

# 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

New Day for America

ADDRESS (number and street) 4679 Winterset Drive

Check if different than previously reported. (ACC) Columbus OH 43220

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

C C00581868

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

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

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

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

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

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

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

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

5. Covering Period M M M / D D D / Y Y Y Y Y Y Y Y through M M M / D D D / Y Y Y Y Y Y Y Y

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

Yuskewich, J., Matthew, ,

Type or Print Name of Treasurer

Signature of Treasurer Yuskewich, J., Matthew, , [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y Y Y

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

Office Use Only									
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**New Day for America**

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="2017"/>	<input type="text" value="250395.60"/>	<input type="text" value="250395.60"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="250395.60"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="279530.99"/>	<input type="text" value="279530.99"/>
(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="529926.59"/>	<input type="text" value="529926.59"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="199694.56"/>	<input type="text" value="199694.56"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="330232.03"/>	<input type="text" value="330232.03"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> 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

New Day for America

Report Covering the Period: From: 01 / 01 / 2017 To: 06 / 30 / 2017

I. Receipts

COLUMN A  
Total This Period

COLUMN B  
Calendar Year-to-Date

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).....	266042.00	266042.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	266042.00	266042.00
(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) .....	266042.00	266042.00
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).....	204.00	204.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	13284.99	13284.99
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)).....▶	279530.99	279530.99
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	279530.99	279530.99

**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 .....	199694.56	199694.56
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	199694.56	199694.56
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	199694.56	199694.56
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	199694.56	199694.56

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	266042.00	266042.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	266042.00	266042.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	199694.56	199694.56
37. Offsets to Operating Expenditures (from Line 15, page 3).....	204.00	204.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	199490.56	199490.56

**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 49
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**New Day for America**

**A. Brachman, Judith, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 311 N Drexel Avenue  
 City Columbus State OH Zip Code 43209  
 Date of Receipt 05 / 22 / 2017  
 Transaction ID : SA11AI.8085  
 Amount of Each Receipt this Period 10000.00  
 Memo Item

FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

**B. BURGESS & NIPLE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5085 REED ROAD  
 City COLUMBUS State OH Zip Code 43220  
 Date of Receipt 05 / 30 / 2017  
 Transaction ID : SA11AI.8086  
 Amount of Each Receipt this Period 20000.00  
 Memo Item

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 ▼ 20000.00

**C. DAVIDSON, JOANN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6639 FORRESTER WAY  
 City REYNOLDSBURG State OH Zip Code 43068  
 Date of Receipt 04 / 06 / 2017  
 Transaction ID : SA11AI.8079  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) JAD & ASSOCIATES Occupation (for Individual) CONSULTANT  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 35000.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 49
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**New Day for America**

**A. Luczo, Stephen, J., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 277  
 City Los Gatos State CA Zip Code 85031  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Seagate Technology Occupation (for Individual) Business Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 28 / 2017  
**Transaction ID : SA11AI.8081**  
 Amount of Each Receipt this Period  
 100000.00  
 Memo Item

**B. Luczo, Stephen, J., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 277  
 City Los Gatos State CA Zip Code 85031  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Seagate Technology Occupation (for Individual) Business Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2017  
**Transaction ID : SA11AI.8088**  
 Amount of Each Receipt this Period  
 100000.00  
 Memo Item

**C. SCIOTO DOWNS INC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6000 S HIGH STREET  
 City COLUMBUS State OH Zip Code 43207  
 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 ▼ 25000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 11 / 2017  
**Transaction ID : SA11AI.8083**  
 Amount of Each Receipt this Period  
 25000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	225000.00
<b>TOTAL</b> 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 49
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**New Day for America**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Wendt, Gregory, , ,

Mailing Address 1 Muir Loop

City San Francisco	State CA	Zip Code 94129
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Capital Group	Occupation (for Individual) Finance
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
6042.00

Date of Receipt  
MM / DD / YYYY  
02 / 03 / 2017

**Transaction ID : SA11A1.8179**

Amount of Each Receipt this Period  
6042.00

Memo Item  
In-kind - NET JETS FLIGHT

**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  
MM / DD / YYYY

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  
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6042.00
<b>TOTAL</b> This Period (last page this line number only).....	266042.00



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

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

FOR LINE NUMBER: PAGE 9 OF 49  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**New Day for America**

**A. ODJFS**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 182404  
 City Columbus State OH Zip Code 43218  
 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 ▼ 204.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 26 / 2017  
**Transaction ID : SA15.8173**  
 Amount of Each Receipt this Period  
 204.00  
 Memo Item

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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period  
 Memo Item

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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	204.00
<b>TOTAL</b> This Period (last page this line number only).....▶	204.00

**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 10 OF 49
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**New Day for America**

**A. EDonation 5 Account**

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

Mailing Address 117 North Saint Asaph Street

City Alexandria	State VA	Zip Code 22314
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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 ▼ **278.00**

Date of Receipt: **03 / 14 / 2017**  
**Transaction ID : SA17.8170**

Amount of Each Receipt this Period: **125.50**

Memo Item

**B. EDonation 5 Account**

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

Mailing Address 117 North Saint Asaph Street

City Alexandria	State VA	Zip Code 22314
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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 ▼ **5617.50**

Date of Receipt: **04 / 10 / 2017**  
**Transaction ID : SA17.8171**

Amount of Each Receipt this Period: **5339.50**

Memo Item

**C. EDonation 5 Account**

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

Mailing Address 117 North Saint Asaph Street

City Alexandria	State VA	Zip Code 22314
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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 ▼ **8317.00**

Date of Receipt: **05 / 08 / 2017**  
**Transaction ID : SA17.8175**

Amount of Each Receipt this Period: **2699.50**

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>8164.50</b>
<b>TOTAL</b> 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 11 OF 49
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**New Day for America**

**A. EDonation 5 Account**

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

Mailing Address 117 North Saint Asaph Street

City Alexandria	State VA	Zip Code 22314
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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 ▼  
11362.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		12		2017

**Transaction ID : SA17.8177**

Amount of Each Receipt this Period  
3045.00

Memo Item

**B. Right Country Lists**

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

Mailing Address 117 North Saint Asaph Street

City Alexandria	State VA	Zip Code 22314
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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 ▼  
1922.99

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2017

**Transaction ID : SA17.8176**

Amount of Each Receipt this Period  
1922.99

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
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Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4967.99
<b>TOTAL</b> This Period (last page this line number only).....▶	13132.49

**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 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)  
**New Day for America**

Full Name (Last, First, Middle Initial) <b>A. AH Twelve 81, LLC</b>		Date of Disbursement MM / DD / YYYY 02 / 13 / 2017
Mailing Address PO Box 340069		FEC Identification Number C <b>Transaction ID : SB21B.8110</b> Amount of Each Disbursement this Period 2500.00
City Austin	State TX	
Zip Code 78734	Purpose of Disbursement FUNDRAISING CONSULTING FEE	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. American Express</b>		Date of Disbursement MM / DD / YYYY 01 / 11 / 2017
Mailing Address PO Box 299051		FEC Identification Number C <b>Transaction ID : SB21B.8101</b> Amount of Each Disbursement this Period 349.72
City Ft. Lauderdale	State FL	
Zip Code 33329	Purpose of Disbursement CREDIT CARD PAYMENT	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. American Express</b>		Date of Disbursement MM / DD / YYYY 02 / 02 / 2017
Mailing Address PO Box 299051		FEC Identification Number C <b>Transaction ID : SB21B.8103</b> Amount of Each Disbursement this Period 152.99
City Ft. Lauderdale	State FL	
Zip Code 33329	Purpose of Disbursement CREDIT CARD PAYMENT	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

3002.71

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address PO Box 299051

City  
Ft. Lauderdale

State  
FL

Zip Code  
33329

Purpose of Disbursement  
CREDIT CARD PAYMENT

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.8116**  
Amount of Each Disbursement this Period  
[ ] 11775.68

Memo Item

Full Name (Last, First, Middle Initial)

**B. Southwest Air**

Mailing Address PO Box 36647-1CR

City  
Dallas

State  
TX

Zip Code  
75235

Purpose of Disbursement  
Plane Ticket

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

Category/  
Type

Date of Disbursement

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

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.8116.C**  
Amount of Each Disbursement this Period  
[ ] 321.94

Memo Item

Full Name (Last, First, Middle Initial)

**C. Southwest Air**

Mailing Address PO Box 36647-1CR

City  
Dallas

State  
TX

Zip Code  
75235

Purpose of Disbursement  
Plane Ticket

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.8116.**  
Amount of Each Disbursement this Period  
[ ] 565.54

Memo Item

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

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

[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
						1	1	7	5

[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
-----	-----	-----	-----	-----	-----	-----	-----	-----	-----

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**New Day for America**

Full Name (Last, First, Middle Initial)

### A. Southwest Air

Mailing Address PO Box 36647-1CR

City Dallas State TX Zip Code 75235

Purpose of Disbursement  
Travel Fee

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		27		2017

FEC Identification Number

C

Transaction ID : SB21B.8116.3  
Amount of Each Disbursement this Period

15.00

Memo Item

Full Name (Last, First, Middle Initial)

### B. Southwest Air

Mailing Address PO Box 36647-1CR

City Dallas State TX Zip Code 75235

Purpose of Disbursement  
Plane Ticket

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		27		2017

FEC Identification Number

C

Transaction ID : SB21B.8116.3  
Amount of Each Disbursement this Period

248.94

Memo Item

Full Name (Last, First, Middle Initial)

### C. Southwest Air

Mailing Address PO Box 36647-1CR

City Dallas State TX Zip Code 75235

Purpose of Disbursement  
Plane Ticket

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		27		2017

FEC Identification Number

C

Transaction ID : SB21B.8116.3  
Amount of Each Disbursement this Period

248.94

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)

<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)  
**New Day for America**

Full Name (Last, First, Middle Initial) <b>A. Delta Airlines</b>		Date of Disbursement MM / DD / YYYY 02 / 27 / 2017
Mailing Address 4600 International Gateway		FEC Identification Number C [ ] <b>Transaction ID : SB21B.8116.!</b> Amount of Each Disbursement this Period [ ] 730.30
City Columbus	State OH	Zip Code 43219
Purpose of Disbursement Plane Ticket		Category/ Type [ ]
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>B. Southwest Air</b>		Date of Disbursement MM / DD / YYYY 02 / 27 / 2017
Mailing Address PO Box 36647-1CR		FEC Identification Number C [ ] <b>Transaction ID : SB21B.8116.€</b> Amount of Each Disbursement this Period [ ] 321.94
City Dallas	State TX	Zip Code 75235
Purpose of Disbursement Plane Ticket		Category/ Type [ ]
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>C. Southwest Air</b>		Date of Disbursement MM / DD / YYYY 02 / 27 / 2017
Mailing Address PO Box 36647-1CR		FEC Identification Number C [ ] <b>Transaction ID : SB21B.8116.</b> Amount of Each Disbursement this Period [ ] 565.54
City Dallas	State TX	Zip Code 75235
Purpose of Disbursement Plane Ticket		Category/ Type [ ]
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	

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**New Day for America**

Full Name (Last, First, Middle Initial) <b>A. Southwest Air</b>		Date of Disbursement MM / DD / YYYY 02 / 27 / 2017
Mailing Address PO Box 36647-1CR		FEC Identification Number C [ ] <b>Transaction ID : SB21B.8116.1</b> Amount of Each Disbursement this Period [ ] 15.00
City Dallas	State TX	Zip Code 75235
Purpose of Disbursement Travel Fee		Category/ Type [ ]
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>B. Delta Airlines</b>		Date of Disbursement MM / DD / YYYY 02 / 27 / 2017
Mailing Address 4600 International Gateway		FEC Identification Number C [ ] <b>Transaction ID : SB21B.8116.9</b> Amount of Each Disbursement this Period [ ] 730.30
City Columbus	State OH	Zip Code 43219
Purpose of Disbursement Plane Ticket		Category/ Type [ ]
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>C. Delta Airlines</b>		Date of Disbursement MM / DD / YYYY 02 / 27 / 2017
Mailing Address 4600 International Gateway		FEC Identification Number C [ ] <b>Transaction ID : SB21B.8116.</b> Amount of Each Disbursement this Period [ ] 730.30
City Columbus	State OH	Zip Code 43219
Purpose of Disbursement Plane Ticket		Category/ Type [ ]
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	

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**New Day for America**

Full Name (Last, First, Middle Initial) <b>A. United Airlines</b>		Date of Disbursement MM / DD / YYYY 02 / 27 / 2017
Mailing Address 2 N. LaSalle Street		FEC Identification Number C [REDACTED]
City Chicago	State IL	Zip Code 60602
Purpose of Disbursement Plane Ticket	Candidate Name	Category/ Type [REDACTED]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		Transaction ID : <b>SB21B.8116.</b> Amount of Each Disbursement this Period [REDACTED] 2861.10
		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. iContact</b>		Date of Disbursement MM / DD / YYYY 02 / 27 / 2017
Mailing Address 2450 Perimeter Park Dr.		FEC Identification Number C [REDACTED]
City Morrisville	State NC	Zip Code 27560
Purpose of Disbursement Emails	Candidate Name	Category/ Type [REDACTED]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		Transaction ID : <b>SB21B.8116.1</b> Amount of Each Disbursement this Period [REDACTED] 79.00
		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. Stanford Park Hotel</b>		Date of Disbursement MM / DD / YYYY 02 / 27 / 2017
Mailing Address 100 El Camino Real		FEC Identification Number C [REDACTED]
City Menlo Park	State CA	Zip Code 94025
Purpose of Disbursement Lodging	Candidate Name	Category/ Type [REDACTED]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		Transaction ID : <b>SB21B.8116.</b> Amount of Each Disbursement this Period [REDACTED] 179.19
		<input checked="" type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 0.00
<b>TOTAL</b> 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

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NAME OF COMMITTEE (In Full)  
**New Day for America**

Full Name (Last, First, Middle Initial) <b>A. Hotel Palomar</b>		Date of Disbursement MM / DD / YYYY 02 / 27 / 2017	
Mailing Address 10740 Wilshire Blvd		FEC Identification Number C [REDACTED]	
City Los Angeles	State CA	Zip Code 90024	Transaction ID : <b>SB21B.8116.1</b> Amount of Each Disbursement this Period [REDACTED] 647.90
Purpose of Disbursement Lodging	Candidate Name		Category/Type [REDACTED]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input checked="" type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Hotel Palomar</b>		Date of Disbursement MM / DD / YYYY 02 / 27 / 2017	
Mailing Address 10740 Wilshire Blvd		FEC Identification Number C [REDACTED]	
City Los Angeles	State CA	Zip Code 90024	Transaction ID : <b>SB21B.8116.1</b> Amount of Each Disbursement this Period [REDACTED] 601.62
Purpose of Disbursement Lodging	Candidate Name		Category/Type [REDACTED]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input checked="" type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Stanford Park Hotel</b>		Date of Disbursement MM / DD / YYYY 02 / 27 / 2017	
Mailing Address 100 El Camino Real		FEC Identification Number C [REDACTED]	
City Menlo Park	State CA	Zip Code 94025	Transaction ID : <b>SB21B.8116.1</b> Amount of Each Disbursement this Period [REDACTED] 630.56
Purpose of Disbursement Lodging	Candidate Name		Category/Type [REDACTED]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input checked="" type="checkbox"/> Memo Item
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 0.00
<b>TOTAL</b> 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

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NAME OF COMMITTEE (In Full)  
**New Day for America**

**A. Hotel Palomar**

Full Name (Last, First, Middle Initial)

Mailing Address 10740 Wilshire Blvd

City Los Angeles State CA Zip Code 90024

Purpose of Disbursement Lodging

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 27 / 2017

FEC Identification Number: C

Transaction ID : SB21B.8116.2

Amount of Each Disbursement this Period: 312.38

Memo Item

**B. Hotel Palomar**

Full Name (Last, First, Middle Initial)

Mailing Address 10740 Wilshire Blvd

City Los Angeles State CA Zip Code 90024

Purpose of Disbursement Lodging

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 27 / 2017

FEC Identification Number: C

Transaction ID : SB21B.8116.2

Amount of Each Disbursement this Period: 601.62

Memo Item

**C. United Airlines**

Full Name (Last, First, Middle Initial)

Mailing Address 2 N. LaSalle Street

City Chicago State IL Zip Code 60602

Purpose of Disbursement Plane Ticket

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 27 / 2017

FEC Identification Number: C

Transaction ID : SB21B.8116.

Amount of Each Disbursement this Period: 3305.46

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 Page

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**New Day for America**

Full Name (Last, First, Middle Initial) <b>A. American Express</b>		Date of Disbursement MM / DD / YYYY 04 / 07 / 2017
Mailing Address PO Box 299051		FEC Identification Number C [ ] <b>Transaction ID : SB21B.8132</b> Amount of Each Disbursement this Period [ ] 125.42
City Ft. Lauderdale	State FL	Zip Code 33329
Purpose of Disbursement CREDIT CARD PAYMENT		Category/ Type [ ]
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>B. iContact</b>		Date of Disbursement MM / DD / YYYY 04 / 07 / 2017
Mailing Address 2450 Perimeter Park Dr.		FEC Identification Number C [ ] <b>Transaction ID : SB21B.8132.c</b> Amount of Each Disbursement this Period [ ] 79.00
City Morrisville	State NC	Zip Code 27560
Purpose of Disbursement Emails		Category/ Type [ ]
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>C. American Express</b>		Date of Disbursement MM / DD / YYYY 04 / 28 / 2017
Mailing Address PO Box 299051		FEC Identification Number C [ ] <b>Transaction ID : SB21B.8137</b> Amount of Each Disbursement this Period [ ] 308.52
City Ft. Lauderdale	State FL	Zip Code 33329
Purpose of Disbursement CREDIT CARD PAYMENT		Category/ Type [ ]
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	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 433.94
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**New Day for America**

Full Name (Last, First, Middle Initial) <b>A. GoDaddy.com</b>		Date of Disbursement MM / DD / YYYY 04 / 28 / 2017
Mailing Address 14455 N. Hayden Road		FEC Identification Number C [ ] <b>Transaction ID : SB21B.8137.4</b> Amount of Each Disbursement this Period [ ] 131.80
City Scottsdale	State AZ	Zip Code 85260
Purpose of Disbursement Website Fees		Category/ Type [ ]
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>B. iContact</b>		Date of Disbursement MM / DD / YYYY 04 / 28 / 2017
Mailing Address 2450 Perimeter Park Dr.		FEC Identification Number C [ ] <b>Transaction ID : SB21B.8137.4</b> Amount of Each Disbursement this Period [ ] 79.00
City Morrisville	State NC	Zip Code 27560
Purpose of Disbursement Emails		Category/ Type [ ]
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>C. American Express</b>		Date of Disbursement MM / DD / YYYY 05 / 25 / 2017
Mailing Address PO Box 299051		FEC Identification Number C [ ] <b>Transaction ID : SB21B.8146</b> Amount of Each Disbursement this Period [ ] 3178.63
City Ft. Lauderdale	State FL	Zip Code 33329
Purpose of Disbursement CREDIT CARD PAYMENT		Category/ Type [ ]
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	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 3178.63
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**New Day for America**

Full Name (Last, First, Middle Initial) <b>A. Southwest Air</b>		Date of Disbursement MM / DD / YYYY 05 / 25 / 2017
Mailing Address PO Box 36647-1CR		FEC Identification Number C [ ] <b>Transaction ID : SB21B.8146.1</b> Amount of Each Disbursement this Period [ ] 429.96
City Dallas	State TX	Zip Code 75235
Purpose of Disbursement Plane Ticket		Category/ Type [ ]
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>B. Hilton Garden Inn</b>		Date of Disbursement MM / DD / YYYY 05 / 25 / 2017
Mailing Address 101 South Commercial Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.8146.1</b> Amount of Each Disbursement this Period [ ] 399.70
City Manchester	State NH	Zip Code 03101
Purpose of Disbursement Lodging		Category/ Type [ ]
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>C. iContact</b>		Date of Disbursement MM / DD / YYYY 05 / 25 / 2017
Mailing Address 2450 Perimeter Park Dr.		FEC Identification Number C [ ] <b>Transaction ID : SB21B.8146.1</b> Amount of Each Disbursement this Period [ ] 79.00
City Morrisville	State NC	Zip Code 27560
Purpose of Disbursement Emails		Category/ Type [ ]
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	

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**New Day for America**

Full Name (Last, First, Middle Initial)  
**A. V STEAKHOUSE**

Date of Disbursement: MM / DD / YYYY  
05 / 25 / 2017

Mailing Address 10 COLUMBUS CIRCLE

City NEW YORK State NY Zip Code 10019

Purpose of Disbursement FOOD AND BEVERAGES

Candidate Name

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

State: District:

FEC Identification Number: C  
Transaction ID : SB21B.8146.4  
Amount of Each Disbursement this Period: 281.90

Memo Item

Full Name (Last, First, Middle Initial)  
**B. WATERFRONT SEAFOOD GRILL**

Date of Disbursement: MM / DD / YYYY  
05 / 25 / 2017

Mailing Address 2801 ALASKAN WAY

City SEATTLE State WA Zip Code 98121

Purpose of Disbursement FOOD AND BEVERAGES

Candidate Name

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

State: District:

FEC Identification Number: C  
Transaction ID : SB21B.8146.5  
Amount of Each Disbursement this Period: 251.03

Memo Item

Full Name (Last, First, Middle Initial)  
**C. IVY RESTAURANT**

Date of Disbursement: MM / DD / YYYY  
05 / 25 / 2017

Mailing Address 113 N. ROBERTSON BLVD

City LOS ANGELES State CA Zip Code 90048

Purpose of Disbursement FOOD AND BEVERAGES

Candidate Name

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

State: District:

FEC Identification Number: C  
Transaction ID : SB21B.8146.  
Amount of Each Disbursement this Period: 268.57

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 Page

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**New Day for America**

Full Name (Last, First, Middle Initial) <b>A. PALM RESTAURANT</b>		Date of Disbursement MM / DD / YYYY 05 / 25 / 2017
Mailing Address 267 N CANNON DRIVE		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.8146.;</b> Amount of Each Disbursement this Period [REDACTED] 285.45
City BEVERLY HILLS	State CA	Zip Code 90210
Purpose of Disbursement FOOD AND BEVERAGES		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>B. Baker Hostetler LLP</b>		Date of Disbursement MM / DD / YYYY 02 / 27 / 2017
Mailing Address PO Box 70189		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.8115</b> Amount of Each Disbursement this Period [REDACTED] 1367.56
City Cleveland	State OH	Zip Code 44190
Purpose of Disbursement LEGAL FEES		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>C. Baker Hostetler LLP</b>		Date of Disbursement MM / DD / YYYY 04 / 07 / 2017
Mailing Address PO Box 70189		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.8131</b> Amount of Each Disbursement this Period [REDACTED] 367.50
City Cleveland	State OH	Zip Code 44190
Purpose of Disbursement LEGAL CONSULTING		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	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 1735.06
<b>TOTAL</b> 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

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NAME OF COMMITTEE (In Full)  
**New Day for America**

Full Name (Last, First, Middle Initial) <b>A. Baker Hostetler LLP</b>		Date of Disbursement MM / DD / YYYY 05 / 25 / 2017
Mailing Address PO Box 70189		FEC Identification Number C <b>Transaction ID : SB21B.8149</b> Amount of Each Disbursement this Period 306.06
City Cleveland	State OH	
Zip Code 44190	Purpose of Disbursement LEGAL FEES	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. BINGLE, KEVIN, , ,</b>		Date of Disbursement MM / DD / YYYY 01 / 11 / 2017
Mailing Address 408 E SCHREYER PLACE		FEC Identification Number C <b>Transaction ID : SB21B.8097</b> Amount of Each Disbursement this Period 292.56
City COLUMBUS	State OH	
Zip Code 43214	Purpose of Disbursement CABLES AND MISC COMPUTER SUPPLIES	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Cornerstone Consulting Services LLC</b>		Date of Disbursement MM / DD / YYYY 01 / 11 / 2017
Mailing Address 7092 Pleasant Colony Circle		FEC Identification Number C <b>Transaction ID : SB21B.8094</b> Amount of Each Disbursement this Period 5000.00
City Blacklick	State OH	
Zip Code 43004	Purpose of Disbursement CONSULTING FEE	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5598.62
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**New Day for America**

Full Name (Last, First, Middle Initial) <b>A. GARCEA, JORDAN, , Mr.,</b>		Date of Disbursement MM / DD / YYYY 04 / 05 / 2017	
Mailing Address 41 S HIGH STREET		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.8126</b> Amount of Each Disbursement this Period 1200.00	
City COLUMBUS	State OH	Zip Code 43215	Category/ Type
Purpose of Disbursement CONSULTING FEES			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. GARCEA, JORDAN, , Mr.,</b>		Date of Disbursement MM / DD / YYYY 05 / 18 / 2017	
Mailing Address 41 S HIGH STREET		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.8143</b> Amount of Each Disbursement this Period 600.00	
City COLUMBUS	State OH	Zip Code 43215	Category/ Type
Purpose of Disbursement CONSULTING FEES			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. GARCEA, JORDAN, , Mr.,</b>		Date of Disbursement MM / DD / YYYY 05 / 25 / 2017	
Mailing Address 41 S HIGH STREET		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.8156</b> Amount of Each Disbursement this Period 938.61	
City COLUMBUS	State OH	Zip Code 43215	Category/ Type
Purpose of Disbursement REIMBURSE TRAVEL EXPENSES			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

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

2738.61

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**New Day for America**

Full Name (Last, First, Middle Initial) <b>A. Hertz Rent A Car</b>		Date of Disbursement MM / DD / YYYY 05 / 25 / 2017
Mailing Address 156 Tomahawk Drive		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.8156.1</b> Amount of Each Disbursement this Period [REDACTED] 381.04
City East Boston	State MA	Zip Code 02128
Purpose of Disbursement Car Rental	Category/Type [REDACTED]	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. GARCEA, JORDAN, , Mr.,</b>		Date of Disbursement MM / DD / YYYY 06 / 12 / 2017
Mailing Address 41 S HIGH STREET		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.8162</b> Amount of Each Disbursement this Period [REDACTED] 1028.16
City COLUMBUS	State OH	Zip Code 43215
Purpose of Disbursement REIMBURSE TRAVEL EXPENSES	Category/Type [REDACTED]	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. Belvedere Hotel</b>		Date of Disbursement MM / DD / YYYY 06 / 12 / 2017
Mailing Address 319 West 48th Street		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.8162.</b> Amount of Each Disbursement this Period [REDACTED] 674.26
City New York	State NY	Zip Code 10036
Purpose of Disbursement Lodging	Category/Type [REDACTED]	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
		<input checked="" type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 1028.16
<b>TOTAL</b> 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

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NAME OF COMMITTEE (In Full)  
**New Day for America**

Full Name (Last, First, Middle Initial)  
**A. Huntington National Bank**

Mailing Address PO Box 1558

City Columbus State OH Zip Code 43216

Purpose of Disbursement BANK FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 03 / 02 / 2017

FEC Identification Number: C

Transaction ID : SB21B.8118

Amount of Each Disbursement this Period: 46.20

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Huntington National Bank**

Mailing Address PO Box 1558

City Columbus State OH Zip Code 43216

Purpose of Disbursement BANK FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 03 / 31 / 2017

FEC Identification Number: C

Transaction ID : SB21B.8121

Amount of Each Disbursement this Period: 35.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Huntington National Bank**

Mailing Address PO Box 1558

City Columbus State OH Zip Code 43216

Purpose of Disbursement BANK FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 04 / 03 / 2017

FEC Identification Number: C

Transaction ID : SB21B.8122

Amount of Each Disbursement this Period: 46.20

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 127.40

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**New Day for America**

Full Name (Last, First, Middle Initial) <b>A. Huntington National Bank</b>		Date of Disbursement MM / DD / YYYY 04 / 17 / 2017
Mailing Address PO Box 1558		FEC Identification Number C [ ] <b>Transaction ID : SB21B.8134</b> Amount of Each Disbursement this Period [ ] 35.00
City Columbus	State OH	Zip Code 43216
Purpose of Disbursement BANK FEES		Category/ Type [ ]
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>B. Huntington National Bank</b>		Date of Disbursement MM / DD / YYYY 05 / 02 / 2017
Mailing Address PO Box 1558		FEC Identification Number C [ ] <b>Transaction ID : SB21B.8138</b> Amount of Each Disbursement this Period [ ] 42.45
City Columbus	State OH	Zip Code 43216
Purpose of Disbursement BANK FEES		Category/ Type [ ]
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>C. Huntington National Bank</b>		Date of Disbursement MM / DD / YYYY 05 / 15 / 2017
Mailing Address PO Box 1558		FEC Identification Number C [ ] <b>Transaction ID : SB21B.8142</b> Amount of Each Disbursement this Period [ ] 88.00
City Columbus	State OH	Zip Code 43216
Purpose of Disbursement BANK FEES		Category/ Type [ ]
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	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 165.45
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
**New Day for America**

Full Name (Last, First, Middle Initial) <b>A. Huntington National Bank</b>		Date of Disbursement MM / DD / YYYY 06 / 02 / 2017
Mailing Address PO Box 1558		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.8158</b> Amount of Each Disbursement this Period 43.70
City Columbus	State OH	Zip Code 43216
Purpose of Disbursement BANK FEES		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>B. Huntington National Bank</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2017
Mailing Address PO Box 1558		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.8167</b> Amount of Each Disbursement this Period 18.00
City Columbus	State OH	Zip Code 43216
Purpose of Disbursement BANK FEES		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>C. JAVELIN GROUP LLC</b>		Date of Disbursement MM / DD / YYYY 02 / 06 / 2017
Mailing Address 203 S UNION ST STE 200		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.8108</b> Amount of Each Disbursement this Period 3000.00
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement MEDIA CONSULTING		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	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3061.70
<b>TOTAL</b> 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

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NAME OF COMMITTEE (In Full)  
**New Day for America**

**A. KAISER, BEN, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 41 S HIGH STREET

City COLUMBUS State OH Zip Code 43215

Purpose of Disbursement REIMBURSE TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 25 / 2017

FEC Identification Number: C

Transaction ID : SB21B.8152

Amount of Each Disbursement this Period: 340.45

Memo Item

**B. Holiday Inn San Francisco**

Full Name (Last, First, Middle Initial)

Mailing Address 50 Eighth Street

City San Francisco State CA Zip Code 94103

Purpose of Disbursement Lodging

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 25 / 2017

FEC Identification Number: C

Transaction ID : SB21B.8152.0

Amount of Each Disbursement this Period: 220.45

Memo Item

**C. KERSCHNER CONSULTING LTC**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 507

City TIFFIN State OH Zip Code 44883

Purpose of Disbursement FUNDRAISING CONSULTING FEE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 05 / 2017

FEC Identification Number: C

Transaction ID : SB21B.8140

Amount of Each Disbursement this Period: 6000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 6340.45

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**New Day for America**

**A. KERSCHNER CONSULTING LTC**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 507

City TIFFIN State OH Zip Code 44883

Purpose of Disbursement  
FUNDRAISING CONSULTING FEE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 06 / 12 / 2017

FEC Identification Number: C

Transaction ID : **SB21B.8161**

Amount of Each Disbursement this Period: 1500.00

Memo Item

**B. NAIDU, NATHAN, , ,**

Full Name (Last, First, Middle Initial)  
Mailing Address 3601 CANTON RD

City MATIETTA State GA Zip Code 30066

Purpose of Disbursement  
REIMBURSE TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 05 / 25 / 2017

FEC Identification Number: C

Transaction ID : **SB21B.8154**

Amount of Each Disbursement this Period: 998.89

Memo Item

**C. American Airlines**

Full Name (Last, First, Middle Initial)  
Mailing Address 4330 Amon Carter Blvd

City Forth Worth State TX Zip Code 76155

Purpose of Disbursement  
Plane Ticket

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 05 / 25 / 2017

FEC Identification Number: C

Transaction ID : **SB21B.8154.**

Amount of Each Disbursement this Period: 362.40

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2498.89

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**New Day for America**

**A. OHIO COLLEGE REPUBLICANS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 211 S FIFTH STREET

M M M	/	D D D	/	Y Y Y Y Y
01		11		2017

City COLUMBUS State OH Zip Code 43215

FEC Identification Number

Purpose of Disbursement  
EVENT TICKETS

C
---

**Transaction ID : SB21B.8099**

Candidate Name

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

1000.00
---------

Memo Item

**B. PROUTY, ZACH, , ,**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 76 PARK FRONT COURT

M M M	/	D D D	/	Y Y Y Y Y
06		21		2017

City COLUMBUS State OH Zip Code 43215

FEC Identification Number

Purpose of Disbursement  
REIMBURSE TRAVEL EXPENSES

C
---

**Transaction ID : SB21B.8165**

Candidate Name

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

211.68
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Memo Item

**C. Red Tack Strategies LLC**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 113 S Ardmore

M M M	/	D D D	/	Y Y Y Y Y
01		11		2017

City Bexley State OH Zip Code 43209

FEC Identification Number

Purpose of Disbursement  
MEDIA CONSULTING

C
---

**Transaction ID : SB21B.8093**

Candidate Name

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

15000.00
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Memo Item

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

16211.68
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**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**New Day for America**

**A. Red Tack Strategies LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 113 S Ardmore

City Bexley State OH Zip Code 43209

Purpose of Disbursement MEDIA CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 20 / 2017

FEC Identification Number: C

Transaction ID : SB21B.8111

Amount of Each Disbursement this Period: 5000.00

Memo Item

**B. Red Tack Strategies LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 113 S Ardmore

City Bexley State OH Zip Code 43209

Purpose of Disbursement MEDIA CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 07 / 2017

FEC Identification Number: C

Transaction ID : SB21B.8128

Amount of Each Disbursement this Period: 5000.00

Memo Item

**C. Red Tack Strategies LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 113 S Ardmore

City Bexley State OH Zip Code 43209

Purpose of Disbursement MEDIA CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 18 / 2017

FEC Identification Number: C

Transaction ID : SB21B.8145

Amount of Each Disbursement this Period: 3000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 13000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**New Day for America**

Full Name (Last, First, Middle Initial) <b>A. Red Tack Strategies LLC</b>		Date of Disbursement MM / DD / YYYY 06 / 12 / 2017	
Mailing Address 113 S Ardmore		FEC Identification Number C [ ] <b>Transaction ID : SB21B.8160</b> Amount of Each Disbursement this Period [ ] 1500.00	
City Bexley	State OH	Zip Code 43209	Category/ Type [ ]
Purpose of Disbursement MEDIA CONSULTING		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Right Digital LLC</b>		Date of Disbursement MM / DD / YYYY 01 / 11 / 2017	
Mailing Address 408 E. Scheyer Place		FEC Identification Number C [ ] <b>Transaction ID : SB21B.8096</b> Amount of Each Disbursement this Period [ ] 15000.00	
City Columbus	State OH	Zip Code 43214	Category/ Type [ ]
Purpose of Disbursement DIGITAL CONSULTING		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Right Digital LLC</b>		Date of Disbursement MM / DD / YYYY 02 / 20 / 2017	
Mailing Address 408 E. Scheyer Place		FEC Identification Number C [ ] <b>Transaction ID : SB21B.8112</b> Amount of Each Disbursement this Period [ ] 7500.00	
City Columbus	State OH	Zip Code 43214	Category/ Type [ ]
Purpose of Disbursement DIGITAL CONSULTING		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 24000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**New Day for America**

**A. Right Digital LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 408 E. Scheyer Place

City Columbus State OH Zip Code 43214

Purpose of Disbursement DIGITAL CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement: 04 / 07 / 2017

FEC Identification Number: C

Transaction ID : SB21B.8129

Amount of Each Disbursement this Period: 10000.00

Memo Item

**B. Right Digital LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 408 E. Scheyer Place

City Columbus State OH Zip Code 43214

Purpose of Disbursement DIGITAL CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement: 05 / 18 / 2017

FEC Identification Number: C

Transaction ID : SB21B.8144

Amount of Each Disbursement this Period: 2250.00

Memo Item

**C. Right Digital LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 408 E. Scheyer Place

City Columbus State OH Zip Code 43214

Purpose of Disbursement DIGITAL CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement: 06 / 21 / 2017

FEC Identification Number: C

Transaction ID : SB21B.8164

Amount of Each Disbursement this Period: 2250.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 14500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**New Day for America**

Full Name (Last, First, Middle Initial) <b>A. Schimpf, Christopher, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 05 / 2017	
Mailing Address 113 Ardmore		FEC Identification Number C [ ] <b>Transaction ID : SB21B.8125</b> Amount of Each Disbursement this Period [ ] 774.28	
City Bexley	State OH	Zip Code 43209	Category/ Type [ ]
Purpose of Disbursement TRAVEL REIMBURSEMENT			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. United Airlines</b>		Date of Disbursement MM / DD / YYYY 04 / 05 / 2017	
Mailing Address 2 N. LaSalle Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.8125.c</b> Amount of Each Disbursement this Period [ ] 616.40	
City Chicago	State IL	Zip Code 60602	Category/ Type [ ]
Purpose of Disbursement Plane Ticket			
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>C. The Network Companies LLC</b>		Date of Disbursement MM / DD / YYYY 01 / 06 / 2017	
Mailing Address 7062 Comanche Trail		FEC Identification Number C [ ] <b>Transaction ID : SB21B.8092</b> Amount of Each Disbursement this Period [ ] 9900.00	
City Austin	State TX	Zip Code 78732	Category/ Type [ ]
Purpose of Disbursement CONSULTING FEE			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 10674.28
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**New Day for America**

**A. The Network Companies LLC**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 7062 Comanche Trail

M M M	/	D D D	/	Y Y Y Y Y
02		02		2017

City Austin State TX Zip Code 78732

FEC Identification Number

Purpose of Disbursement  
CONSULTING FEE

C
---

**Transaction ID : SB21B.8102**

Candidate Name

Amount of Each Disbursement this Period

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

10000.00
----------

Memo Item

**B. The Network Companies LLC**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 7062 Comanche Trail

M M M	/	D D D	/	Y Y Y Y Y
03		01		2017

City Austin State TX Zip Code 78732

FEC Identification Number

Purpose of Disbursement  
CONSULTING FEE

C
---

**Transaction ID : SB21B.8117**

Candidate Name

Amount of Each Disbursement this Period

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

10000.00
----------

Memo Item

**C. The Network Companies LLC**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 7062 Comanche Trail

M M M	/	D D D	/	Y Y Y Y Y
03		14		2017

City Austin State TX Zip Code 78732

FEC Identification Number

Purpose of Disbursement  
REIMBURSE TRAVEL EXPENSES

C
---

**Transaction ID : SB21B.8120**

Candidate Name

Amount of Each Disbursement this Period

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

1204.02
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Memo Item

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

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

21204.02
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**New Day for America**

Full Name (Last, First, Middle Initial) <b>A. Delta Airlines</b>		Date of Disbursement MM / DD / YYYY 03 / 14 / 2017
Mailing Address 4600 International Gateway		FEC Identification Number C [ ] <b>Transaction ID : SB21B.8120.1</b> Amount of Each Disbursement this Period [ ] 818.00
City Columbus	State OH	Zip Code 43219
Purpose of Disbursement Plane Ticket		Category/ Type [ ]
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>B. The Network Companies LLC</b>		Date of Disbursement MM / DD / YYYY 04 / 05 / 2017
Mailing Address 7062 Comanche Trail		FEC Identification Number C [ ] <b>Transaction ID : SB21B.8124</b> Amount of Each Disbursement this Period [ ] 10000.00
City Austin	State TX	Zip Code 78732
Purpose of Disbursement CONSULTING FEE		Category/ Type [ ]
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>C. The Network Companies LLC</b>		Date of Disbursement MM / DD / YYYY 04 / 28 / 2017
Mailing Address 7062 Comanche Trail		FEC Identification Number C [ ] <b>Transaction ID : SB21B.8135</b> Amount of Each Disbursement this Period [ ] 10000.00
City Austin	State TX	Zip Code 78732
Purpose of Disbursement CONSULTING FEES		Category/ Type [ ]
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	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 20000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**New Day for America**

Full Name (Last, First, Middle Initial)  
**A. The Network Companies LLC**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
06			01			2017			

Mailing Address 7062 Comanche Trail

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.8157**  
 Amount of Each Disbursement this Period  
 [ ] 10000.00

City Austin State TX Zip Code 78732

Purpose of Disbursement  
CONSULTING FEE

[ ]  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
 State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Wendt, Gregory, , ,**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
02			03			2017			

Mailing Address 1 Muir Loop

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.8181**  
 Amount of Each Disbursement this Period  
 [ ] 6042.00

City San Francisco State CA Zip Code 94129

Purpose of Disbursement  
In-kind - NET JETS FLIGHT

[ ]  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
 State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Winterset CPA Group**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
01			11			2017			

Mailing Address 4679 Winterset Drive

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.8095**  
 Amount of Each Disbursement this Period  
 [ ] 2523.75

City Columbus State OH Zip Code 43220

Purpose of Disbursement  
ACCOUNTING FEES

[ ]  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
 State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Memo Item

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

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

[ ] 18565.75

[ ]



**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

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NAME OF COMMITTEE (In Full)  
**New Day for America**

**A. Winterset CPA Group**

Full Name (Last, First, Middle Initial)  
Mailing Address 4679 Winterset Drive

City Columbus State OH Zip Code 43220

Purpose of Disbursement  
ACCOUNTING FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
02 / 02 / 2017

FEC Identification Number: C  
Transaction ID : **SB21B.8104**  
Amount of Each Disbursement this Period: 948.75

Memo Item

**B. Winterset CPA Group**

Full Name (Last, First, Middle Initial)  
Mailing Address 4679 Winterset Drive

City Columbus State OH Zip Code 43220

Purpose of Disbursement  
ACCOUNTING FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
02 / 20 / 2017

FEC Identification Number: C  
Transaction ID : **SB21B.8114**  
Amount of Each Disbursement this Period: 1602.54

Memo Item

**C. Winterset CPA Group**

Full Name (Last, First, Middle Initial)  
Mailing Address 4679 Winterset Drive

City Columbus State OH Zip Code 43220

Purpose of Disbursement  
ACCOUNTING FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
04 / 07 / 2017

FEC Identification Number: C  
Transaction ID : **SB21B.8130**  
Amount of Each Disbursement this Period: 737.64

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 3288.93

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**New Day for America**

Full Name (Last, First, Middle Initial) <b>A. Winterset CPA Group</b>		Date of Disbursement MM / DD / YYYY 04 / 28 / 2017
Mailing Address 4679 Winterset Drive		FEC Identification Number C [ ] <b>Transaction ID : SB21B.8136</b> Amount of Each Disbursement this Period [ ] 492.50
City Columbus	State OH	Zip Code 43220
Purpose of Disbursement ACCOUNTING FEES		Category/ Type [ ]
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>B. Winterset CPA Group</b>		Date of Disbursement MM / DD / YYYY 05 / 25 / 2017
Mailing Address 4679 Winterset Drive		FEC Identification Number C [ ] <b>Transaction ID : SB21B.8147</b> Amount of Each Disbursement this Period [ ] 808.75
City Columbus	State OH	Zip Code 43220
Purpose of Disbursement ACCOUNTING FEES		Category/ Type [ ]
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>C. Winterset CPA Group</b>		Date of Disbursement MM / DD / YYYY 06 / 12 / 2017
Mailing Address 4679 Winterset Drive		FEC Identification Number C [ ] <b>Transaction ID : SB21B.8163</b> Amount of Each Disbursement this Period [ ] 412.63
City Columbus	State OH	Zip Code 43220
Purpose of Disbursement ACCOUNTING FEES		Category/ Type [ ]
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	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 1713.88
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**New Day for America**

Full Name (Last, First, Middle Initial) <b>A. Zhdan, Nazar, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 10 / 2017
Mailing Address 41 South High Street Ste 3710		FEC Identification Number C [ ] <b>Transaction ID : SB21B.8133</b> Amount of Each Disbursement this Period [ ] 1200.00
City Columbus	State OH	Zip Code 43215
Purpose of Disbursement CONSULTING FEE		Category/ Type [ ]
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>B. Zhdan, Nazar, , ,</b>		Date of Disbursement MM / DD / YYYY 05 / 25 / 2017
Mailing Address 41 South High Street Ste 3710		FEC Identification Number C [ ] <b>Transaction ID : SB21B.8150</b> Amount of Each Disbursement this Period [ ] 1200.00
City Columbus	State OH	Zip Code 43215
Purpose of Disbursement CONSULTING FEES		Category/ Type [ ]
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>C. Zhdan, Nazar, , ,</b>		Date of Disbursement MM / DD / YYYY 05 / 25 / 2017
Mailing Address 41 South High Street Ste 3710		FEC Identification Number C [ ] <b>Transaction ID : SB21B.8151</b> Amount of Each Disbursement this Period [ ] 12179.69
City Columbus	State OH	Zip Code 43215
Purpose of Disbursement REIMBURSE TRAVEL EXPENSES		Category/ Type [ ]
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	

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

14579.69

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**New Day for America**

Full Name (Last, First, Middle Initial) <b>A. Delta Airlines</b>		Date of Disbursement MM / DD / YYYY 05 / 25 / 2017
Mailing Address 4600 International Gateway		FEC Identification Number C [ ] <b>Transaction ID : SB21B.8151.1</b> Amount of Each Disbursement this Period [ ] 728.40
City Columbus	State OH	Zip Code 43219
Purpose of Disbursement Plane Ticket		Category/ Type [ ]
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>B. AVIS</b>		Date of Disbursement MM / DD / YYYY 05 / 25 / 2017
Mailing Address Central Terminal Dr.		FEC Identification Number C [ ] <b>Transaction ID : SB21B.8151.1</b> Amount of Each Disbursement this Period [ ] 669.35
City East Elmhurst	State NY	Zip Code 11371
Purpose of Disbursement Car Rental		Category/ Type [ ]
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>C. Comfort Inn Midtown</b>		Date of Disbursement MM / DD / YYYY 05 / 25 / 2017
Mailing Address 548 West 48th Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.8151.1</b> Amount of Each Disbursement this Period [ ] 895.34
City New York	State NY	Zip Code 10036
Purpose of Disbursement Lodging		Category/ Type [ ]
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	

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**New Day for America**

Full Name (Last, First, Middle Initial)

**A. Delta Airlines**

Mailing Address 4600 International Gateway

City Columbus State OH Zip Code 43219

Purpose of Disbursement  
Plane Ticket

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
05 / 25 / 2017

FEC Identification Number

C  
Transaction ID : SB21B.8151.  
Amount of Each Disbursement this Period  
198.20

Memo Item

Full Name (Last, First, Middle Initial)

**B. Southwest Air**

Mailing Address PO Box 36647-1CR

City Dallas State TX Zip Code 75235

Purpose of Disbursement  
Plane Ticket

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
05 / 25 / 2017

FEC Identification Number

C  
Transaction ID : SB21B.8151.4  
Amount of Each Disbursement this Period  
445.96

Memo Item

Full Name (Last, First, Middle Initial)

**C. Southwest Air**

Mailing Address PO Box 36647-1CR

City Dallas State TX Zip Code 75235

Purpose of Disbursement  
Plane Ticket

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
05 / 25 / 2017

FEC Identification Number

C  
Transaction ID : SB21B.8151.  
Amount of Each Disbursement this Period  
1127.16

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)

<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)  
**New Day for America**

Full Name (Last, First, Middle Initial) <b>A. Hyatt Place Seattle</b>		Date of Disbursement MM / DD / YYYY 05 / 25 / 2017
Mailing Address 110 6th Avenue North		FEC Identification Number C [ ] <b>Transaction ID : SB21B.8151.f</b> Amount of Each Disbursement this Period [ ] 799.52
City Seattle	State WA	Zip Code 98109
Purpose of Disbursement Lodging		Category/ Type [ ]
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>B. Southwest Air</b>		Date of Disbursement MM / DD / YYYY 05 / 25 / 2017
Mailing Address PO Box 36647-1CR		FEC Identification Number C [ ] <b>Transaction ID : SB21B.8151.7</b> Amount of Each Disbursement this Period [ ] 553.58
City Dallas	State TX	Zip Code 75235
Purpose of Disbursement Plane Ticket		Category/ Type [ ]
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>C. Delta Airlines</b>		Date of Disbursement MM / DD / YYYY 05 / 25 / 2017
Mailing Address 4600 International Gateway		FEC Identification Number C [ ] <b>Transaction ID : SB21B.8151.</b> Amount of Each Disbursement this Period [ ] 257.20
City Columbus	State OH	Zip Code 43219
Purpose of Disbursement Plane Ticket		Category/ Type [ ]
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	

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**New Day for America**

Full Name (Last, First, Middle Initial) <b>A. Southwest Air</b>		Date of Disbursement MM / DD / YYYY 05 / 25 / 2017
Mailing Address PO Box 36647-1CR		FEC Identification Number C [ ] <b>Transaction ID : SB21B.8151.1</b> Amount of Each Disbursement this Period [ ] 96.98
City Dallas	State TX	Zip Code 75235
Purpose of Disbursement Plane Ticket		Category/ Type [ ]
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>B. Hyatt Place Seattle</b>		Date of Disbursement MM / DD / YYYY 05 / 25 / 2017
Mailing Address 110 6th Avenue North		FEC Identification Number C [ ] <b>Transaction ID : SB21B.8151.1</b> Amount of Each Disbursement this Period [ ] 799.52
City Seattle	State WA	Zip Code 98109
Purpose of Disbursement Lodging		Category/ Type [ ]
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>C. American Airlines</b>		Date of Disbursement MM / DD / YYYY 05 / 25 / 2017
Mailing Address 4330 Amon Carter Blvd		FEC Identification Number C [ ] <b>Transaction ID : SB21B.8151.1</b> Amount of Each Disbursement this Period [ ] 436.40
City Forth Worth	State TX	Zip Code 76155
Purpose of Disbursement Plane Ticket		Category/ Type [ ]
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	

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**New Day for America**

Full Name (Last, First, Middle Initial) <b>A. Kimpton Hotel Palomar</b>		Date of Disbursement MM / DD / YYYY 05 / 25 / 2017	
Mailing Address 10740 Wilshire Blvd		FEC Identification Number C [ ] <b>Transaction ID : SB21B.8151.</b> Amount of Each Disbursement this Period [ ] 785.97	
City Los Angeles	State CA	Zip Code 90024	Category/ Type [ ]
Purpose of Disbursement Lodging		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) ▼		Memo Item <input checked="" type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Delta Airlines</b>		Date of Disbursement MM / DD / YYYY 05 / 25 / 2017	
Mailing Address 4600 International Gateway		FEC Identification Number C [ ] <b>Transaction ID : SB21B.8151.1</b> Amount of Each Disbursement this Period [ ] 1539.60	
City Columbus	State OH	Zip Code 43219	Category/ Type [ ]
Purpose of Disbursement Plane Ticket		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) ▼		Memo Item <input checked="" type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Southwest Air</b>		Date of Disbursement MM / DD / YYYY 05 / 25 / 2017	
Mailing Address PO Box 36647-1CR		FEC Identification Number C [ ] <b>Transaction ID : SB21B.8151.</b> Amount of Each Disbursement this Period [ ] 202.98	
City Dallas	State TX	Zip Code 75235	Category/ Type [ ]
Purpose of Disbursement Plane Ticket		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) ▼		Memo Item <input checked="" type="checkbox"/>
State: District:			

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**New Day for America**

**A. Bistro Italiano**

Full Name (Last, First, Middle Initial)

Mailing Address 320 D. St NE

City Washington State DC Zip Code 20002

Purpose of Disbursement Food and Beverages

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 25 / 2017

FEC Identification Number: C

Transaction ID : SB21B.8151.1

Amount of Each Disbursement this Period: 200.26

Memo Item

**B. American Airlines**

Full Name (Last, First, Middle Initial)

Mailing Address 4330 Amon Carter Blvd

City Fort Worth State TX Zip Code 76155

Purpose of Disbursement Plane Ticket

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 25 / 2017

FEC Identification Number: C

Transaction ID : SB21B.8151.1

Amount of Each Disbursement this Period: 192.20

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

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

**TOTAL** This Period (last page this line number only)..... ▶ 199423.53