEC Identification Number

C **Transaction ID : SB21B.44937**

Amount of Each Disbursement this Period

 42.89☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				21				2018					

FEC Identification Number

C **Transaction ID : SB21B.44938**

Amount of Each Disbursement this Period

 24.02☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ► 0.00**TOTAL** This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 307 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.44944

Amount of Each Disbursement this Period

28.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	3			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.44938

Amount of Each Disbursement this Period

11.63

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	3			2	0	1	8		

FEC Identification Number

C

Transaction ID : SB21B.44944

Amount of Each Disbursement this Period

5.34

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 308 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		23		2018

FEC Identification Number

C

Transaction ID : SB21B.44974

Amount of Each Disbursement this Period

50.31

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		23		2018

FEC Identification Number

C

Transaction ID : SB21B.44975

Amount of Each Disbursement this Period

32.04

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		14		2018

FEC Identification Number

C

Transaction ID : SB21B.44933

Amount of Each Disbursement this Period

21.92

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 309 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			14			2018			

FEC Identification Number

C**Transaction ID : SB21B.44934**

Amount of Each Disbursement this Period

18.46

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			27			2018			

FEC Identification Number

C**Transaction ID : SB21B.44953**

Amount of Each Disbursement this Period

11.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			27			2018			

FEC Identification Number

C**Transaction ID : SB21B.44954**

Amount of Each Disbursement this Period

19.90

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 310 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44400]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				04				2018					

FEC Identification Number

C**Transaction ID : SB21B.44878**

Amount of Each Disbursement this Period

16.39

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44400]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				06				2018					

FEC Identification Number

C**Transaction ID : SB21B.44879**

Amount of Each Disbursement this Period

10.59

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44400]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				06				2018					

FEC Identification Number

C**Transaction ID : SB21B.44880**

Amount of Each Disbursement this Period

41.58

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 311 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44400]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				06				2018					

FEC Identification Number

C

Transaction ID : SB21B.44881

Amount of Each Disbursement this Period

14.81

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44400]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				07				2018					

FEC Identification Number

C

Transaction ID : SB21B.44882

Amount of Each Disbursement this Period

21.98

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44400]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				07				2018					

FEC Identification Number

C

Transaction ID : SB21B.44883

Amount of Each Disbursement this Period

38.22

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 312 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44400]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				08				2018					

FEC Identification Number

C**Transaction ID : SB21B.44884**

Amount of Each Disbursement this Period

21.40

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44400]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				12				2018					

FEC Identification Number

C**Transaction ID : SB21B.44885**

Amount of Each Disbursement this Period

17.56

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				12				2018					

FEC Identification Number

C**Transaction ID : SB21B.44978**

Amount of Each Disbursement this Period

10.27

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 313 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				12				2018					

FEC Identification Number

C

Transaction ID : SB21B.44979

Amount of Each Disbursement this Period

25.03

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				13				2018					

FEC Identification Number

C

Transaction ID : SB21B.44980

Amount of Each Disbursement this Period

10.15

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				13				2018					

FEC Identification Number

C

Transaction ID : SB21B.44981

Amount of Each Disbursement this Period

14.35

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 314 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			14			2018			

FEC Identification Number

C

Transaction ID : SB21B.44929

Amount of Each Disbursement this Period

8.90

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44400]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			17			2018			

FEC Identification Number

C

Transaction ID : SB21B.44886

Amount of Each Disbursement this Period

14.37

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			18			2018			

FEC Identification Number

C

Transaction ID : SB21B.44930

Amount of Each Disbursement this Period

14.65

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 315 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44400]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M		D	D		Y	Y	Y	Y	Y	Y
12			19			2018					

FEC Identification Number

C

Transaction ID : SB21B.44887

Amount of Each Disbursement this Period

22.92

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M		D	D		Y	Y	Y	Y	Y	Y
12			19			2018					

FEC Identification Number

C

Transaction ID : SB21B.44931

Amount of Each Disbursement this Period

10.94

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M		D	D		Y	Y	Y	Y	Y	Y
12			19			2018					

FEC Identification Number

C

Transaction ID : SB21B.44932

Amount of Each Disbursement this Period

14.54

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 316 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44400]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				20				2018					

FEC Identification Number

C

Transaction ID : SB21B.44888

Amount of Each Disbursement this Period

 16.71☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44400]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				20				2018					

FEC Identification Number

C

Transaction ID : SB21B.44889

Amount of Each Disbursement this Period

 11.25☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
01				04				2019					

FEC Identification Number

C

Transaction ID : SB21B.4492t

Amount of Each Disbursement this Period

 21.08☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

 0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 317 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	4			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44927**

Amount of Each Disbursement this Period

 8.64☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44415]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	4			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44977**

Amount of Each Disbursement this Period

 9.23☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44401]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	7			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44890**

Amount of Each Disbursement this Period

 12.55☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 318 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44401]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	8			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.44891

Amount of Each Disbursement this Period

3.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44401]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	8			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.44892

Amount of Each Disbursement this Period

7.14

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44397]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	0			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.44873

Amount of Each Disbursement this Period

8.82

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 319 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44397]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	0			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44874**

Amount of Each Disbursement this Period

10.70

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44401]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	0			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44893**

Amount of Each Disbursement this Period

17.47

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44401]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	0			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44894**

Amount of Each Disbursement this Period

8.91

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 320 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44401]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1				1	0		2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44895**

Amount of Each Disbursement this Period

10.64

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44401]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1				1	1		2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44896**

Amount of Each Disbursement this Period

15.91

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44401]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1				1	1		2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44897**

Amount of Each Disbursement this Period

10.52

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 321 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44401]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	1			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44898**

Amount of Each Disbursement this Period

9.95

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44401]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	1			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44899**

Amount of Each Disbursement this Period

11.03

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44401]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	5			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44900**

Amount of Each Disbursement this Period

9.90

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 322 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44401]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	5			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44901**

Amount of Each Disbursement this Period

 19.15☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44404]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	5			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44911**

Amount of Each Disbursement this Period

 34.45☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44401]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	6			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.44902**

Amount of Each Disbursement this Period

 8.48☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 323 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44404]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	6			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.44910

Amount of Each Disbursement this Period

40.42

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44401]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	8			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.44903

Amount of Each Disbursement this Period

32.81

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44404]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	3			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.44906

Amount of Each Disbursement this Period

37.59

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 324 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44404]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	3			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44907**

Amount of Each Disbursement this Period

29.28

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44404]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	3			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44908**

Amount of Each Disbursement this Period

27.31

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44404]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	3			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44905**

Amount of Each Disbursement this Period

25.33

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 325 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44416]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	8			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44986**

Amount of Each Disbursement this Period

22.16

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44401]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			3	0			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44904**

Amount of Each Disbursement this Period

16.37

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44401]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			3	1			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44905**

Amount of Each Disbursement this Period

30.25

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 326 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44416]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		01		2019

FEC Identification Number

C

Transaction ID : SB21B.44987

Amount of Each Disbursement this Period

14.35

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44416]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		01		2019

FEC Identification Number

C

Transaction ID : SB21B.44988

Amount of Each Disbursement this Period

16.69

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44416]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		01		2019

FEC Identification Number

C

Transaction ID : SB21B.44988

Amount of Each Disbursement this Period

27.58

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 327 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44416]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		04		2019

FEC Identification Number

C

Transaction ID : SB21B.44990

Amount of Each Disbursement this Period

17.99

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44416]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		05		2019

FEC Identification Number

C

Transaction ID : SB21B.44991

Amount of Each Disbursement this Period

6.25

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44416]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		05		2019

FEC Identification Number

C

Transaction ID : SB21B.44992

Amount of Each Disbursement this Period

11.80

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 328 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44416]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	5			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44993**

Amount of Each Disbursement this Period

27.69

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44477]: GROUND TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	6			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44680**

Amount of Each Disbursement this Period

14.52

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44416]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	6			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.45014**

Amount of Each Disbursement this Period

11.53

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 329 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44416]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		06		2019

FEC Identification Number

C

Transaction ID : SB21B.45015

Amount of Each Disbursement this Period

19.13

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44416]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		06		2019

FEC Identification Number

C

Transaction ID : SB21B.45016

Amount of Each Disbursement this Period

25.13

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44416]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		06		2019

FEC Identification Number

C

Transaction ID : SB21B.45018

Amount of Each Disbursement this Period

9.28

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 330 OF 350

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCO

State
CA

Zip Code
94103

Purpose of Disbursement
REIMBURSEMENT [SB21B.44416]: TRAVEL: GROUND
TRANSPORTATION
Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 22 / 2019

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.44994

Amount of Each Disbursement this Period

[REDACTED] 8.75

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCO

State
CA

Zip Code
94103

Purpose of Disbursement
REIMBURSEMENT [SB21B.44416]: TRAVEL: GROUND
TRANSPORTATION
Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 28 / 2019

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.44995

Amount of Each Disbursement this Period

[REDACTED] 9.78

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCO

State
CA

Zip Code
94103

Purpose of Disbursement
REIMBURSEMENT [SB21B.44416]: TRAVEL: GROUND
TRANSPORTATION
Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 28 / 2019

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.44996

Amount of Each Disbursement this Period

[REDACTED] 22.86

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

[REDACTED] 0.00

[REDACTED]

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 331 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44406]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		01		2019

FEC Identification Number

C

Transaction ID : SB21B.44917

Amount of Each Disbursement this Period

34.81

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44406]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		01		2019

FEC Identification Number

C

Transaction ID : SB21B.44918

Amount of Each Disbursement this Period

22.24

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44406]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		01		2019

FEC Identification Number

C

Transaction ID : SB21B.44919

Amount of Each Disbursement this Period

14.90

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 332 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44406]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	1			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.44920

Amount of Each Disbursement this Period

19.66

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44406]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	1			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.44921

Amount of Each Disbursement this Period

21.55

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44416]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	1			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.44997

Amount of Each Disbursement this Period

49.42

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 333 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44416]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	1			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44998**

Amount of Each Disbursement this Period

10.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44416]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	1			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44999**

Amount of Each Disbursement this Period

21.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44416]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	1			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.45000**

Amount of Each Disbursement this Period

30.56

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 334 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44416]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	1			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.45001

Amount of Each Disbursement this Period

14.37

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44416]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	5			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.45002

Amount of Each Disbursement this Period

10.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44416]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	5			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.45003

Amount of Each Disbursement this Period

16.26

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 335 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44416]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	5			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.45004**

Amount of Each Disbursement this Period

 16.85☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44416]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	6			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.45005**

Amount of Each Disbursement this Period

 12.90☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44416]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	6			2	0	1	9		

FEC Identification Number

C **Transaction ID : SB21B.45006**

Amount of Each Disbursement this Period

 40.57☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 336 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44416]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	6			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.45007

Amount of Each Disbursement this Period

22.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44416]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	6			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.45008

Amount of Each Disbursement this Period

52.64

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44416]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	6			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.45008

Amount of Each Disbursement this Period

16.35

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 337 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44416]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	6			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.45010**

Amount of Each Disbursement this Period

54.49

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44416]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	6			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.45017**

Amount of Each Disbursement this Period

16.07

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44406]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	9			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44916**

Amount of Each Disbursement this Period

10.20

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 338 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44416]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	9			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.45011**

Amount of Each Disbursement this Period

9.99

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44416]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	0			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44985**

Amount of Each Disbursement this Period

12.19

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44406]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	1			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44911**

Amount of Each Disbursement this Period

26.14

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 339 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44416]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	3			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.45013**

Amount of Each Disbursement this Period

11.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44406]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	4			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44913**

Amount of Each Disbursement this Period

7.82

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44406]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	4			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44914**

Amount of Each Disbursement this Period

22.40

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 340 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44416]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	4			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.45012

Amount of Each Disbursement this Period

48.31

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44406]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	9			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.44912

Amount of Each Disbursement this Period

21.07

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44407]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	1			2	0	1	9		

FEC Identification Number

C

Transaction ID : SB21B.44924

Amount of Each Disbursement this Period

23.34

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 341 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44407]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	7			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44922**

Amount of Each Disbursement this Period

32.80

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44407]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	7			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44923**

Amount of Each Disbursement this Period

32.10

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44398]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44871**

Amount of Each Disbursement this Period

8.75

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 342 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44398]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44876**

Amount of Each Disbursement this Period

54.80

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44398]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44877**

Amount of Each Disbursement this Period

18.96

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44420]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.45015**

Amount of Each Disbursement this Period

10.91

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 343 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.44420]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	3			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.45020**

Amount of Each Disbursement this Period

11.36

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UNITED AIRLINES

Mailing Address 233 SOUTH WACKER DR

City
CHICAGOState
ILZip Code
60606Purpose of Disbursement
REIMBURSEMENT [SB21B.44425]: TRAVEL: AIR
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify)

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	6			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44833**

Amount of Each Disbursement this Period

464.15

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UNITED AIRLINES

Mailing Address 233 SOUTH WACKER DR

City
CHICAGOState
ILZip Code
60606Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44482]: TRAVEL: AIR
Candidate NameCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	9			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44721**

Amount of Each Disbursement this Period

1908.30

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 344 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UNITED AIRLINES

Mailing Address 233 S. WACKER DR

City
CHICAGOState
ILZip Code
60606

Purpose of Disbursement

1ST BANKCARD PMT [SB21B.44482]: TRAVEL: AIR

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	3				2	5						2	0	1	9

FEC Identification Number

C**Transaction ID : SB21B.44724**

Amount of Each Disbursement this Period

350.30

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UNITED AIRLINES

Mailing Address 233 S. WACKER DR

City
CHICAGOState
ILZip Code
60606

Purpose of Disbursement

1ST BANKCARD PMT [SB21B.44482]: TRAVEL: AIR

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	3				2	5						2	0	1	9

FEC Identification Number

C**Transaction ID : SB21B.44725**

Amount of Each Disbursement this Period

724.30

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UNITED AIRLINES

Mailing Address 233 S. WACKER DR

City
CHICAGOState
ILZip Code
60606

Purpose of Disbursement

1ST BANKCARD PMT [SB21B.44482]: TRAVEL: AIR

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	3				2	5						2	0	1	9

FEC Identification Number

C**Transaction ID : SB21B.44726**

Amount of Each Disbursement this Period

19.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 345 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UNITED AIRLINES

Mailing Address 233 S. WACKER DR

City
CHICAGOState
ILZip Code
60606Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44482]: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	5			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44727**

Amount of Each Disbursement this Period

19.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UNITED AIRLINES

Mailing Address 233 S. WACKER DR

City
CHICAGOState
ILZip Code
60606Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44483]: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	7			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44734**

Amount of Each Disbursement this Period

237.30

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UNITED AIRLINES

Mailing Address 233 S. WACKER DR

City
CHICAGOState
ILZip Code
60606Purpose of Disbursement
1ST BANKCARD PMT [SB21B.44483]: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	7			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.44735**

Amount of Each Disbursement this Period

15.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 346 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UNITED STATES DEPARTMENT OF THE TREASURY

Mailing Address 1500 PENNSYLVANIA AVE., N.W.

City
WASHINGTONState
DCZip Code
20220Purpose of Disbursement
TRAVEL EXPENSES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		04		2019

FEC Identification Number

C**Transaction ID : SB21B.44459**

Amount of Each Disbursement this Period

258.63

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. UNITED STATES DEPARTMENT OF THE TREASURY

Mailing Address 1500 PENNSYLVANIA AVE., N.W.

City
WASHINGTONState
DCZip Code
20220Purpose of Disbursement
TRAVEL: AIRFARE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		04		2019

FEC Identification Number

C**Transaction ID : SB21B.44460**

Amount of Each Disbursement this Period

2898.31

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. UNITED STATES DEPARTMENT OF THE TREASURY

Mailing Address 1500 PENNSYLVANIA AVE., N.W.

City
WASHINGTONState
DCZip Code
20220Purpose of Disbursement
TRAVEL: AIRFARE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		04		2019

FEC Identification Number

C**Transaction ID : SB21B.44461**

Amount of Each Disbursement this Period

30171.78

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

33328.72

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 347 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UNITED STATES DEPARTMENT OF THE TREASURY

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		10		2019

Mailing Address 1500 PENNSYLVANIA AVE., N.W.

City
WASHINGTONState
DCZip Code
20220Purpose of Disbursement
TAX PAYMENT

Candidate Name

Category/
Type
 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.44462**

Amount of Each Disbursement this Period

2835.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. VINEYARD VINES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		16		2019

Mailing Address 181 HARBOR DR

City
STAMFORDState
CTZip Code
06902Purpose of Disbursement
CONTRIBUTOR COLLATERAL

Candidate Name

Category/
Type
 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.44463**

Amount of Each Disbursement this Period

8251.56

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. VIRGINIA DEPARTMENT OF TAXATION

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		11		2019

Mailing Address PO BOX 1880

City
RICHMONDState
VAZip Code
23218Purpose of Disbursement
TAX PAYMENT

Candidate Name

Category/
Type
 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.44464**

Amount of Each Disbursement this Period

500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

11586.56

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 348 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. VIRGINIA DEPARTMENT OF TAXATION

Mailing Address PO BOX 1880

City
RICHMONDState
VAZip Code
23218Purpose of Disbursement
TAX PAYMENT

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		07		2019

FEC Identification Number

C**Transaction ID : SB21B.44465**

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WALSH, BRIAN, , ,Mailing Address C/O AMERICA FIRST ACTION INC
1400 CRYSTAL DRIVE STE 850City
ARLINGTONState
VAZip Code
22202Purpose of Disbursement
REIMBURSEMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		08		2019

FEC Identification Number

C**Transaction ID : SB21B.44403**

Amount of Each Disbursement this Period

4637.56

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WALSH, BRIAN, , ,Mailing Address C/O AMERICA FIRST ACTION INC
1400 CRYSTAL DRIVE STE 850City
ARLINGTONState
VAZip Code
22202Purpose of Disbursement
REIMBURSEMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		26		2019

FEC Identification Number

C**Transaction ID : SB21B.44404**

Amount of Each Disbursement this Period

428.36

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

7065.92

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 349 OF 350

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. WALSH, BRIAN, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		18		2019

Mailing Address C/O AMERICA FIRST ACTION INC
1400 CRYSTAL DRIVE STE 850City
ARLINGTONState
VAZip Code
22202Purpose of Disbursement
REIMBURSEMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.44405**

Amount of Each Disbursement this Period

26.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WALSH, BRIAN, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		11		2019

Mailing Address C/O AMERICA FIRST ACTION INC
1400 CRYSTAL DRIVE STE 850City
ARLINGTONState
VAZip Code
22202Purpose of Disbursement
REIMBURSEMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.44406**

Amount of Each Disbursement this Period

4544.46

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WALSH, BRIAN, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		28		2019

Mailing Address C/O AMERICA FIRST ACTION INC
1400 CRYSTAL DRIVE STE 850City
ARLINGTONState
VAZip Code
22202Purpose of Disbursement
REIMBURSEMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.44407**

Amount of Each Disbursement this Period

2053.57

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

6624.03

TOTAL This Period (last page this line number only).....▶

990589.28

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 350 OF 350

<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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. CREIGHTON, LAVINA, , ,

Mailing Address 407 PLUMB ST

City
ATWOODState
KSZip Code
67730Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	4			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB28A.45040**

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. LEGER, CATHERINE, , ,

Mailing Address 96 EDENDALE STREET

City
SPRINGFIELDState
MAZip Code
01104Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	7			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB28A.45078**

Amount of Each Disbursement this Period

965.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1065.00

1065.00