

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.

SUPPORT OUR FIREFIGHTERS AND PARAMEDICS PAC

ADDRESS (number and street)
 Check if different than previously reported. (ACC)

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

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:
- Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 - Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 - Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the:
- Primary (12P) General (12G) Runoff (12R)
 - Convention (12C) Special (12S)

Election on / / in the State of

- (d) 30-Day POST-Election Report for the:
- General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period / / through / /

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

Type or Print Name of Treasurer CAPPLEMAN, OLIVER, , ,

Signature of Treasurer CAPPLEMAN, OLIVER, , ,

Date / /

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

Office Use Only

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

SUPPORT OUR FIREFIGHTERS AND PARAMEDICS PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2024"/>	<input type="text" value="3526.86"/>	<input type="text" value="3526.86"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="366.96"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="18602.00"/>	<input type="text" value="32345.00"/>
(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="18968.96"/>	<input type="text" value="35871.86"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="6721.71"/>	<input type="text" value="23624.61"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="12247.25"/>	<input type="text" value="12247.25"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="11199.36"/>	

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

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

SUPPORT OUR FIREFIGHTERS AND PARAMEDICS PAC

Report Covering the Period: From: 03 / 01 / 2024 To: 03 / 31 / 2024

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).....	605.00	865.00
(ii) Unitemized	17997.00	31480.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	18602.00	32345.00
(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)	18602.00	32345.00
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).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	18602.00	32345.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	18602.00	32345.00

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	4944.29	18412.25
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	4944.29	18412.25
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)	1752.42	5187.36
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	25.00	25.00
(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)).....	25.00	25.00
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)) ..	6721.71	23624.61
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6721.71	23624.61

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	18602.00	32345.00
34. Total Contribution Refunds (from Line 28(d))	25.00	25.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	18577.00	32320.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	4944.29	18412.25
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	4944.29	18412.25

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XN
Transaction ID :

The incoming debt from the prior period includes Schedule E Estimated amounts. Now that the Schedule E Estimates have been resolved to their actual value, we have adjusted our Schedule D opening balance accordingly.

Form/Schedule:
Transaction ID:

**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 48
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)
SUPPORT OUR FIREFIGHTERS AND PARAMEDICS PAC

A. BARAHOMA, LIESSY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4891 SALT RIVER RD
 City SAINT PETERS State MO Zip Code 63376
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMAYA Occupation (for Individual) SECRETARY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 21 / 2024
Transaction ID : SA11AI-30825861
 Amount of Each Receipt this Period
 300.00
 Memo Item

B. GREEN, PAMELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 54 CHAPEL HILL RD
 City MILAN State TN Zip Code 38358
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DISABLED Occupation (for Individual) DISABLED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 20 / 2024
Transaction ID : SA11AI-30826119
 Amount of Each Receipt this Period
 305.00
 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

SUBTOTAL of Receipts This Page (optional).....	605.00
TOTAL This Period (last page this line number only).....	605.00

**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)

SUPPORT OUR FIREFIGHTERS AND PARAMEDICS PAC

Full Name (Last, First, Middle Initial)

A. CLOUD DATA SERVICES

Mailing Address 1009 WHITNEY RANCH DR

City
HENDERSON

State
NV

Zip Code
89014

Purpose of Disbursement
LEADS/PHONE LISTS (CLEARING FROM PREVIOUS PERIOD)

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	01	/	2024

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B-98320

Amount of Each Disbursement this Period

[REDACTED] 230.15

Memo Item

Full Name (Last, First, Middle Initial)

B. CLOUD DATA SERVICES

Mailing Address 1009 WHITNEY RANCH DR

City
HENDERSON

State
NV

Zip Code
89014

Purpose of Disbursement
LEADS/PHONE LISTS (CLEARING FROM PREVIOUS PERIOD)

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	01	/	2024

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B-98320

Amount of Each Disbursement this Period

[REDACTED] 272.32

Memo Item

Full Name (Last, First, Middle Initial)

C. CLOUD DATA SERVICES

Mailing Address 1009 WHITNEY RANCH DR

City
HENDERSON

State
NV

Zip Code
89014

Purpose of Disbursement
LEADS/PHONE LISTS (CLEARING FROM PREVIOUS PERIOD)

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	01	/	2024

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B-98320

Amount of Each Disbursement this Period

[REDACTED] 288.21

Memo Item

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

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

[REDACTED] 790.68

[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)

SUPPORT OUR FIREFIGHTERS AND PARAMEDICS PAC

Full Name (Last, First, Middle Initial)

A. CLOUD DATA SERVICES

Mailing Address 1009 WHITNEY RANCH DR

City
HENDERSON

State
NV

Zip Code
89014

Purpose of Disbursement
LEADS/PHONE LISTS

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	6			2	0	2	4		

FEC Identification Number

C

Transaction ID : SB21B-98317

Amount of Each Disbursement this Period

295.80

Memo Item invoice unpaid by close of books

Full Name (Last, First, Middle Initial)

B. CLOUD DATA SERVICES

Mailing Address 1009 WHITNEY RANCH DR

City
HENDERSON

State
NV

Zip Code
89014

Purpose of Disbursement
LEADS/PHONE LISTS

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	3			2	0	2	4		

FEC Identification Number

C

Transaction ID : SB21B-98318

Amount of Each Disbursement this Period

250.50

Memo Item invoice unpaid by close of books

Full Name (Last, First, Middle Initial)

C. CLOUD DATA SERVICES

Mailing Address 1009 WHITNEY RANCH DR

City
HENDERSON

State
NV

Zip Code
89014

Purpose of Disbursement
LEADS/PHONE LISTS

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	0			2	0	2	4		

FEC Identification Number

C

Transaction ID : SB21B-98318

Amount of Each Disbursement this Period

65.72

Memo Item invoice unpaid by close of books

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)

SUPPORT OUR FIREFIGHTERS AND PARAMEDICS PAC

Full Name (Last, First, Middle Initial)

A. CLOUD DATA SERVICES

Mailing Address 1009 WHITNEY RANCH DR

City
HENDERSON

State
NV

Zip Code
89014

Purpose of Disbursement
LEADS/PHONE LISTS

003

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:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	27	/	2024

FEC Identification Number

C

Transaction ID : SB21B-98319

Amount of Each Disbursement this Period

108.19

Memo Item invoice unpaid by close of books

Full Name (Last, First, Middle Initial)

B. ILLINOIS DEPT. OF REVENUE

Mailing Address 101 W JEFFERSON ST

City
SPRINGFIELD

State
IL

Zip Code
62702

Purpose of Disbursement
STATE TAXES

001

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:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	15	/	2024

FEC Identification Number

C

Transaction ID : SB21B-98316

Amount of Each Disbursement this Period

69.50

Memo Item

Full Name (Last, First, Middle Initial)

C. LAV SERVICES LLC

Mailing Address 1009 WHITNEY RANCH DR

City
HENDERSON

State
NV

Zip Code
89014

Purpose of Disbursement
PHONEBANK PAYROLL SERVICES (CLEARING FROM PREVIOUS

003

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:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	01	/	2024

FEC Identification Number

C

Transaction ID : SB21B-98321

Amount of Each Disbursement this Period

218.64

Memo Item

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

288.14

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)

SUPPORT OUR FIREFIGHTERS AND PARAMEDICS PAC

Full Name (Last, First, Middle Initial)

A. LAV SERVICES LLC

Mailing Address 1009 WHITNEY RANCH DR

City
HENDERSON

State
NV

Zip Code
89014

Purpose of Disbursement
PHONEBANK PAYROLL SERVICES (CLEARING FROM PREVIOUS

003

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:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	01	/	2024

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B-98321

Amount of Each Disbursement this Period

[REDACTED] 258.70

Memo Item

Full Name (Last, First, Middle Initial)

B. LAV SERVICES LLC

Mailing Address 1009 WHITNEY RANCH DR

City
HENDERSON

State
NV

Zip Code
89014

Purpose of Disbursement
PHONEBANK PAYROLL SERVICES (CLEARING FROM PREVIOUS

003

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:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	01	/	2024

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B-98321

Amount of Each Disbursement this Period

[REDACTED] 273.80

Memo Item

Full Name (Last, First, Middle Initial)

C. LAV SERVICES LLC

Mailing Address 1009 WHITNEY RANCH DR

City
HENDERSON

State
NV

Zip Code
89014

Purpose of Disbursement
PHONEBANK PAYROLL SERVICES

003

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:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	06	/	2024

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B-98317

Amount of Each Disbursement this Period

[REDACTED] 281.02

Memo Item invoice unpaid by close of books

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

[REDACTED] 532.50

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

[REDACTED]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SUPPORT OUR FIREFIGHTERS AND PARAMEDICS PAC

A. LAV SERVICES LLC

Full Name (Last, First, Middle Initial)

Mailing Address 1009 WHITNEY RANCH DR

City HENDERSON State NV Zip Code 89014

Purpose of Disbursement PHONEBANK PAYROLL SERVICES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 13 / 2024

FEC Identification Number: C

Transaction ID : SB21B-98318

Amount of Each Disbursement this Period: 237.97

Memo Item invoice unpaid by close of books

B. LAV SERVICES LLC

Full Name (Last, First, Middle Initial)

Mailing Address 1009 WHITNEY RANCH DR

City HENDERSON State NV Zip Code 89014

Purpose of Disbursement PHONEBANK PAYROLL SERVICES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 20 / 2024

FEC Identification Number: C

Transaction ID : SB21B-98319

Amount of Each Disbursement this Period: 62.44

Memo Item invoice unpaid by close of books

C. LAV SERVICES LLC

Full Name (Last, First, Middle Initial)

Mailing Address 1009 WHITNEY RANCH DR

City HENDERSON State NV Zip Code 89014

Purpose of Disbursement PHONEBANK PAYROLL SERVICES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 27 / 2024

FEC Identification Number: C

Transaction ID : SB21B-98318

Amount of Each Disbursement this Period: 113.11

Memo Item invoice unpaid by close of books

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)

Form for line numbers 21b-30b with checkboxes. 21b is checked.

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NAME OF COMMITTEE (In Full)

SUPPORT OUR FIREFIGHTERS AND PARAMEDICS PAC

Full Name (Last, First, Middle Initial)

A. RALLYPAY

Mailing Address 995 MARKET STREET FLOOR 2

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement COMBINED "OFF THE TOP" CREDIT CARD CHARGEBACKS

Candidate Name

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

Date of Disbursement

Date of Disbursement: 03 / 31 / 2024

FEC Identification Number

FEC Identification Number: C

Transaction ID : SB21B-98703

Amount of Each Disbursement this Period

Amount of Each Disbursement this Period: 29.00

Memo Item

Full Name (Last, First, Middle Initial)

B. RALLYPAY

Mailing Address 995 MARKET STREET FLOOR 2

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement COMBINED "OFF THE TOP" CC TRANSACTION FEES MAR

Candidate Name

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

Date of Disbursement

Date of Disbursement: 03 / 31 / 2024

FEC Identification Number

FEC Identification Number: C

Transaction ID : SB21B-98703

Amount of Each Disbursement this Period

Amount of Each Disbursement this Period: 813.00

Memo Item

Full Name (Last, First, Middle Initial)

C. REGUS

Mailing Address ONE WESTBROOK CORPORATE CENTER SUITE 300

City WESTCHESTER State IL Zip Code 60154

Purpose of Disbursement RENT EXPENSE

Candidate Name

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

Date of Disbursement

Date of Disbursement: 03 / 20 / 2024

FEC Identification Number

FEC Identification Number: C

Transaction ID : SB21B-98311

Amount of Each Disbursement this Period

Amount of Each Disbursement this Period: 107.77

Memo Item

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

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

SUBTOTAL: 949.77

TOTAL: 949.77

**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)

SUPPORT OUR FIREFIGHTERS AND PARAMEDICS PAC

Full Name (Last, First, Middle Initial)

A. STANDARD DATA SERVICES LLC

Mailing Address 513 MILL AVE SE
SUITE 206

City
NEW PHILADELPHIA

State
OH

Zip Code
44663

Purpose of Disbursement
CAGING AND DATABASE SERVICES (CLEARING FROM PREVIOUS

003

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	1			2	0	2	4		

FEC Identification Number

C [Redacted]

Transaction ID : SB21B-98321

Amount of Each Disbursement this Period

[Redacted]	161.10
------------	--------

Memo Item

Full Name (Last, First, Middle Initial)

B. STANDARD DATA SERVICES LLC

Mailing Address 513 MILL AVE SE
SUITE 206

City
NEW PHILADELPHIA

State
OH

Zip Code
44663

Purpose of Disbursement
CAGING AND DATABASE SERVICES (CLEARING FROM PREVIOUS

003

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	1			2	0	2	4		

FEC Identification Number

C [Redacted]

Transaction ID : SB21B-98321

Amount of Each Disbursement this Period

[Redacted]	190.62
------------	--------

Memo Item

Full Name (Last, First, Middle Initial)

C. STANDARD DATA SERVICES LLC

Mailing Address 513 MILL AVE SE
SUITE 206

City
NEW PHILADELPHIA

State
OH

Zip Code
44663

Purpose of Disbursement
CAGING AND DATABASE SERVICES (CLEARING FROM PREVIOUS

003

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	1			2	0	2	4		

FEC Identification Number

C [Redacted]

Transaction ID : SB21B-98321

Amount of Each Disbursement this Period

[Redacted]	201.74
------------	--------

Memo Item

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

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

[Redacted]	553.46
------------	--------

[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)

SUPPORT OUR FIREFIGHTERS AND PARAMEDICS PAC

Full Name (Last, First, Middle Initial)

A. STANDARD DATA SERVICES LLC

Mailing Address 513 MILL AVE SE
SUITE 206

City
NEW PHILADELPHIA

State
OH

Zip Code
44663

Purpose of Disbursement
CAGING AND DATABASE SERVICES

003
Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		06		2024

FEC Identification Number

C

Transaction ID : SB21B-98317

Amount of Each Disbursement this Period

207.07

Memo Item invoice unpaid by close of books

Full Name (Last, First, Middle Initial)

B. STANDARD DATA SERVICES LLC

Mailing Address 513 MILL AVE SE
SUITE 206

City
NEW PHILADELPHIA

State
OH

Zip Code
44663

Purpose of Disbursement
CAGING AND DATABASE SERVICES

003
Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		13		2024

FEC Identification Number

C

Transaction ID : SB21B-98318

Amount of Each Disbursement this Period

175.36

Memo Item invoice unpaid by close of books

Full Name (Last, First, Middle Initial)

C. STANDARD DATA SERVICES LLC

Mailing Address 513 MILL AVE SE
SUITE 206

City
NEW PHILADELPHIA

State
OH

Zip Code
44663

Purpose of Disbursement
CAGING AND DATABASE SERVICES

003
Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		20		2024

FEC Identification Number

C

Transaction ID : SB21B-98318

Amount of Each Disbursement this Period

46.00

Memo Item invoice unpaid by close of books

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

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

0.00

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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)

SUPPORT OUR FIREFIGHTERS AND PARAMEDICS PAC

Full Name (Last, First, Middle Initial)

A. STANDARD DATA SERVICES LLC

Mailing Address 513 MILL AVE SE
SUITE 206

City
NEW PHILADELPHIA

State
OH

Zip Code
44663

Purpose of Disbursement
CAGING AND DATABASE SERVICES

003

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	7		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B-98320

Amount of Each Disbursement this Period

[REDACTED] 78.69

Memo Item invoice unpaid by close of books

Full Name (Last, First, Middle Initial)

B. UNITED STATES TREASURY

Mailing Address 1500 PENNSYLVANIA AVENUE
NW

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
TAXES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B-98317

Amount of Each Disbursement this Period

[REDACTED] 367.00

Memo Item

Full Name (Last, First, Middle Initial)

C. WIRED4DATA

Mailing Address 55 LAKE HAVASU AVE SOUTH F-677

City
LAKE HAVASU

State
AZ

Zip Code
86403

Purpose of Disbursement
PHONEBANK IT/TECH SUPPORT (CLEARING FROM PREVIOUS

003

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	1		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B-98321

Amount of Each Disbursement this Period

[REDACTED] 425.77

Memo Item

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

[REDACTED] 792.77

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

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

SUPPORT OUR FIREFIGHTERS AND PARAMEDICS PAC

Full Name (Last, First, Middle Initial)

A. WIRED4DATA

Mailing Address 55 LAKE HAVASU AVE SOUTH F-677

City
LAKE HAVASU

State
AZ

Zip Code
86403

Purpose of Disbursement
PHONEBANK IT/TECH SUPPORT (CLEARING FROM PREVIOUS

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	1		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B-98322

Amount of Each Disbursement this Period

[REDACTED] 503.78

Memo Item

Full Name (Last, First, Middle Initial)

B. WIRED4DATA

Mailing Address 55 LAKE HAVASU AVE SOUTH F-677

City
LAKE HAVASU

State
AZ

Zip Code
86403

Purpose of Disbursement
PHONEBANK IT/TECH SUPPORT (CLEARING FROM PREVIOUS

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	1		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B-98322

Amount of Each Disbursement this Period

[REDACTED] 533.19

Memo Item

Full Name (Last, First, Middle Initial)

C. WIRED4DATA

Mailing Address 55 LAKE HAVASU AVE SOUTH F-677

City
LAKE HAVASU

State
AZ

Zip Code
86403

Purpose of Disbursement
PHONEBANK IT/TECH SUPPORT

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	6		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B-98317

Amount of Each Disbursement this Period

[REDACTED] 547.23

Memo Item invoice unpaid by close of books

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

[REDACTED] 1036.97

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

[REDACTED]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

SUPPORT OUR FIREFIGHTERS AND PARAMEDICS PAC

Full Name (Last, First, Middle Initial)

A. WIRED4DATA

Mailing Address 55 LAKE HAVASU AVE SOUTH F-677

City
LAKE HAVASU

State
AZ

Zip Code
86403

Purpose of Disbursement
PHONEBANK IT/TECH SUPPORT

003

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	3		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B-98318

Amount of Each Disbursement this Period

[REDACTED] 463.42

Memo Item invoice unpaid by close of books

Full Name (Last, First, Middle Initial)

B. WIRED4DATA

Mailing Address 55 LAKE HAVASU AVE SOUTH F-677

City
LAKE HAVASU

State
AZ

Zip Code
86403

Purpose of Disbursement
PHONEBANK IT/TECH SUPPORT

003

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	0		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B-98319

Amount of Each Disbursement this Period

[REDACTED] 121.57

Memo Item invoice unpaid by close of books

Full Name (Last, First, Middle Initial)

C. WIRED4DATA

Mailing Address 55 LAKE HAVASU AVE SOUTH F-677

City
LAKE HAVASU

State
AZ

Zip Code
86403

Purpose of Disbursement
PHONEBANK IT/TECH SUPPORT

003

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	7		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B-98321

Amount of Each Disbursement this Period

[REDACTED] 191.80

Memo Item invoice unpaid by close of books

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

[REDACTED] 0.00

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

[REDACTED] 4944.29

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 19 OF 48
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
SUPPORT OUR FIREFIGHTERS AND PARAMEDICS PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor CLOUD DATA SERVICES			Nature of Debt (Purpose): LEADS/PHONE LISTS
Mailing Address 1009 WHITNEY RANCH DR			
City HENDERSON	State NV	Zip Code 89014	

Outstanding Balance Beginning This Period 2818.26	Transaction ID : SD10-1598025	
Amount Incurred This Period 982.54	Payment This Period 1314.22	Outstanding Balance at Close of This Period 2486.58

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor LAV SERVICES LLC			Nature of Debt (Purpose): PHONEBANK PAYROLL SERVICES
Mailing Address 1009 WHITNEY RANCH DR			
City HENDERSON	State NV	Zip Code 89014	

Outstanding Balance Beginning This Period 2677.34	Transaction ID : SD10-1598023	
Amount Incurred This Period 953.94	Payment This Period 1248.51	Outstanding Balance at Close of This Period 2382.77

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor STANDARD DATA SERVICES LLC			Nature of Debt (Purpose): CAGING AND DATABASE SERVICES
Mailing Address 513 MILL AVE SE SUITE 206			
City NEW PHILADELPHIA	State OH	Zip Code 44663	

Outstanding Balance Beginning This Period 1972.74	Transaction ID : SD10-1598021	
Amount Incurred This Period 693.66	Payment This Period 919.95	Outstanding Balance at Close of This Period 1746.45

1) SUBTOTALS This Period This Page (optional)..... ▶	6615.80
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 20 OF 48
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
SUPPORT OUR FIREFIGHTERS AND PARAMEDICS PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor WIRED4DATA			Nature of Debt (Purpose): PHONEBANK IT/TECH SUPPORT
Mailing Address 55 LAKE HAVASU AVE SOUTH F-677			
City LAKE HAVASU	State AZ	Zip Code 86403	

Outstanding Balance Beginning This Period <input type="text" value="5213.74"/>		Transaction ID : SD10-1598027	
Amount Incurred This Period <input type="text" value="1801.12"/>	Payment This Period <input type="text" value="2431.30"/>	Outstanding Balance at Close of This Period <input type="text" value="4583.56"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		Outstanding Balance at Close of This Period <input type="text"/>	
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>		

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		Outstanding Balance at Close of This Period <input type="text"/>	
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>		

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="4583.56"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="11199.36"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="11199.36"/>

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUPPORT OUR FIREFIGHTERS AND PARAMEDICS PAC
FEC IDENTIFICATION NUMBER C C00773788

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

Full Name of Payee CLOUD DATA SERVICES
Mailing Address 1009 WHITNEY RANCH DR.
City HENDERSON State NV Zip Code 89014
Purpose of Expenditure LEADS/PHONE LISTS
Name of Federal Candidate: CONNOLLY, GERALD, EDWARD,
Calendar Year-To-Date Per Election for Office Sought 632.07
Disbursement For: Primary
Date of Public Distribution/Dissemination 03 / 07 / 2024
Amount 61.69
Transaction ID : SE-S1587337

Full Name of Payee CLOUD DATA SERVICES
Mailing Address 1009 WHITNEY RANCH DR.
City HENDERSON State NV Zip Code 89014
Purpose of Expenditure LEADS/PHONE LISTS
Name of Federal Candidate: BACON, DON,
Calendar Year-To-Date Per Election for Office Sought 1787.62
Disbursement For: Primary
Date of Public Distribution/Dissemination 03 / 07 / 2024
Amount 61.69
Transaction ID : SE-S1587339

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

CAPPLEMAN, OLIVER,
Signature

Date 03 / 07 / 2024

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUPPORT OUR FIREFIGHTERS AND PARAMEDICS PAC
FEC IDENTIFICATION NUMBER C C00773788

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

Full Name of Payee CLOUD DATA SERVICES
Mailing Address 1009 WHITNEY RANCH DR.
City HENDERSON State NV Zip Code 89014
Purpose of Expenditure LEADS/PHONE LISTS
Date of Public Distribution/Dissemination 03 / 14 / 2024
Amount 16.18
Transaction ID : SE-S1597129
Date of Disbursement or Obligation

Name of Federal Candidate: CONNOLLY, GERALD, EDWARD,
Support Oppose
Office Sought: House Senate State: VA
District: 11
Calendar Year-To-Date Per Election for Office Sought 674.95
Disbursement For: Primary General 2024 Other (specify)

Full Name of Payee CLOUD DATA SERVICES
Mailing Address 1009 WHITNEY RANCH DR.
City HENDERSON State NV Zip Code 89014
Purpose of Expenditure LEADS/PHONE LISTS
Date of Public Distribution/Dissemination 03 / 14 / 2024
Amount 16.18
Transaction ID : SE-S1597131
Date of Disbursement or Obligation

Name of Federal Candidate: BACON, DON,
Support Oppose
Office Sought: House Senate State: NE
District: 02
Calendar Year-To-Date Per Election for Office Sought 1890.38
Disbursement For: Primary General 2024 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

CAPPLEMAN, OLIVER,
Signature

Date 03 / 14 / 2024

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUPPORT OUR FIREFIGHTERS AND PARAMEDICS PAC
FEC IDENTIFICATION NUMBER C C00773788

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

Full Name of Payee CLOUD DATA SERVICES
Mailing Address 1009 WHITNEY RANCH DR.
City HENDERSON State NV Zip Code 89014
Purpose of Expenditure LEADS/PHONE LISTS
Name of Federal Candidate: CONNOLLY, GERALD, EDWARD,
Calendar Year-To-Date Per Election for Office Sought 796.08

Full Name of Payee CLOUD DATA SERVICES
Mailing Address 1009 WHITNEY RANCH DR.
City HENDERSON State NV Zip Code 89014
Purpose of Expenditure LEADS/PHONE LISTS
Name of Federal Candidate: BACON, DON,
Calendar Year-To-Date Per Election for Office Sought 2011.51

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

CAPPLEMAN, OLIVER,
Signature

Date 03 / 21 / 2024

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUPPORT OUR FIREFIGHTERS AND PARAMEDICS PAC
FEC IDENTIFICATION NUMBER C C00773788

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

Full Name of Payee CLOUD DATA SERVICES
Mailing Address 1009 WHITNEY RANCH DR.
City HENDERSON State NV Zip Code 89014
Purpose of Expenditure LEADS / PHONE LISTS(ESTIMATE)
Name of Federal Candidate: CONNOLLY, GERALD, EDWARD,
Calendar Year-To-Date Per Election for Office Sought 796.08

Full Name of Payee CLOUD DATA SERVICES
Mailing Address 1009 WHITNEY RANCH DR.
City HENDERSON State NV Zip Code 89014
Purpose of Expenditure LEADS / PHONE LISTS(ESTIMATE)
Name of Federal Candidate: BACON, DON,
Calendar Year-To-Date Per Election for Office Sought 2011.51

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

CAPPLEMAN, OLIVER,
Signature

Date 03 / 28 / 2024

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUPPORT OUR FIREFIGHTERS AND PARAMEDICS PAC
FEC IDENTIFICATION NUMBER C C00773788

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

Full Name of Payee CLOUD DATA SERVICES
Mailing Address 1009 WHITNEY RANCH DR.
City HENDERSON State NV Zip Code 89014
Purpose of Expenditure LEADS / PHONE LISTS
Name of Federal Candidate: BACON, DON, , ,
Calendar Year-To-Date Per Election for Office Sought 45825.98
Date of Public Distribution/Dissemination 12 / 28 / 2023
Amount 67.06
Transaction ID : SE-S1403065
Date of Disbursement or Obligation 03 / 01 / 2024
Office Sought: House District: 02 State: NE
Disbursement For: Primary

Full Name of Payee CLOUD DATA SERVICES
Mailing Address 1009 WHITNEY RANCH DR.
City HENDERSON State NV Zip Code 89014
Purpose of Expenditure LEADS / PHONE LISTS
Name of Federal Candidate: BACON, DON, , ,
Calendar Year-To-Date Per Election for Office Sought 255.04
Date of Public Distribution/Dissemination 01 / 04 / 2024
Amount 56.68
Transaction ID : SE-S1405489
Date of Disbursement or Obligation 03 / 01 / 2024
Office Sought: House District: 02 State: NE
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 123.74
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

CAPPLEMAN, OLIVER, , ,
Signature

Date 12 / 28 / 2023

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUPPORT OUR FIREFIGHTERS AND PARAMEDICS PAC
FEC IDENTIFICATION NUMBER C C00773788

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

Full Name of Payee CLOUD DATA SERVICES
Mailing Address 1009 WHITNEY RANCH DR.
City HENDERSON State NV Zip Code 89014
Purpose of Expenditure LEADS / PHONE LISTS
Name of Federal Candidate: CARBAJAL, SALUD, O, , Support
Office Sought: House District: 24 State: CA
Calendar Year-To-Date Per Election for Office Sought 255.04
Disbursement For: Primary

Full Name of Payee CLOUD DATA SERVICES
Mailing Address 1009 WHITNEY RANCH DR.
City HENDERSON State NV Zip Code 89014
Purpose of Expenditure LEADS / PHONE LISTS
Name of Federal Candidate: BACON, DON, , Support
Office Sought: House District: 02 State: NE
Calendar Year-To-Date Per Election for Office Sought 574.44
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 127.66
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

CAPPLEMAN, OLIVER, ,
Signature

Date 01 / 04 / 2024

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUPPORT OUR FIREFIGHTERS AND PARAMEDICS PAC
FEC IDENTIFICATION NUMBER C C00773788

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

Full Name of Payee CLOUD DATA SERVICES
Mailing Address 1009 WHITNEY RANCH DR.
City HENDERSON State NV Zip Code 89014
Purpose of Expenditure LEADS / PHONE LISTS
Name of Federal Candidate: CARBAJAL, SALUD, O, , Support
Office Sought: House District: 24 State: CA
Calendar Year-To-Date Per Election for Office Sought 574.44
Disbursement For: Primary

Full Name of Payee CLOUD DATA SERVICES
Mailing Address 1009 WHITNEY RANCH DR.
City HENDERSON State NV Zip Code 89014
Purpose of Expenditure LEADS / PHONE LISTS
Name of Federal Candidate: CARBAJAL, SALUD, O, , Support
Office Sought: House District: 24 State: CA
Calendar Year-To-Date Per Election for Office Sought 20306.20
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 138.04
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

CAPPLEMAN, OLIVER, . ,
Signature

Date 01 / 11 / 2024

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUPPORT OUR FIREFIGHTERS AND PARAMEDICS PAC
FEC IDENTIFICATION NUMBER C C00773788

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

Full Name of Payee LAV SERVICES LLC
INVOICE DID NOT CLEAR BANK BEFORE CLOSE OF BOOKS
Mailing Address 1009 WHITNEY RANCH DR.
City HENDERSON State NV Zip Code 89014
Purpose of Expenditure PHONEBANK PAYROLL SERVICES
Category/Type

Name of Federal Candidate: CONNOLLY, GERALD, EDWARD,
Support Oppose
Office Sought: House Senate State: VA
District: 11
Calendar Year-To-Date Per Election for Office Sought 632.07
Disbursement For: Primary General 2024 Other (specify)

Full Name of Payee LAV SERVICES LLC
INVOICE DID NOT CLEAR BANK BEFORE CLOSE OF BOOKS
Mailing Address 1009 WHITNEY RANCH DR.
City HENDERSON State NV Zip Code 89014
Purpose of Expenditure PHONEBANK PAYROLL SERVICES
Category/Type 004

Name of Federal Candidate: BACON, DON,
Support Oppose
Office Sought: House Senate State: NE
District: 02
Calendar Year-To-Date Per Election for Office Sought 1787.62
Disbursement For: Primary General 2024 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

CAPPLEMAN, OLIVER,
Signature

Date 03 / 07 / 2024

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUPPORT OUR FIREFIGHTERS AND PARAMEDICS PAC
FEC IDENTIFICATION NUMBER C C00773788

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

Full Name of Payee LAV SERVICES LLC
INVOICE DID NOT CLEAR BANK BEFORE CLOSE OF BOOKS
Mailing Address 1009 WHITNEY RANCH DR.
City HENDERSON State NV Zip Code 89014
Purpose of Expenditure PHONEBANK PAYROLL SERVICES
Name of Federal Candidate: CONNOLLY, GERALD, EDWARD,
Calendar Year-To-Date Per Election for Office Sought 674.95
Disbursement For: Primary

Full Name of Payee LAV SERVICES LLC
INVOICE DID NOT CLEAR BANK BEFORE CLOSE OF BOOKS
Mailing Address 1009 WHITNEY RANCH DR.
City HENDERSON State NV Zip Code 89014
Purpose of Expenditure PHONEBANK PAYROLL SERVICES
Name of Federal Candidate: BACON, DON,
Calendar Year-To-Date Per Election for Office Sought 1890.38
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

CAPPLEMAN, OLIVER,
Signature

Date 03 / 14 / 2024

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUPPORT OUR FIREFIGHTERS AND PARAMEDICS PAC
FEC IDENTIFICATION NUMBER C C00773788

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

Full Name of Payee LAV SERVICES LLC
INVOICE DID NOT CLEAR BANK BEFORE CLOSE OF BOOKS
Mailing Address 1009 WHITNEY RANCH DR.
City HENDERSON State NV Zip Code 89014
Purpose of Expenditure PHONEBANK PAYROLL SERVICES
Name of Federal Candidate: CONNOLLY, GERALD, EDWARD,
Calendar Year-To-Date Per Election for Office Sought 796.08
Disbursement For: Primary

Full Name of Payee LAV SERVICES LLC
INVOICE DID NOT CLEAR BANK BEFORE CLOSE OF BOOKS
Mailing Address 1009 WHITNEY RANCH DR.
City HENDERSON State NV Zip Code 89014
Purpose of Expenditure PHONEBANK PAYROLL SERVICES
Name of Federal Candidate: BACON, DON,
Calendar Year-To-Date Per Election for Office Sought 2011.51
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

CAPPLEMAN, OLIVER,
Signature

Date 03 / 21 / 2024

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUPPORT OUR FIREFIGHTERS AND PARAMEDICS PAC
FEC IDENTIFICATION NUMBER C C00773788

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

Full Name of Payee LAV SERVICES LLC
INVOICE FOR THIS ESTIMATE NOT ISSUED OR PAID BEFORE CLOSE OF BOOKS
Mailing Address 1009 WHITNEY RANCH DR.
City HENDERSON State NV Zip Code 89014
Purpose of Expenditure PHONEBANK PAYROLL SERVICES(ESTIMATE)
Name of Federal Candidate: CONNOLLY, GERALD, EDWARD,
Calendar Year-To-Date Per Election for Office Sought 796.08
Disbursement For: Primary
Date of Public Distribution/Dissemination 03 / 28 / 2024
Amount 27.86
Transaction ID : SE-S1597741
Date of Disbursement or Obligation

Full Name of Payee LAV SERVICES LLC
INVOICE FOR THIS ESTIMATE NOT ISSUED OR PAID BEFORE CLOSE OF BOOKS
Mailing Address 1009 WHITNEY RANCH DR.
City HENDERSON State NV Zip Code 89014
Purpose of Expenditure PHONEBANK PAYROLL SERVICES(ESTIMATE)
Name of Federal Candidate: BACON, DON,
Calendar Year-To-Date Per Election for Office Sought 2011.51
Disbursement For: Primary
Date of Public Distribution/Dissemination 03 / 28 / 2024
Amount 27.86
Transaction ID : SE-S1597743
Date of Disbursement or Obligation

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

CAPPLEMAN, OLIVER,
Signature

Date 03 / 28 / 2024

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUPPORT OUR FIREFIGHTERS AND PARAMEDICS PAC
FEC IDENTIFICATION NUMBER C C00773788

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

Full Name of Payee LAV SERVICES LLC
Mailing Address 1009 WHITNEY RANCH DR.
City HENDERSON State NV Zip Code 89014
Purpose of Expenditure PHONEBANK PAYROLL SERVICES
Name of Federal Candidate: CARBAJAL, SALUD, O, , Support
Office Sought: House District: 24 State: CA
Calendar Year-To-Date Per Election for Office Sought 20306.20
Disbursement For: Primary 2024

Full Name of Payee LAV SERVICES LLC
Mailing Address 1009 WHITNEY RANCH DR.
City HENDERSON State NV Zip Code 89014
Purpose of Expenditure PHONEBANK PAYROLL SERVICES
Name of Federal Candidate: BACON, DON, , Support
Office Sought: House District: 02 State: NE
Calendar Year-To-Date Per Election for Office Sought 45825.98
Disbursement For: Primary 2024

(a) SUBTOTAL of Itemized Independent Expenditures 127.42
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

CAPPLEMAN, OLIVER, , ,
Signature

Date 12 / 28 / 2023

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUPPORT OUR FIREFIGHTERS AND PARAMEDICS PAC
FEC IDENTIFICATION NUMBER C C00773788

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

Full Name of Payee LAV SERVICES LLC
Mailing Address 1009 WHITNEY RANCH DR.
City HENDERSON State NV Zip Code 89014
Purpose of Expenditure PHONEBANK PAYROLL SERVICES
Name of Federal Candidate: BACON, DON, , , Support
Office Sought: House District: 02 State: NE
Calendar Year-To-Date Per Election for Office Sought 255.04
Disbursement For: Primary 2024

Full Name of Payee LAV SERVICES LLC
Mailing Address 1009 WHITNEY RANCH DR.
City HENDERSON State NV Zip Code 89014
Purpose of Expenditure PHONEBANK PAYROLL SERVICES
Name of Federal Candidate: CARBAJAL, SALUD, O, , Support
Office Sought: House District: 24 State: CA
Calendar Year-To-Date Per Election for Office Sought 255.04
Disbursement For: Primary 2024

(a) SUBTOTAL of Itemized Independent Expenditures 107.68
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

CAPPLEMAN, OLIVER, , ,
Signature

Date 01 / 04 / 2024

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUPPORT OUR FIREFIGHTERS AND PARAMEDICS PAC
FEC IDENTIFICATION NUMBER C C00773788

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

Full Name of Payee LAV SERVICES LLC
Mailing Address 1009 WHITNEY RANCH DR.
City HENDERSON State NV Zip Code 89014
Purpose of Expenditure PHONEBANK PAYROLL SERVICES
Name of Federal Candidate: BACON, DON, , , Support
Office Sought: House District: 02 State: NE
Calendar Year-To-Date Per Election for Office Sought 574.44
Disbursement For: Primary 2024

Full Name of Payee LAV SERVICES LLC
Mailing Address 1009 WHITNEY RANCH DR.
City HENDERSON State NV Zip Code 89014
Purpose of Expenditure PHONEBANK PAYROLL SERVICES
Name of Federal Candidate: CARBAJAL, SALUD, O, , Support
Office Sought: House District: 24 State: CA
Calendar Year-To-Date Per Election for Office Sought 574.44
Disbursement For: Primary 2024

(a) SUBTOTAL of Itemized Independent Expenditures 134.86
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

CAPPLEMAN, OLIVER, , ,
Signature

Date 01 / 11 / 2024

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUPPORT OUR FIREFIGHTERS AND PARAMEDICS PAC
FEC IDENTIFICATION NUMBER C C00773788

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

Full Name of Payee STANDARD DATA SERVICES LLC
INVOICE DID NOT CLEAR BANK BEFORE CLOSE OF BOOKS
Mailing Address 513 MILL AVE SE SUITE 206
City NEW PHILADELPHIA State OH Zip Code 44663
Purpose of Expenditure CAGING AND DATABASE SERVICES
Name of Federal Candidate: CONNOLLY, GERALD, EDWARD,
Calendar Year-To-Date Per Election for Office Sought 632.07
Disbursement For: Primary

Full Name of Payee STANDARD DATA SERVICES LLC
INVOICE DID NOT CLEAR BANK BEFORE CLOSE OF BOOKS
Mailing Address 513 MILL AVE SE SUITE 206
City NEW PHILADELPHIA State OH Zip Code 44663
Purpose of Expenditure CAGING AND DATABASE SERVICES
Name of Federal Candidate: BACON, DON,
Calendar Year-To-Date Per Election for Office Sought 1787.62
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

CAPPLEMAN, OLIVER,
Signature

Date 03 / 07 / 2024

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUPPORT OUR FIREFIGHTERS AND PARAMEDICS PAC
FEC IDENTIFICATION NUMBER C C00773788

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

Full Name of Payee STANDARD DATA SERVICES LLC
Mailing Address 513 MILL AVE SE SUITE 206
City NEW PHILADELPHIA State OH Zip Code 44663
Purpose of Expenditure CAGING AND DATABASE SERVICES
Name of Federal Candidate: CONNOLLY, GERALD, EDWARD,
Calendar Year-To-Date Per Election for Office Sought 674.95
Disbursement For: Primary

Full Name of Payee STANDARD DATA SERVICES LLC
Mailing Address 513 MILL AVE SE SUITE 206
City NEW PHILADELPHIA State OH Zip Code 44663
Purpose of Expenditure CAGING AND DATABASE SERVICES
Name of Federal Candidate: BACON, DON,
Calendar Year-To-Date Per Election for Office Sought 1890.38
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

CAPPLEMAN, OLIVER,
Signature

Date 03 / 14 / 2024

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUPPORT OUR FIREFIGHTERS AND PARAMEDICS PAC
FEC IDENTIFICATION NUMBER C C00773788

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

Full Name of Payee STANDARD DATA SERVICES LLC
Mailing Address 513 MILL AVE SE SUITE 206
City NEW PHILADELPHIA State OH Zip Code 44663
Purpose of Expenditure CAGING AND DATABASE SERVICES
Date of Public Distribution/Dissemination 03 / 21 / 2024
Amount 19.38
Transaction ID : SE-S1597609
Date of Disbursement or Obligation

Name of Federal Candidate: CONNOLLY, GERALD, EDWARD,
Support Oppose
Office Sought: House Senate State: VA District: 11
Calendar Year-To-Date Per Election for Office Sought 796.08
Disbursement For: Primary General Other (specify)

Full Name of Payee STANDARD DATA SERVICES LLC
Mailing Address 513 MILL AVE SE SUITE 206
City NEW PHILADELPHIA State OH Zip Code 44663
Purpose of Expenditure CAGING AND DATABASE SERVICES
Date of Public Distribution/Dissemination 03 / 21 / 2024
Amount 19.38
Transaction ID : SE-S1597611
Date of Disbursement or Obligation

Name of Federal Candidate: BACON, DON,
Support Oppose
Office Sought: House Senate State: NE District: 02
Calendar Year-To-Date Per Election for Office Sought 2011.51
Disbursement For: Primary General Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

CAPPLEMAN, OLIVER,
Signature

Date 03 / 21 / 2024

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUPPORT OUR FIREFIGHTERS AND PARAMEDICS PAC
FEC IDENTIFICATION NUMBER C C00773788

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

Full Name of Payee STANDARD DATA SERVICES LLC
INVOICE FOR THIS ESTIMATE NOT ISSUED OR PAID BEFORE CLOSE OF BOOKS
Mailing Address 513 MILL AVE SE SUITE 206
City NEW PHILADELPHIA State OH Zip Code 44663
Purpose of Expenditure CAGING AND DATABASE SERVICES(ESTIMATE)
Name of Federal Candidate: CONNOLLY, GERALD, EDWARD,
Calendar Year-To-Date Per Election for Office Sought 796.08
Date of Public Distribution/Dissemination 03 / 28 / 2024
Amount 19.38
Transaction ID : SE-S1597737
Date of Disbursement or Obligation
Office Sought: House District: 11 State: VA
Disbursement For: Primary General Other (specify)

Full Name of Payee STANDARD DATA SERVICES LLC
INVOICE FOR THIS ESTIMATE NOT ISSUED OR PAID BEFORE CLOSE OF BOOKS
Mailing Address 513 MILL AVE SE SUITE 206
City NEW PHILADELPHIA State OH Zip Code 44663
Purpose of Expenditure CAGING AND DATABASE SERVICES(ESTIMATE)
Name of Federal Candidate: BACON, DON,
Calendar Year-To-Date Per Election for Office Sought 2011.51
Date of Public Distribution/Dissemination 03 / 28 / 2024
Amount 19.38
Transaction ID : SE-S1597739
Date of Disbursement or Obligation
Office Sought: House District: 02 State: NE
Disbursement For: Primary General Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

CAPPLEMAN, OLIVER,
Signature

Date 03 / 28 / 2024

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUPPORT OUR FIREFIGHTERS AND PARAMEDICS PAC
FEC IDENTIFICATION NUMBER C C00773788

Check if 24-hour report 48-hour report New report Amends report filed on 12 / 28 / 2023

Full Name of Payee STANDARD DATA SERVICES LLC
Mailing Address 513 MILL AVE SE SUITE 206
City NEW PHILADELPHIA State OH Zip Code 44663
Purpose of Expenditure CAGING AND DATABASE SERVICES
Date of Public Distribution/Dissemination 12 / 28 / 2023
Amount 46.94
Transaction ID : SE-S1403069
Date of Disbursement or Obligation 03 / 01 / 2024
Name of Federal Candidate: BACON, DON, , , Support
Office Sought: House District: 02 State: NE
Disbursement For: Primary 2024

Full Name of Payee STANDARD DATA SERVICES LLC
Mailing Address 513 MILL AVE SE SUITE 206
City NEW PHILADELPHIA State OH Zip Code 44663
Purpose of Expenditure CAGING AND DATABASE SERVICES
Date of Public Distribution/Dissemination 01 / 04 / 2024
Amount 39.67
Transaction ID : SE-S1405493
Date of Disbursement or Obligation 03 / 01 / 2024
Name of Federal Candidate: BACON, DON, , , Support
Office Sought: House District: 02 State: NE
Disbursement For: Primary 2024

(a) SUBTOTAL of Itemized Independent Expenditures 86.61
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

CAPPLEMAN, OLIVER, , ,
Signature

Date 12 / 28 / 2023

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUPPORT OUR FIREFIGHTERS AND PARAMEDICS PAC
FEC IDENTIFICATION NUMBER C C00773788

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

Full Name of Payee STANDARD DATA SERVICES LLC
Mailing Address 513 MILL AVE SE SUITE 206
City NEW PHILADELPHIA State OH Zip Code 44663
Purpose of Expenditure CAGING AND DATABASE SERVICES
Name of Federal Candidate: CARBAJAL, SALUD, O, , Support
Office Sought: House District: 24 State: CA
Disbursement For: Primary 2024

Full Name of Payee STANDARD DATA SERVICES LLC
Mailing Address 513 MILL AVE SE SUITE 206
City NEW PHILADELPHIA State OH Zip Code 44663
Purpose of Expenditure CAGING AND DATABASE SERVICES
Name of Federal Candidate: BACON, DON, , Support
Office Sought: House District: 02 State: NE
Disbursement For: Primary 2024

(a) SUBTOTAL of Itemized Independent Expenditures 89.35
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

CAPPLEMAN, OLIVER, ,
Signature

Date 01 / 04 / 2024

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUPPORT OUR FIREFIGHTERS AND PARAMEDICS PAC
FEC IDENTIFICATION NUMBER C C00773788

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

Full Name of Payee STANDARD DATA SERVICES LLC
Mailing Address 513 MILL AVE SE SUITE 206
City NEW PHILADELPHIA State OH Zip Code 44663
Purpose of Expenditure CAGING AND DATABASE SERVICES
Name of Federal Candidate: CARBAJAL, SALUD, O, , Support
Office Sought: House District: 24 State: CA
Calendar Year-To-Date Per Election for Office Sought 574.44
Disbursement For: Primary 2024

Full Name of Payee STANDARD DATA SERVICES LLC
Mailing Address 513 MILL AVE SE SUITE 206
City NEW PHILADELPHIA State OH Zip Code 44663
Purpose of Expenditure CAGING AND DATABASE SERVICES
Name of Federal Candidate: CARBAJAL, SALUD, O, , Support
Office Sought: House District: 24 State: CA
Calendar Year-To-Date Per Election for Office Sought 20306.20
Disbursement For: Primary 2024

(a) SUBTOTAL of Itemized Independent Expenditures 96.62
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

CAPPLEMAN, OLIVER, . .
Signature

Date 01 / 11 / 2024

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUPPORT OUR FIREFIGHTERS AND PARAMEDICS PAC
FEC IDENTIFICATION NUMBER C C00773788

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

Full Name of Payee WIRED4DATA
Mailing Address 55 LAKE HAVASU AVE SOUTH F-677
City LAKE HAVASU CITY State AZ Zip Code 86403
Purpose of Expenditure PHONEBANK IT/TECH SUPPORT
Name of Federal Candidate: CONNOLLY, GERALD, EDWARD,
Calendar Year-To-Date Per Election for Office Sought 632.07
Date of Public Distribution/Dissemination 03 / 07 / 2024
Amount 114.13
Transaction ID : SE-S1587349
Date of Disbursement or Obligation
Office Sought: House District: 11 State: VA
Disbursement For: Primary General 2024 Other (specify)

Full Name of Payee WIRED4DATA
Mailing Address 55 LAKE HAVASU AVE SOUTH F-677
City LAKE HAVASU CITY State AZ Zip Code 86403
Purpose of Expenditure PHONEBANK IT/TECH SUPPORT
Name of Federal Candidate: BACON, DON,
Calendar Year-To-Date Per Election for Office Sought 1787.62
Date of Public Distribution/Dissemination 03 / 07 / 2024
Amount 114.13
Transaction ID : SE-S1587351
Date of Disbursement or Obligation
Office Sought: House District: 02 State: NE
Disbursement For: Primary General 2024 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

CAPPLEMAN, OLIVER,
Signature

Date 03 / 07 / 2024

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUPPORT OUR FIREFIGHTERS AND PARAMEDICS PAC
FEC IDENTIFICATION NUMBER C C00773788

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

Full Name of Payee WIREDDATA
Mailing Address 55 LAKE HAVASU AVE SOUTH F-677
City LAKE HAVASU CITY State AZ Zip Code 86403
Purpose of Expenditure PHONEBANK IT/TECH SUPPORT
Name of Federal Candidate: BACON, DON, , Support
Calendar Year-To-Date Per Election for Office Sought 1890.38
Disbursement For: Primary

Full Name of Payee WIREDDATA
Mailing Address 55 LAKE HAVASU AVE SOUTH F-677
City LAKE HAVASU CITY State AZ Zip Code 86403
Purpose of Expenditure PHONEBANK IT/TECH SUPPORT
Name of Federal Candidate: BACON, DON, , Support
Calendar Year-To-Date Per Election for Office Sought 1890.38
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

CAPPLEMAN, OLIVER, , ,
Signature

Date 03 / 14 / 2024

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUPPORT OUR FIREFIGHTERS AND PARAMEDICS PAC
FEC IDENTIFICATION NUMBER C C00773788

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

Full Name of Payee WIRED4DATA
Mailing Address 55 LAKE HAVASU AVE SOUTH F-677
City LAKE HAVASU CITY State AZ Zip Code 86403
Purpose of Expenditure PHONEBANK IT/TECH SUPPORT
Name of Federal Candidate: CONNOLLY, GERALD, EDWARD,
Calendar Year-To-Date Per Election for Office Sought 796.08
Date of Public Distribution/Dissemination 03 / 21 / 2024
Amount 47.24
Transaction ID : SE-S1597617
Date of Disbursement or Obligation
Office Sought: House District: 11 State: VA
Disbursement For: Primary General Other (specify)

Full Name of Payee WIRED4DATA
Mailing Address 55 LAKE HAVASU AVE SOUTH F-677
City LAKE HAVASU CITY State AZ Zip Code 86403
Purpose of Expenditure PHONEBANK IT/TECH SUPPORT
Name of Federal Candidate: BACON, DON,
Calendar Year-To-Date Per Election for Office Sought 2011.51
Date of Public Distribution/Dissemination 03 / 21 / 2024
Amount 47.24
Transaction ID : SE-S1597619
Date of Disbursement or Obligation
Office Sought: House District: 02 State: NE
Disbursement For: Primary General Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

CAPPLEMAN, OLIVER,
Signature

Date 03 / 21 / 2024

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUPPORT OUR FIREFIGHTERS AND PARAMEDICS PAC
FEC IDENTIFICATION NUMBER C C00773788

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

Full Name of Payee WIRED4DATA
Mailing Address 55 LAKE HAVASU AVE SOUTH F-677
City LAKE HAVASU CITY State AZ Zip Code 86403
Purpose of Expenditure PHONEBANK IT/TECH SUPPORT(ESTIMATE)
Name of Federal Candidate: CONNOLLY, GERALD, EDWARD,
Calendar Year-To-Date Per Election for Office Sought 796.08
Disbursement For: Primary

Full Name of Payee WIRED4DATA
Mailing Address 55 LAKE HAVASU AVE SOUTH F-677
City LAKE HAVASU CITY State AZ Zip Code 86403
Purpose of Expenditure PHONEBANK IT/TECH SUPPORT(ESTIMATE)
Name of Federal Candidate: BACON, DON,
Calendar Year-To-Date Per Election for Office Sought 2011.51
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

CAPPLEMAN, OLIVER,
Signature

Date 03 / 28 / 2024

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUPPORT OUR FIREFIGHTERS AND PARAMEDICS PAC
FEC IDENTIFICATION NUMBER C C00773788

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

Full Name of Payee WIRE4DATA
Mailing Address 55 LAKE HAVASU AVE SOUTH F-677
City LAKE HAVASU CITY State AZ Zip Code 86403
Purpose of Expenditure PHONEBANK IT/TECH SUPPORT Category/Type
Date of Public Distribution/Dissemination 12/28/2023
Amount 124.06
Transaction ID: SE-S1403079
Date of Disbursement or Obligation 03/01/2024

Name of Federal Candidate: CARBAJAL, SALUD, O,
Support Oppose
Office Sought: House District: 24 State: CA
Disbursement For: Primary General 2024 Other (specify)

Full Name of Payee WIRE4DATA
Mailing Address 55 LAKE HAVASU AVE SOUTH F-677
City LAKE HAVASU CITY State AZ Zip Code 86403
Purpose of Expenditure PHONEBANK IT/TECH SUPPORT Category/Type 004
Date of Public Distribution/Dissemination 12/28/2023
Amount 124.06
Transaction ID: SE-S1403077
Date of Disbursement or Obligation 03/01/2024

Name of Federal Candidate: BACON, DON,
Support Oppose
Office Sought: House District: 02 State: NE
Disbursement For: Primary General 2024 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 248.12
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

CAPPLEMAN, OLIVER,
Signature

Date 12/28/2023

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUPPORT OUR FIREFIGHTERS AND PARAMEDICS PAC
FEC IDENTIFICATION NUMBER C C00773788

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

Full Name of Payee WIRE4DATA
Mailing Address 55 LAKE HAVASU AVE SOUTH F-677
City LAKE HAVASU CITY State AZ Zip Code 86403
Purpose of Expenditure PHONEBANK IT/TECH SUPPORT
Name of Federal Candidate: BACON, DON, , Support
Office Sought: House District: 02 State: NE
Calendar Year-To-Date Per Election for Office Sought 255.04
Disbursement For: Primary
Date of Public Distribution/Dissemination 01/04/2024
Amount 104.85
Transaction ID : SE-S1405501
Date of Disbursement or Obligation 03/01/2024

Full Name of Payee WIRE4DATA
Mailing Address 55 LAKE HAVASU AVE SOUTH F-677
City LAKE HAVASU CITY State AZ Zip Code 86403
Purpose of Expenditure PHONEBANK IT/TECH SUPPORT
Name of Federal Candidate: CARBAJAL, SALUD, O, , Support
Office Sought: House District: 24 State: CA
Calendar Year-To-Date Per Election for Office Sought 255.04
Disbursement For: Primary
Date of Public Distribution/Dissemination 01/04/2024
Amount 104.85
Transaction ID : SE-S1405503
Date of Disbursement or Obligation 03/01/2024

(a) SUBTOTAL of Itemized Independent Expenditures 209.70
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

CAPPLEMAN, OLIVER, ,
Signature

Date 01/04/2024

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) SUPPORT OUR FIREFIGHTERS AND PARAMEDICS PAC
FEC IDENTIFICATION NUMBER C C00773788

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

Full Name of Payee WIRE4DATA
Mailing Address 55 LAKE HAVASU AVE SOUTH F-677
City LAKE HAVASU CITY State AZ Zip Code 86403
Purpose of Expenditure PHONEBANK IT/TECH SUPPORT
Name of Federal Candidate: BACON, DON, , Support
Office Sought: House District: 02 State: NE
Calendar Year-To-Date Per Election for Office Sought 574.44
Disbursement For: Primary 2024

Full Name of Payee WIRE4DATA
Mailing Address 55 LAKE HAVASU AVE SOUTH F-677
City LAKE HAVASU CITY State AZ Zip Code 86403
Purpose of Expenditure PHONEBANK IT/TECH SUPPORT
Name of Federal Candidate: CARBAJAL, SALUD, O, , Support
Office Sought: House District: 24 State: CA
Calendar Year-To-Date Per Election for Office Sought 574.44
Disbursement For: Primary 2024

(a) SUBTOTAL of Itemized Independent Expenditures 262.62
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures 1752.42

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

CAPPLEMAN, OLIVER, ,
Signature

Date 01 / 11 / 2024