

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

AX PAC

ADDRESS (number and street) PO Box 538

Check if different than previously reported. (ACC) Wausau WI 54402

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

C C00506535

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

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

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

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

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

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

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

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

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

Reisner, Michele, , ,

Type or Print Name of Treasurer _____

Signature of Treasurer Reisner, Michele, , , [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 04 / 20 / 2018

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

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

AX PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>	<input type="text" value="73397.06"/>	<input type="text" value="73397.06"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="30930.20"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="21103.75"/>	<input type="text" value="21103.75"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="52033.95"/>	<input type="text" value="94500.81"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="32005.49"/>	<input type="text" value="74472.35"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="20028.46"/>	<input type="text" value="20028.46"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

AX PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	5000.00	5000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	5000.00	5000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	14000.00	14000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	19000.00	19000.00
12. Transfers From Affiliated/Other Party Committees.....	2103.75	2103.75
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	21103.75	21103.75
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	21103.75	21103.75

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	24505.49	37972.35
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	24505.49	37972.35
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	7500.00	36500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	32005.49	74472.35
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	32005.49	74472.35

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)	19000.00	19000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	19000.00	19000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	24505.49	37972.35
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	24505.49	37972.35

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

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

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

NAME OF COMMITTEE (In Full)
AX PAC

A. FOREST COUNTY POTAWATOMI COMMUNITY

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

Mailing Address PO BOX 340

City CRANDON	State WI	Zip Code 54520-0340
-----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	21	/	2018

Transaction ID : SA11A.59412

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B.

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

C.

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

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

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

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

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)
AX PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. AMERICAN DENTAL ASSOCIATION PAC		Date of Receipt MM / DD / YYYY 03 / 21 / 2018 Transaction ID : SA11C.59413
Mailing Address 1111 14TH STREET NW SUITE 1100		Amount of Each Receipt this Period 1000.00
City WASHINGTON	State DC	Zip Code 20005-5627
FEC ID number of contributing federal political committee. C C00000729		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual)	Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. AMERICAN LAND TITLE ASSOCIATION TITLE INDUSTRY PAC		Date of Receipt MM / DD / YYYY 03 / 21 / 2018 Transaction ID : SA11C.59417
Mailing Address 1800 M ST NW		Amount of Each Receipt this Period 5000.00
City WASHINGTON	State DC	Zip Code 20036-5802
FEC ID number of contributing federal political committee. C C00012914		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual)	Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. AT&T FEDERAL PAC		Date of Receipt MM / DD / YYYY 03 / 21 / 2018 Transaction ID : SA11C.59415
Mailing Address 208 S AKARD STREET FRONT 3521		Amount of Each Receipt this Period 2500.00
City DALLAS	State TX	Zip Code 75202-4295
FEC ID number of contributing federal political committee. C C00109017		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual)	Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 2500.00	

SUBTOTAL of Receipts This Page (optional).....▶	8500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 17
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
AX PAC

A. BROWNSTEIN HYATT FARBER SCHRECK PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 410 SEVENTEENTH STREET
 SUITE 2200
 City DENVER State CO Zip Code 80202-4432
 FEC ID number of contributing federal political committee. **C** C00390583
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 03 / 21 / 2018
Transaction ID : SA11C.59416
 Amount of Each Receipt this Period 2000.00
 Memo Item
CONTRIBUTION

B. PPG INDUSTRIES, INC. PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address ONE PPG PLACE
 City PITTSBURGH State PA Zip Code 15222-5415
 FEC ID number of contributing federal political committee. **C** C00034298
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 03 / 21 / 2018
Transaction ID : SA11C.59418
 Amount of Each Receipt this Period 2500.00
 Memo Item
CONTRIBUTION

C. SECURITIES INDUSTRY & FINANCIAL MARKETS ASSOCIATION PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1101 NEW YORK AVE NW
 STE 800
 City WASHINGTON State DC Zip Code 20005-4279
 FEC ID number of contributing federal political committee. **C** C00431312
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 21 / 2018
Transaction ID : SA11C.59414
 Amount of Each Receipt this Period 1000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5500.00
TOTAL This Period (last page this line number only).....	14000.00

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

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

NAME OF COMMITTEE (In Full)
AX PAC

A. DUFFY VICTORY FUND
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219-1891
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00544312

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2103.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2018

Transaction ID : SA12.59973

Amount of Each Receipt this Period
2103.75

Memo Item
TRANSFER
TRANSFER OF JOINT FUNDRAISING PROCEEDS

B. UIHLEIN, ELIZABETH, A., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1396 NORTH WAUKEGAN ROAD

City LAKE FOREST	State IL	Zip Code 60045-1147
---------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2018

Transaction ID : SA12.59974

Amount of Each Receipt this Period
2700.00

Memo Item
TRANSFER
JFC ATTRIB: DUFFY VICTORY FUND

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

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	2103.75
TOTAL This Period (last page this line number only).....	2103.75

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
AX PAC

Full Name (Last, First, Middle Initial) A. RIVER VALLEY BANK CARDMEMBER SERVICES		Date of Disbursement MM / DD / YYYY 03 / 01 / 2018
Mailing Address P.O. BOX 790408		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I9803 Amount of Each Disbursement this Period [REDACTED] 12955.94
City ST. LOUIS	State MO	Zip Code 63179-1864
Purpose of Disbursement CREDIT CARD PAYMENT		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 03 / 01 / 2018
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I9812 Amount of Each Disbursement this Period [REDACTED] 665.91
City FORT WORTH	State TX	Zip Code 76155
Purpose of Disbursement TRAVEL		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. BEST BUY		Date of Disbursement MM / DD / YYYY 03 / 01 / 2018
Mailing Address 7601 PENN AVE S		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I9809 Amount of Each Disbursement this Period [REDACTED] 953.73
City RICHFIELD	State MN	Zip Code 55423
Purpose of Disbursement OFFICE SUPPLIES		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 12955.94
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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)
AX PAC

Full Name (Last, First, Middle Initial) A. CAPITOL HILL CLUB		Date of Disbursement MM / DD / YYYY 03 / 01 / 2018
Mailing Address 300 FIRST STRET SE		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I9807 Amount of Each Disbursement this Period [REDACTED] 348.55
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement FOOD/BEVERAGE		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. CAREY		Date of Disbursement MM / DD / YYYY 03 / 01 / 2018
Mailing Address 4530 WISCONSIN AVE NW		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I9827 Amount of Each Disbursement this Period [REDACTED] 634.37
City WASHINGTON	State DC	Zip Code 20016
Purpose of Disbursement TRAVEL		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. DELTA AIRLINES		Date of Disbursement MM / DD / YYYY 03 / 01 / 2018
Mailing Address 1030 DELTA BLVD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I9814 Amount of Each Disbursement this Period [REDACTED] 7062.99
City ATLANTA	State GA	Zip Code 30354-7561
Purpose of Disbursement TRAVEL		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 0.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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)
AX PAC

Full Name (Last, First, Middle Initial) A. RITZ CARLTON		Date of Disbursement MM / DD / YYYY 03 / 01 / 2018	
Mailing Address 455 GRAND BAY DR.		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I9825 Amount of Each Disbursement this Period 2346.62	
City KEY BISCAIYNE	State FL	Zip Code 33149	Category/ Type
Purpose of Disbursement TRAVEL			
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. THE UPS STORE		Date of Disbursement MM / DD / YYYY 03 / 01 / 2018	
Mailing Address 316 PENNSYLVANIA AVENUE SE SUITE 300		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I9806 Amount of Each Disbursement this Period 200.93	
City WASHINGTON	State DC	Zip Code 20003	Category/ Type
Purpose of Disbursement DELIVERY			
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. VERIZON		Date of Disbursement MM / DD / YYYY 03 / 01 / 2018	
Mailing Address P.O. BOX 25505		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I9810 Amount of Each Disbursement this Period 257.59	
City LEHIGH VALLEY	State PA	Zip Code 18002	Category/ Type
Purpose of Disbursement PHONE SERVICE			
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
AX PAC

Full Name (Last, First, Middle Initial)
A. CMDI, INC.

Date of Disbursement
MM / DD / YYYY
03 / 19 / 2018

Mailing Address 1593 SPRING HILL ROAD
SUITE 400

City VIENNA State VA Zip Code 22182-2245

Purpose of Disbursement DATABASE SERVICES

Candidate Name

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

State: District:

FEC Identification Number
C
Transaction ID : **SB21B.I9805**
Amount of Each Disbursement this Period
250.00

Memo Item

Full Name (Last, First, Middle Initial)
B. RIVER VALLEY BANK CARDMEMBER SERVICES

Date of Disbursement
MM / DD / YYYY
03 / 21 / 2018

Mailing Address P.O. BOX 790408

City ST. LOUIS State MO Zip Code 63179-1864

Purpose of Disbursement CREDIT CARD PAYMENT

Candidate Name

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

State: District:

FEC Identification Number
C
Transaction ID : **SB21B.I9804**
Amount of Each Disbursement this Period
11299.55

Memo Item

Full Name (Last, First, Middle Initial)
C. DELTA AIRLINES

Date of Disbursement
MM / DD / YYYY
03 / 21 / 2018

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354-7561

Purpose of Disbursement TRAVEL

Candidate Name

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

State: District:

FEC Identification Number
C
Transaction ID : **SB21B.I9829**
Amount of Each Disbursement this Period
7834.10

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 11549.55

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
AX PAC

Full Name (Last, First, Middle Initial)
A. DISNEY RESORT

Mailing Address P.O. BOX 10000

City LAKE BUENA VISTA State CA Zip Code 32830

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
03 / 21 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I9828

Amount of Each Disbursement this Period: 3455.45

Memo Item

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)
C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

TOTAL This Period (last page this line number only)..... ▶ 24505.49

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
AX PAC

Full Name (Last, First, Middle Initial) A. MARSHA FOR SENATE		Date of Disbursement MM / DD / YYYY 03 / 01 / 2018	
Mailing Address 6103 MURRAY LANE			
City BRENTWOOD	State TN	Zip Code 37027	
Purpose of Disbursement CONTRIBUTION TO COMMITTEE		FEC Identification Number C 000376939 Transaction ID : SB23.I9832	
Candidate Name BLACKBURN, MARSHA , MRS. ,		Amount of Each Disbursement this Period 1000.00	
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: TN District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. RICK FOR CONGRESS		Date of Disbursement MM / DD / YYYY 03 / 15 / 2018	
Mailing Address 404 BOSTON HOLLOW ROAD			
City ELIZABETH	State PA	Zip Code 15037	
Purpose of Disbursement CONTRIBUTION TO COMMITTEE		FEC Identification Number C 000658708 Transaction ID : SB23.I9831	
Candidate Name SACCONI, RICK, , ,		Amount of Each Disbursement this Period - 1000.00 VOID: CONTRIBUTION TO COMMITTEE	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: PA District: 18	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. CATHY MCMORRIS RODGERS FOR CONGRESS		Date of Disbursement MM / DD / YYYY 03 / 30 / 2018	
Mailing Address 32 EAST 25TH			
City SPOKANE	State WA	Zip Code 99203	
Purpose of Disbursement CONTRIBUTION TO COMMITTEE		FEC Identification Number C 000390476 Transaction ID : SB23.I9837	
Candidate Name MCMORRIS RODGERS, CATHY, , ,		Amount of Each Disbursement this Period 2500.00	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: WA District: 05	<input type="checkbox"/> Memo Item		

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

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

2500.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
AX PAC

Full Name (Last, First, Middle Initial) A. CLAUDIA TENNEY FOR CONGRESS			Date of Disbursement MM / DD / YYYY 03 / 30 / 2018		
Mailing Address 12 SLAYTONBUSH LANE					
City UTICA		State VA	Zip Code 13501		
Purpose of Disbursement CONTRIBUTION TO COMMITTEE				<input type="checkbox"/>	
Candidate Name TENNEY, CLAUDIA, , ,				Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: VA District: 22		FEC Identification Number C C00632828 Transaction ID : SB23.I9834 Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) B. COFFMAN FOR CONGRESS			Date of Disbursement MM / DD / YYYY 03 / 30 / 2018		
Mailing Address 4950 S YOSEMITE ST F2 #511					
City GREENWOOD		State CO	Zip Code 80111		
Purpose of Disbursement CONTRIBUTION TO COMMITTEE				<input type="checkbox"/>	
Candidate Name COFFMAN, MIKE , REP., ,				Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: CO District: 06		FEC Identification Number C C00497180 Transaction ID : SB23.I9835 Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) C. GARRET GRAVES FOR CONGRESS			Date of Disbursement MM / DD / YYYY 03 / 30 / 2018		
Mailing Address 2805 KLEINERT AVENUE					
City BATON ROUG		State LA	Zip Code 70806		
Purpose of Disbursement CONTRIBUTION TO COMMITTEE				<input type="checkbox"/>	
Candidate Name GRAVES, GARRET, , ,				Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: LA District: 06		FEC Identification Number C C00558486 Transaction ID : SB23.I9833 Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Memo Item			

SUBTOTAL of Disbursements This Page (optional).....▶		3000.00
TOTAL This Period (last page this line number only).....▶		

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
AX PAC

Full Name (Last, First, Middle Initial)
A. MARSHA FOR SENATE

Mailing Address 6103 MURRAY LANE

City BRENTWOOD State TN Zip Code 37027

Purpose of Disbursement
CONTRIBUTION TO COMMITTEE

Candidate Name
BLACKBURN, MARSHA , MRS. ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: TN District:

Date of Disbursement
MM / DD / YYYY
03 / 30 / 2018

FEC Identification Number

C C00376939

Transaction ID : SB23.I9838

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)
B. SMUCKER FOR CONGRESS

Mailing Address 248 STEEL WAY
PO BOX 7066

City LANCASTER State PA Zip Code 17601

Purpose of Disbursement
CONTRIBUTION TO COMMITTEE

Candidate Name
SMUCKER, LLOYD , K., ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: PA District: 16

Date of Disbursement
MM / DD / YYYY
03 / 30 / 2018

FEC Identification Number

C C00599464

Transaction ID : SB23.I9836

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)
C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

Date of Disbursement
MM / DD / YYYY

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)..... ▶

2000.00

7500.00