PAGE 1 / 48

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

F	FORM 3X	For			Authorize		ttee		Office Us	se Only	
1.	NAME OF COMMITTEE (in full)	TYP	E OR PR	RINT ▼		ample: If ty er the lines.		12FE4		Se Olly	
Ş	UPPORT OUR FIR	EFIG	HTER	S AND	PARAME	DICS P	AC	1 1 1 1	1 1 1	1 1 1	I
 ,											
		13	300 I STR	EET, NW							
ADI ▼	DRESS (number and street)	∟ ⊢ SI	JITE 400	<u> </u>							
	Check if different than previously reported. (ACC)		/ASHING	TON				DC	20005	<u> </u>	
2.	FEC IDENTIFICATION	NUMBI	ER ▼		CITY ▲			STATE ▲		ZIP COI	DE 🛦
	C C00773788				3. IS THIS REPORT	×	NEW (N) OR		AMENDED (A)		
4.	TYPE OF REPORT (Choose One) (a) Quarterly Reports:	(I	b) Month Repor Due C	t 🔲	Feb 20 (M2)		May 20 (M5)		aug 20 (M8) Sep 20 (M9)		Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only)
	April 15 Quarterly Report July 15	(Q1)		2-Day	Apr 20 (M4)	Primary (1	Jul 20 (M7) 2P)		oct 20 (M10)	-	Jan 31 (YE) Runoff (12R)
	Quarterly Report October 15			Report for the		Convention	n (12C)	Speci	al (12S)		
	Quarterly Report January 31 Year-End Report			E	lection on	M I M	/ D D /	YIYIY	Y	in the State of	f
	July 31 Mid-Year Report (Non-elec Year Only) (MY)		F	80-Day POST-Electi Report for the	• • •	General (3	30G)	Runo	ff (30R)		Special (30S)
	Termination Repo	ort		E	lection on	M = M	/ D D /	Y I Y I Y	Y	in the State of	f
5.	Covering Period	03	01		024	through	03	31	202	24	
	ertify that I have examined e or Print Name of Treasu	_		to the be		wledge and	d belief it is ti	rue, correct	and complet	te.	
Sigr	nature of Treasurer Ca	APPLEM	IAN, OLIV	YER, , ,				Date 04	4 / 16		2024
NOT	TE: Submission of false, erro	oneous,	or incon	nplete inforr	mation may s	ubject the p	erson signing	this Report t	o the penalti	es of 52	U.S.C. § 30109
	Office Use									FOR Rev. 05/20	

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: 03 01 2024 To: 03 31 2024

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

SUPPORT OUR FIREFIGHTERS AND PARAMEDICS PAC

03 01 2024 03 31 2024 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 605.00 865.00 (i) Itemized (use Schedule A)..... 17997.00 31480.00 (ii) Unitemized (iii) TOTAL (add 32345.00 18602.00 Lines 11(a)(i) and (ii).....▶ 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 0.00 (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 32345.00 18602.00 Totals to Line 33, page 5)▶ 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees..... 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other 0.00 0.00 Political Committees..... 17. Other Federal Receipts 0.00 (Dividends, Interest, etc.)..... 0.00 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3)..... 0.00 0.00 (b) Levin Funds (from Schedule H5) (c) Total Transfers (add 18(a) and 18(b)).. 0.00 0.00 19. Total Receipts (add Lines 11(d), 32345.00 12, 13, 14, 15, 16, 17, and 18(c))....... 18602.00 20. Total Federal Receipts 18602.00 32345.00 (subtract Line 18(c) from Line 19)▶

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schodule H4)	1000 1110 1 01100	Galeridai Teal-to-Date
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
Transfers to Affiliated/Other Party Committees	0.00	0.00
Contributions to Federal Candidates/Committees	0.00	0.00
and Other Political Committees	0.00	0.00
(use Schedule E) Coordinated Party Expenditures	1752.42	5187.36
(52 U.S.C. § 30116(d)) (use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans Made	0.00	0.00
Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	25.00	25.00
-	23.00	25.00
(b) Political Party Committees	0.00	0.00
(such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	25.00	25.00
	4	45 45 45
Other Disbursements (Including Non-Federal Donations)	0.00	0.00
Non rederal Bondions)	0.00	7.00
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
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
Total Disbursements (add Lines 21(c), 22,	77. 1 77. 1 77.	4 1 4 1 4
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	6721.71	23624.61
Total Federal Disbursements		7 7 7
(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
3. Total Contributions (other than loans) (from Line 11(d), page 3)	18602.00	32345.00
4. Total Contribution Refunds (from Line 28(d))	25.00	25.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	18577.00	32320.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	4944.29	18412.25
. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
3. Net Operating Expenditures (subtract Line 37 from Line 36)	4944.29	18412.25

: 97 'A = G7 9 @ G B9 CI G'H9 LH F9 @ 5 H98 'HC' 5 'F9 DCF H Z G7 < 98 I @ 'CF' + H9 A = N5 H = CB

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

Name of Employer (for Individual)

General

DISABLED Receipt For:

C

Primary

Other (specify)

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

FOF	R LINE	NU	IMBER	:	PAGE		7	OF		48
(check only one)										
X	11a		11b		11c		12			
	13		14		15		16	;		17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) SUPPORT OUR FIREFIGHTERS AND PARAMEDICS PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name BARAHOMA, LIESSY, , , Date of Receipt Mailing Address 4891 SALT RIVER RD 2024 City State Zip Code Transaction ID: SA11AI-30825861 SAINT PETERS MO 63376 Amount of Each Receipt this Period FEC ID number of contributing C 300.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) **AMAYA SECRETARY** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** GREEN, PAMELA, , , Date of Receipt Mailing Address 54 CHAPEL HILL RD 03 20 2024 City State Zip Code Transaction ID: SA11AI-30826119 MILAN TN 38358 Amount of Each Receipt this Period FEC ID number of contributing 305.00 federal political committee. Memo Item

Cantal (openity) V		
Full Name of Individual (Last, First, Middle I	Initial) or Full Organization Name	Date of Receipt
Mailing Address		M = M / D = D / Y = Y = Y
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)		605.00

Occupation (for Individual)

305,00

DISABLED

Aggregate Year-to-Date ▼

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

605.00

S 17

SCHEDULE B (FEC Form 3X)	Hea con	arate schedule(s)	FOR LINE NUMBER: PAG				E 8 OF 48	
ITEMIZED DISBURSEMENTS	for each	category of the	(check only	/ one) □ 22	23	26	27	
	Detailed	Summary Page	28a	28b	28c	29	30b	
Any information copied from such Reports and State	ments may	not be sold or use	ed by any pers	on for the p	urpose o	f soliciting	contributions	
or for commercial purposes, other than using the na								
NAME OF COMMITTEE (In Full)								
SUPPORT OUR FIREFIGHTERS	AND PA	ARAMEDICS	PAC					
Full Name (Last, First, Middle Initial) A. CLOUD DATA SERVICES				Date of I	Disburser	ment		
A. CLOUD DATA SERVICES				M M	/ D		YYY	
Mailing Address 1009 WHITNEY RANCH DR			03	01		2024		
City	State	· ·			ntification	Number		
HENDERSON Purpose of Disbursement	NV	89014						
LEADS/PHONE LISTS (CLEARING FROM PREV	IOUS PERIO	וחו	003	C				
Candidate Name	1003 I LIKIC)				ID : SB21E		
			Category/ Type	AIIIOUIIL	n Each l	JISDUI S C III	ent this Period	
	ment For:				7		230.15	
Senate President	Primary Other (spe	General						
State: District:		Memo Item						
Full Name (Last, First, Middle Initial)								
B. CLOUD DATA SERVICES				Date of Disbursement				
Mailing Address 1009 WHITNEY RANCH DR					03 01 2024			
Maining Address 1009 WHITNET KANCITEK							2021	
City	State Zip Code NV 89014			FEC Identification Number				
HENDERSON Purpose of Disbursement	INV				C			
LEADS/PHONE LISTS (CLEARING FROM PREV	IOUS PERIC				anation I	D : SB21E	00220	
Candidate Name		Category/			_	ent this Period		
Office Sought: House Disburse	mont For		Туре				272.32	
Senate Disburse	ment For: Primary	General			7	-	212.02	
President	Other (spe			Mem	o Item			
State: District:	-			IVIGII				
Full Name (Last, First, Middle Initial)				Date of I	Dishurser	ment		
CLOUD DATA SERVICES				M M	/ D		YYY	
Mailing Address 1009 WHITNEY RANCH DR				03	01		2024	
City	State	Zip Code		FEC Ide	ntification	Number		
HENDERSON Purpose of Disbursement	NV	89014		1.1			-	
LEADS/PHONE LISTS (CLEARING FROM PREV	IOUS PERIC	DD)	003	C	ooot!ax !	ID - CD04	2.0022(
Candidate Name		•	Category/			ID : SB21I Disbursem	ent this Period	
			Type				288.21	
Office Sought: House Disburse Senate	ment For: Primary	General			7	-	200.21	
President	Other (spe			Mai:	o Itar-			
State: District:	, ,			iviem	o Item			
						-	700 69	
SUBTOTAL of Disbursements This Page (optional).			·····•		-		790.68	
TOTAL This Period (last page this line number only	v)							

	OUEDINE D /EEO E OY							
5(CHEDULE B (FEC Form 3X)			FOR LINE N	IUMBER: PAGE 9 OF 48			
T	EMIZED DISBURSEMENTS	for each cat	e schedule(s)	(check only	· ′			
			mmary Page	X 21b	22 23 26 27			
				28a	28b 28c 29 30b			
	ny information copied from such Reports and State							
or	for commercial purposes, other than using the national description of the commercial purposes, other than using the national description of the commercial purposes, other than using the national description of the commercial purposes, other than using the national description of the commercial purposes, other than using the national description of the commercial purposes.	me and address	s of any political	committee to s	solicit contributions from such committee.			
/	NAME OF COMMITTEE (In Full)							
/	SUPPORT OUR FIREFIGHTERS	AND PAR	AMEDICS	PAC				
_	Full Name (Last, First, Middle Initial)							
٩.	CLOUD DATA SERVICES				Date of Disbursement			
	Mailing Address 1009 WHITNEY RANCH DR				03 06 2024			
	Mailing Address 1000 WHITTET NAMOTEDIC				30 2024			
	City		ip Code		FEC Identification Number			
	HENDERSON	NV	89014					
	Purpose of Disbursement		1	003	C			
	LEADS/PHONE LISTS Candidate Name			003	Transaction ID : SB21B-98317			
	Candidate Name			Category/ Type	Amount of Each Disbursement this Period			
	Office Sought: House Disburse	ement For:		Туре	295.80			
	Senate	Primary	General		4-			
	President	Other (specify) ▼		invoice unpaid by close of books			
	State: District:				Nicine tem			
	Full Name (Last, First, Middle Initial)							
3.	CLOUD DATA SERVICES				Date of Disbursement			
	Moiling Address 4000 MUUTNEY DANOLI DD				03 13 2024			
	Mailing Address 1009 WHITNEY RANCH DR				03 13 2024			
	City	State Z	ip Code		FEC Identification Number			
	HENDERSON	NV	89014		1 LO Identification Number			
	Purpose of Disbursement		l l	000				
	LEADS/PHONE LISTS Candidate Name		L	003	Transaction ID : SB21B-98318			
	Candidate Name			Category/ Type	Amount of Each Disbursement this Period			
	Office Sought: House Disburse	ement For:		Туре	250.50			
	Senate	Primary	General					
	President	Other (specify))		invoice unpaid by close of books Memo Item			
	State: District:	1			Niemo item			
	Full Name (Last, First, Middle Initial)							
С.	CLOUD DATA SERVICES				Date of Disbursement			
	Moiling Address 4000 WHITNEY DANCH DD				03 20 2024			
	Willing Address 1003 WHITNET RANGE DR	g Address 1009 WHITNEY RANCH DR						
	City	State Z	ip Code		FEC Identification Number			
	HENDERSON	NV	89014					
	Purpose of Disbursement		l r	000	[C]			
	LEADS/PHONE LISTS Candidate Name			003	Transaction ID : SB21B-98318			
	Candidate Name			Category/ Type	Amount of Each Disbursement this Period			
	Office Sought: House Disburse	ement For:		ı ype	65.72			
	Senate	Primary	General		4 4			
	President	Other (specify) \		invoice unpaid by close of book			
	State: District:				Wollio Itelli			
					200			
5	SUBTOTAL of Disbursements This Page (optional).			·······	0.00			
7	OTAL This Period (last page this line number only	<i></i>						
- 1	The raise choc (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) X 21b 22 28a 28b	PAGE 10 OF 48 23 26 27 28c 29 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) SUPPORT OUR FIREFIGHTERS A	e and address of any political of	by any person for the	ourpose of soliciting contributions
Full Name (Last, First, Middle Initial)			
A. CLOUD DATA SERVICES		Date of	Disbursement
Mailing Address 1009 WHITNEY RANCH DR		03	27 2024
HENDERSON	State Zip Code NV 89014		entification Number
Purpose of Disbursement LEADS/PHONE LISTS Candidate Name			nsaction ID : SB21B-98319 of Each Disbursement this Period
	nent For: Primary General Other (specify) ▼	Type X Mer	108.19 invoice unpaid by close of book
B. ILLINOIS DEPT. OF REVENUE Mailing Address 101 W JEFFERSON ST		Date of	Disbursement / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City SPRINGFIELD Purpose of Disbursement	State Zip Code IL 62702	FEC Ide	entification Number
STATE TAXES Candidate Name		001 Tran	nsaction ID : SB21B-98316 of Each Disbursement this Period
	nent For: Primary General Other (specify)	Mer	69.50 no Item
Full Name (Last, First, Middle Initial) C. LAV SERVICES LLC	M = M	Disbursement	
Mailing Address 1009 WHITNEY RANCH DR City S	State Zip Code	03	01 2024
HENDERSON Purpose of Disbursement PHONEBANK PAYROLL SERVICES (CLEARING F Candidate Name	NV 89014 FROM PREVIOUS	003 C	nsaction ID : SB21B-98321 of Each Disbursement this Period
	nent For: Primary General Other (specify) ▼		218.64 mo Item
			288.14

HENDERSON Purpose of Disbursement PHONEBANK PAYROLL SERVICES (CLEARING Candidate Name	State NV FROM PREV ement For: Primary	RAMEDICS Zip Code 89014	committee to	Date of Disbursement Date of Disbursement O3
NAME OF COMMITTEE (In Full) SUPPORT OUR FIREFIGHTERS Full Name (Last, First, Middle Initial) LAV SERVICES LLC Mailing Address 1009 WHITNEY RANCH DR City HENDERSON Purpose of Disbursement PHONEBANK PAYROLL SERVICES (CLEARING Candidate Name	State NV FROM PREV ement For: Primary	Zip Code 89014	PAC 003 Category/	Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUPPORT OUR FIREFIGHTERS Full Name (Last, First, Middle Initial) LAV SERVICES LLC Mailing Address 1009 WHITNEY RANCH DR City HENDERSON Purpose of Disbursement PHONEBANK PAYROLL SERVICES (CLEARING Candidate Name	State NV FROM PREV ement For:	Zip Code 89014 /IOUS	003 Category/	FEC Identification Number C Transaction ID: SB21B-98321 Amount of Each Disbursement this Period
Full Name (Last, First, Middle Initial) LAV SERVICES LLC Mailing Address 1009 WHITNEY RANCH DR City HENDERSON Purpose of Disbursement PHONEBANK PAYROLL SERVICES (CLEARING Candidate Name	State NV FROM PREV ement For:	Zip Code 89014 /IOUS	003 Category/	FEC Identification Number C Transaction ID: SB21B-98321 Amount of Each Disbursement this Period
LAV SERVICES LLC Mailing Address 1009 WHITNEY RANCH DR City HENDERSON Purpose of Disbursement PHONEBANK PAYROLL SERVICES (CLEARING Candidate Name	NV FROM PREV Perment For: Primary	89014 /IOUS	Category/	FEC Identification Number C Transaction ID: SB21B-98321 Amount of Each Disbursement this Period
Mailing Address 1009 WHITNEY RANCH DR City HENDERSON Purpose of Disbursement PHONEBANK PAYROLL SERVICES (CLEARING Candidate Name	NV FROM PREV Perment For: Primary	89014 /IOUS	Category/	FEC Identification Number C Transaction ID: SB21B-98321 Amount of Each Disbursement this Period
City HENDERSON Purpose of Disbursement PHONEBANK PAYROLL SERVICES (CLEARING Candidate Name	NV FROM PREV Perment For: Primary	89014 /IOUS	Category/	FEC Identification Number C Transaction ID : SB21B-98321 Amount of Each Disbursement this Period
HENDERSON Purpose of Disbursement PHONEBANK PAYROLL SERVICES (CLEARING Candidate Name	NV FROM PREV Perment For: Primary	89014 /IOUS	Category/	Transaction ID : SB21B-98321 Amount of Each Disbursement this Period
Purpose of Disbursement PHONEBANK PAYROLL SERVICES (CLEARING Candidate Name	FROM PREV	rious	Category/	Transaction ID : SB21B-98321 Amount of Each Disbursement this Period
PHONEBANK PAYROLL SERVICES (CLEARING Candidate Name	ement For:		Category/	Transaction ID : SB21B-98321 Amount of Each Disbursement this Perio
Candidate Name	ement For:		Category/	Amount of Each Disbursement this Period
	Primary			
Office Sought: House Disburse	Primary		Турс	
	Primary			258.70
Senate	·	General		7 7
President	Other (speci	ify) ▼		Memo Item
State: District:				I were ken
Full Name (Last, First, Middle Initial)				
LAV SERVICES LLC				Date of Disbursement
Matthew Address (2001) IN INTERIOR				M M / D D / Y Y Y Y
Mailing Address 1009 WHITNEY RANCH DR		03 01 2024		
City	State	Zip Code		
HENDERSON	NV	89014		FEC Identification Number
Purpose of Disbursement		Г		
PHONEBANK PAYROLL SERVICES (CLEARING	FROM PREV	/IOUS	003	Transaction ID : SB21B-98321
Candidate Name			Category/	Amount of Each Disbursement this Period
Office Sought: House Disburse	ement For:		Туре	273.80
Senate Disburse	Primary	General		210.00
President	Other (speci			
State: District:]	,		Memo Item
Full Name (Last, First, Middle Initial)				
LAV SERVICES LLC				Date of Disbursement
				M M / D D / Y Y Y Y
Mailing Address 1009 WHITNEY RANCH DR	03 06 2024			
City	State	Zip Code		
HENDERSON	NV	89014		FEC Identification Number
Purpose of Disbursement				C
PHONEBANK PAYROLL SERVICES	003	Transaction ID : SB21B-98317		
Candidate Name			Category/	Amount of Each Disbursement this Perio
Office Cought:			Туре	281.02
Office Sought: House Disburse Senate	ement For: Primary	General		201.02
President	Other (speci			invoice unpaid by close of
State: District:		·· <i>51</i> ▼		× Memo Item
<u> </u>				
SUBTOTAL of Disbursements This Page (optional)				532.50

	I llog congrete cohodulo(a) I				FOR LINE NUMBER: PAGE 12 OF 48 (check only one)			
•	EMIZED DISBURSEMENTS		ategory of the ummary Page	21b 28a	22 23 26 27 28b 28c 29 30b			
	ny information copied from such Reports and States for commercial purposes, other than using the nar							
<u>\</u>	NAME OF COMMITTEE (In Full)	no ana adaro	oo or any pontion		CONCRETE CONTRACTOR OF THE CONTRACTOR CONTRACTOR	70.		
\rangle	SUPPORT OUR FIREFIGHTERS	AND PAF	RAMEDICS	PAC				
_	Full Name (Last, First, Middle Initial)				Data of Dialauraneant			
٦.	LAV SERVICES LLC				Date of Disbursement	V		
	Mailing Address 1009 WHITNEY RANCH DR				03 13 2024			
	,	State NV	Zip Code		FEC Identification Number			
	HENDERSON Purpose of Disbursement	INV	89014					
	PHONEBANK PAYROLL SERVICES			003	C			
	Candidate Name			Category/ Type	Transaction ID: SB21B-98318 Amount of Each Disbursement this F	eriod		
	Office Sought: House Disburse	ment For:		Туре	237.9	7		
	Senate President	Primary Other (specif	General		invoice unpaid by clo	se of books		
	State: District:	Other (specif	(y) ∀		X Memo Item			
	Full Name (Last, First, Middle Initial)							
3.	LAV SERVICES LLC				Date of Disbursement	Y		
	Mailing Address 1009 WHITNEY RANCH DR		03 20 2024					
	City HENDERSON	State Zip Code NV 89014			FEC Identification Number			
	Purpose of Disbursement		C					
	PHONEBANK PAYROLL SERVICES			003	Transaction ID : SB21B-98319			
	Candidate Name			Category/ Type	Amount of Each Disbursement this F	'eriod		
	Office Sought: House Disburser	ment For:		туре	62.4	4		
	Senate	Primary	General		invoice unpaid by clo	ose of book		
	President	Other (specif	iy)		× Memo Item	73C OI DOOK		
	State: District: Full Name (Last, First, Middle Initial)							
С.	LAV SERVICES LLC				Date of Disbursement			
	Mailing Address 1009 WHITNEY RANCH DR		03 27 2024	Y				
	City	State	Zip Code					
	HENDERSON	NV	89014		FEC Identification Number			
	Purpose of Disbursement	'	Г	000				
	PHONEBANK PAYROLL SERVICES Candidate Name	003 Category/	Transaction ID: SB21B-98319 Amount of Each Disbursement this F	eriod				
	Office Cought							
	Office Sought: House Disburser Senate	ment For: Primary	General		113.1			
	President	Other (specif			invoice unpaid by clo	se of book		
	State: District:		· · ·		× Memo Item			
S	SUBTOTAL of Disbursements This Page (optional)				0.0	00		
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Т	OTAL This Period (last page this line number only))						

S 17

SCHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 13 C				
ITEMIZED DISBURSEMENTS		parate schedule(s) category of the	(check only				
		Summary Page	X 21b	22	23 26 27		
[1		28a	28b	28c 29 30b		
Any information copied from such Reports and State or for commercial purposes, other than using the national states of the state of the							
NAME OF COMMITTEE (In Full)							
SUPPORT OUR FIREFIGHTERS	AND P	ARAMEDICS	PAC				
Full Name (Last, First, Middle Initial)				5 . (5)			
A. RALLYPAY				Date of Di	isbursement		
Mailing Address 995 MARKET STREET FLOOR 2					31 2024		
City	State CA	Zip Code 94103		FEC Ident	ification Number		
SAN FRANCISO Purpose of Disbursement		94103					
COMBINED "OFF THE TOP" CREDIT CARD CHA	ARGEBACK	s	003	C			
Candidate Name			Category/		action ID: SB21B-98703 Each Disbursement this Period		
			Type	Amount of	Lacif Disbuisement this Period		
Office Sought: House Disburse	ment For:			1	29.00		
Senate	Primary	Primary General			, ,		
President	Other (spe	ecify) 🔻		Memo	Item		
State: District:				_			
Full Name (Last, First, Middle Initial) B. DALLYDAY				Date of Di	isbursement		
B. RALLYPAY				M M / D D / Y Y Y			
Mailing Address 995 MARKET STREET FLOOR 2				03	31 2024		
City	State	Zip Code		FFC Ident	ification Number		
SAN FRANCISO	CA	94103					
Purpose of Disbursement COMBINED "OFF THE TOP" CC TRANSACTION	EEES MAE	Category/ Type			Transaction ID : SB21B-98703 Amount of Each Disbursement this Period		
Candidate Name	TELS WAY						
000					942.00		
	ment For:	Conoral			813.00		
Senate President	Primary Other (spe	General					
State: District:	Other (ope	Solly)		Memo	Item		
Full Name (Last, First, Middle Initial)							
C. REGUS				Date of Di	isbursement		
Mailing Address ONE WESTBROOK CORPORATI	E CENTER			03	20 2024		
City	State	Zip Code		FEC Ident	ification Number		
WESTCHESTER	IL	60154					
Purpose of Disbursement RENT EXPENSE	001	C					
Candidate Name			action ID : SB21B-9831(
			Category/ Type				
Office Sought: House Disburse	ment For:	I	71: -		107.77		
Senate	Primary	General					
President	Other (spe	ecify) ▼		Memo	Item		
State: District:				ш			
SUBTOTAL of Disbursements This Page (optional).			·····		949.77		
TOTAL This Period (last page this line number only	<i>d</i>						

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SCHEDULE B (FEC Form 3X)) [FOR LINE NUMBER: PAGE 14			GE 14 OF 48		
ITEMIZED DISBURSEMENTS			rate schedule(s) category of the	l `	(check only one)				
			Summary Page		21b	22 20h	23	26	27 20b
	0				28a	28b	28c	29	30b
Any information copied from such Reports and or for commercial purposes, other than using the									
NAME OF COMMITTEE (In Full)									
SUPPORT OUR FIREFIGHTE	ERS A	AND PA	RAMEDICS	PAC					
Full Name (Last, First, Middle Initial)						D-44	Diahuman		
A. STANDARD DATA SERVICES LLC						M = M	Disburse	D / Y	2004
Mailing Address 513 MILL AVE SE SUITE 206			I			03	0		2024
City NEW PHILADELPHIA		tate OH	Zip Code 44663			FEC Ide	entification	n Number	
Purpose of Disbursement			44003			С			
CAGING AND DATABASE SERVICES (CLE	EARING	FROM PR	EVIOUS	003		_		ID : SB21	D 00224
Candidate Name				Category	//				nent this Period
Office Sought: House Dis	shursem	ent For:		Type		· · ·			161.10
Senate		Primary	General				7	7	46.
President State: District:		Other (spec	cify) ▼			Mei	mo Item		
Full Name (Last, First, Middle Initial)									
B. STANDARD DATA SERVICES LLC					Date of Disbursement				
Mailing Address 513 MILL AVE SE SUITE 206						03	0	1	2024
City NEW PHILADELPHIA		tate OH	Zip Code 44663			FEC Ide	entification	n Number	
Purpose of Disbursement			44000			С		-	
CAGING AND DATABASE SERVICES (CLEARING FROM PREVIOUS 003						neaction	ID : SB21I	R-98321	
Candidate Name Category/			//			_	nent this Period		
Type								190.62	
Office Sought: House Disbursement For: Senate Primary General					-		190.02		
	President Other (specify)				п				
State: District:						Mei	mo Item		
Full Name (Last, First, Middle Initial) C. CTANDADD DATA CEDY (CE						Doto of	Disburse	mont	
STANDARD DATA SERVICE:	S LLC	<u> </u>				M M			YYY
Mailing Address 513 MILL AVE SE SUITE 206						03	0	<u> </u>	2024
City		tate	Zip Code			FEC Ide	entification	n Number	
NEW PHILADELPHIA Purpose of Disbursement		ОН	44663						
CAGING AND DATABASE SERVICES (CLE	EARING	FROM PR	EVIOUS	003				ID ODG	
Candidate Name				Category	//			ID: SB21 Disbursem	nent this Period
Office Sought: House Dis	churcom	ent For:		Туре					201.74
Senate		Primary	General				7		201111
President						□ Max			
State: District: Memo Item									
SUBTOTAL of Disbursements This Page (opti	ional)								553.46
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TOTAL This Period (last page this line number	er only)					1			

SCHEDULE B (FEC Form 3X)		FOR LINE I	NUMBER: PAGE 15 OF 48
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)
	Detailed Summary Page	28a	28b 28c 29 30b
Any information copied from such Reports and Staten or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)			
angle support our firefighters r	AND PARAMEDICS	PAC	
Full Name (Last, First, Middle Initial)			Data of Disharanasat
A. STANDARD DATA SERVICES LLC			Date of Disbursement
Mailing Address 513 MILL AVE SE SUITE 206			03 06 7 2024
,	State Zip Code OH 44663		FEC Identification Number
NEW PHILADELPHIA Purpose of Disbursement	UH 44003		
CAGING AND DATABASE SERVICES		003	C
Candidate Name		Cata nami/	Transaction ID: SB21B-98317
		Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disbursen	nent For:	71	207.07
Senate	Primary General		
	Other (specify) ▼		x Memo Item invoice unpaid by close of book
State: District: Full Name (Last, First, Middle Initial)			
5	0		Date of Disbursement
STANDARD DATA SERVICES LL	C		M M / D D / Y Y Y Y
Mailing Address 513 MILL AVE SE SUITE 206	_		03 13 2024
,	State Zip Code		FEC Identification Number
NEW PHILADELPHIA Purpose of Disbursement	OH 44663		
CAGING AND DATABASE SERVICES		003	C
Candidate Name	l.	Category/	Transaction ID: SB21B-98318 Amount of Each Disbursement this Period
		Type	Amount of Each Dispulsement this Period
Office Sought: House Disbursen	nent For:		175.36
	Primary General		invoice unpaid by close of book
	Other (specify)		X Memo Item
State: District:			
Full Name (Last, First, Middle Initial)	•		Date of Disbursement
STANDARD DATA SERVICES LL	C		M M / D D / Y Y Y Y
Mailing Address 513 MILL AVE SE SUITE 206			03 20 2024
City	State Zip Code		FEC Identification Number
NEW PHILADELPHIA	OH 44663		
Purpose of Disbursement	1	003	C
CAGING AND DATABASE SERVICES Candidate Name	I	Category/ Type	Transaction ID : SB21B-98319 Amount of Each Disbursement this Period
Office Sought: House Disbursen	nent For:	1,400	46.00
	Primary General		4 4
President	Other (specify) ▼		invoice unpaid by close of bool
State: District:			World Relif
SUBTOTAL of Disbursements This Page (optional)		·····	0.00
TOTAL This Desired (leak seems this live seems)			
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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(for each category of the	(Clieck Offin	one)
	Detailed Summary Page		22 23 26 27 28b 28c 29 30b
Any information copied from such Reports and Stater or for commercial purposes, other than using the nar			
NAME OF COMMITTEE (In Full)			
SUPPORT OUR FIREFIGHTERS	AND PARAMEDIC	CS PAC	
Full Name (Last, First, Middle Initial) A. CTANDARD DATA CERVICES LLC			Date of Disbursement
A. STANDARD DATA SERVICES LLC			M M / D D / Y Y Y Y
Mailing Address 513 MILL AVE SE SUITE 206			03 27 2024
City NEW PHILADELPHIA	State Zip Code OH 44663		FEC Identification Number
Purpose of Disbursement			C
CAGING AND DATABASE SERVICES		003	Transaction ID : SB21B-98320
Candidate Name		Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disburser		Турс	78.69
Senate President	Primary General		invoice unpaid by close of bo
State: District:	Other (specify) ▼		× Memo Item
Full Name (Last, First, Middle Initial)			
B. UNITED STATES TREASURY			Date of Disbursement
Mailing Address 1500 PENNSYLVANIA AVENUE NW			03 15 2024
City WASHINGTON	State Zip Code DC 20003		FEC Identification Number
Purpose of Disbursement			С
TAXES		001	Transaction ID : SB21B-98317
Candidate Name		Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disburser			367.00
Senate President	Other (specify) General		
State: District:	Other (apeciny)		Memo Item
Full Name (Last, First, Middle Initial)			Data of Diahumamant
^{C.} WIRED4DATA			Date of Disbursement
Mailing Address 55 LAKE HAVASU AVE SOUTH F	-677		03 01 2024
,	State Zip Code		FEC Identification Number
LAKE HAVASU Purpose of Disbursement	AZ 86403		
PHONEBANK IT/TECH SUPPORT (CLEARING FF	ROM PREVIOUS	003	Transaction ID : SB21B-9832
Candidate Name		Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disburser	ment For:	1 77 7	425.77
Senate	Primary General		
President District:	Other (specify) ▼		Memo Item
State: District:			
SUBTOTAL of Disbursements This Page (optional)		······	792.77
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 LINE I			
TIENNELD DISBONSLINILINIS	for each category of the Detailed Summary Page	X 21b 28a	22 23 26 27 28b 28c 29 30b		
Any information copied from such Reports and Sta or for commercial purposes, other than using the					
NAME OF COMMITTEE (In Full)	Tarrie and address of any pointed		Solioti Solitilisationis moni Saciri Solitilitatos.		
SUPPORT OUR FIREFIGHTER	S AND PARAMEDICS	PAC			
Full Name (Last, First, Middle Initial)					
N. WIRED4DATA			Date of Disbursement		
Mailing Address 55 LAKE HAVASU AVE SOUTH	Ⅎ F-677		03 01 2024		
City	State Zip Code AZ 86403		FEC Identification Number		
LAKE HAVASU Purpose of Disbursement	AZ 86403				
PHONEBANK IT/TECH SUPPORT (CLEARING	S EPOM PREVIOUS	003	C		
Candidate Name	FROM FREVIOUS		Transaction ID : SB21B-98322		
Caradate Name		Category/ Type	Amount of Each Disbursement this Period		
Office Sought: House Disbut	rsement For:	туре	503.78		
Senate	Primary General		, , , , , , , , , , , , , , , , , , , ,		
President	Other (specify) ▼		Memo Item		
State: District:					
Full Name (Last, First, Middle Initial)			Data of Dishursoment		
' WIRED4DATA			Date of Disbursement		
Mailing Address 55 LAKE HAVASU AVE SOUT	H F-677		03 01 2024		
City	State Zip Code		FEC Identification Number		
LAKE HAVASU	AZ 86403				
Purpose of Disbursement	S EDOM DDEVIOUS	003			
PHONEBANK IT/TECH SUPPORT (CLEARING Candidate Name	FROM PREVIOUS	003	Transaction ID : SB21B-98322		
Candidate Name		Category/	Amount of Each Disbursement this Period		
Office Sought: House Disbut	rsement For:	Туре	533.19		
Senate	Primary General		7 7		
President	Other (specify)				
State: District:			Memo Item		
Full Name (Last, First, Middle Initial)					
WIRED4DATA			Date of Disbursement		
Mailing Address 55 LAKE HAVASU AVE SOUTI	- Н F-677		03 06 7 2024		
City	State Zip Code		FFO Haveffeet N. J.		
LAKE HAVASU	AZ 86403		FEC Identification Number		
Purpose of Disbursement			С		
PHONEBANK IT/TECH SUPPORT		003	Transaction ID : SB21B-98317		
Candidate Name		Category/ Type	Amount of Each Disbursement this Period		
Office Sought: House Disbut	rsement For:	.,,,,	547.23		
Senate	Primary General		4 4		
President	Other (specify)		invoice unpaid by close of b		
State: District:			X Memo Item		
SUBTOTAL of Disbursements This Page (optional			1036.97		
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TOTAL This Period (last page this line number o	nly)				
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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 18 OF 48
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	
	Detailed Summary Page	X 21b 28a	22 23 26 27 28b 28c 29 30b
Any information copied from such Reports and States or for commercial purposes, other than using the nar			
NAME OF COMMITTEE (In Full)	ne and address of any politica	i committee to	solicit contributions from sacri committee.
SUPPORT OUR FIREFIGHTERS	AND PARAMEDICS	PAC	
Full Name (Last, First, Middle Initial)			
^{A.} WIRED4DATA			Date of Disbursement
Mailing Address 55 LAKE HAVASU AVE SOUTH F	-677		03 13 / 2024
City	State Zip Code		FEC Identification Number
LAKE HAVASU	AZ 86403		FEC Identification Number
Purpose of Disbursement		222	
PHONEBANK IT/TECH SUPPORT		003	Transaction ID : SB21B-98318
Candidate Name		Category/	Amount of Each Disbursement this Period
Office Sought: House Disburse	ment For:	Туре	463.42
Senate	Primary General		7 7
President	Other (specify) ▼		invoice unpaid by close of books
State: District:			X Memo Item
Full Name (Last, First, Middle Initial)			
^{3.} WIRED4DATA			Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address 55 LAKE HAVASU AVE SOUTH F	- -677		03 20 2024
,	State Zip Code		FEC Identification Number
LAKE HAVASU Purpose of Disbursement	AZ 86403		
PHONEBANK IT/TECH SUPPORT		003	C
Candidate Name			Transaction ID : SB21B-98319
		Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disburse	ment For:		121.57
Senate	Primary General		invoice unpaid by close of book
President	Other (specify)		× Memo Item
State: District:			
Full Name (Last, First, Middle Initial)			Date of Disbursement
WIRED4DATA			
Mailing Address 55 LAKE HAVASU AVE SOUTH F	-677		03 27 2024
Other	01-1-		
City LAKE HAVASU	State Zip Code AZ 86403		FEC Identification Number
Purpose of Disbursement	AZ 00403		C
PHONEBANK IT/TECH SUPPORT		003	C Transaction ID : SB21B-9832(
Candidate Name		Category/	Amount of Each Disbursement this Period
Office County	and Fam.	Type	191.80
Office Sought: House Disburse	ment For:		191.00
President	Primary General Other (specify) ▼		invoice unpaid by close of book
State: District:	other (specify) ▼		× Memo Item
SUBTOTAL of Disbursements This Page (optional)			0.00
			4944.29
TOTAL This Period (last page this line number only)		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)

	9
X	10

NAME OF COMMITTEE (In Full)

A. Full Name (Lock First Middle Initial) of Dahte	O		Notice of Dobt (Domeson)
A. Full Name (Last, First, Middle Initial) of Debto	Nature of Debt (Purpose): LEADS/PHONE LISTS		
CLOUD DATA SERVICES	LLADS/FRONE LISTS		
Mailing Address 1009 WHITNEY RANCH DR			
City	State	Zip Code	
HENDERSON	NV	89014	
Outstanding Balance Beginning This Period			Transaction ID : SD10-1598025
2818.26			
Amount Incurred This Period	Pa	yment This Period	Outstanding Balance at Close of This Period
982.54	· · · · ·	1314.22	2486.58
B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Nature of Debt (Purpose):
LAV SERVICES LLC			PHONEBANK PAYROLL SERVICES
Mailing Address 1009 WHITNEY RANCH DR			
City	State	Zip Code	_
HENDERSON	NV	89014	
Outstanding Balance Beginning This Period			Transaction ID : SD10-1598023
2677.34			
Amount Incurred This Period Payment This Period			Outstanding Balance at Close of This Period
953.94		1248.51	2382.77
C. Full Name (Last, First, Middle Initial) of Debto	r or Creditor		Nature of Debt (Purpose):
STANDARD DATA SERVICES	LLC		CAGING AND DATABASE SERVICES
Mailing Address 513 MILL AVE SE SUITE 206			
City	State	Zip Code	
NEW PHILADELPHIA	ОН	44663	
Outstanding Balance Beginning This Period			Transaction ID: SD10-1598021
1972.74			
Amount Incurred This Period	Pa	yment This Period	Outstanding Balance at Close of This Period
693.66	7	919.95	1746.45
SUBTOTALS This Period This Page (optional)		>	6615.80
TOTALS This Period (last page this line number			
TOTAL OUTSTANDING LOANS from Schedule			
ADD 2) and 3) and carry forward to appropriate	line of Summa	ary 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
FOR LINE NUMBER:
(check only one)

	9
X	10

48

NAME OF COMMITTEE (In Full)

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
WIRED4DATA	PHONEBANK IT/TECH SUPPORT		
Mailing Address 55 LAKE HAVASU AVE SOUTH F	-677		-
		1=: 0 :	
City LAKE HAVASU	State AZ	Zip Code 86403	
	/_	00403	Transaction ID : SD10-1598027
Outstanding Balance Beginning This Period			11aiisactioii ib . 3b10-1396021
5213.74			
Amount Incurred This Period	Payı	ment This Period	Outstanding Balance at Close of This Period
1801.12		2431.30	4583.56
B. Full Name (Last, First, Middle Initial) of Debtor o	r Creditor		Nature of Debt (Purpose):
Mailing Address			-
I maining / tautions			
City	State	Zip Code	
Outstanding Balance Beginning This Period			
7 7 7			
Amount Incurred This Period	Payı	ment This Period	Outstanding Balance at Close of This Period
		7	
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			
Amount Incurred This Period	Payı	ment This Period	Outstanding Balance at Close of This Period
	,	, , , , , , , , , , , , , , , , , , , ,	
SUBTOTALS This Period This Page (optional)		>	4583.56
TOTALS This Period (last page this line number or	nly)	>	11199.36
TOTAL OUTSTANDING LOANS from Schedule C	(last page on	ly)	0.00
ADD 2) and 3) and carry forward to appropriate lin	ne of Summar	y Page (last page only) ▶	11199.36

TEMIZED INDEPENDENT EXPENDITURES			PAGE 21 OF 48
NAME OF COMMITTEE (In Full)			FOR LINE 24 OF FORM 33
, ,			FEC IDENTIFICATION NUMBER
SUPPORT OUR FIREFIGHTERS AN	D PARAME	EDICS PAC	C C00773788
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on M M / D D / Y Y Y Y Y
Full Name of Payee CLOUD DATA SERVICES		X Memo	Item Date of Public Distribution/Dissemination
INVOICE DID NOT CLEAR BANK BEFORE CLOSI Mailing Address 1009 WHITNEY RANCH DR.	E OF BOOKS		Mount 07 07 2024
City	State	Zip Code	61.69
HENDERSON	NV	89014	Transaction ID : SE-S1587337 Date of Disbursement or Obligation
Purpose of Expenditure LEADS/PHONE LISTS		Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate:		Support	Office Sought: X House District: 11
CONNOLLY, GERALD, EDWARD, ,		Oppose	President Senate State: VA
Calendar Year-To-Date Per Election for Office Sought	7 7	632.07	Disbursement For: ☐ Primary ☐ General 2024 ☐ Other (specify) ▶
Full Name of Payee		X Memo	Item Date of Public Distribution/Dissemination
CLOUD DATA SERVICES			M M / D D / Y Y Y Y
Mailing Address 1000 WHITNEY BANCH DR	E OF BOOKS		03 07 2024
1009 WHITNEY RANCH DR.			Amount
City	State	Zip Code	61.69
HENDERSON	NV	89014	Transaction ID : SE-S1587339 Date of Disbursement or Obligation
Purpose of Expenditure	•	Category/	M M / D D / Y Y Y Y
LEADS/PHONE LISTS		Type 004	
Name of Federal Candidate:		Support	Office Sought: X House District: 02
BACON, DON, , ,		Oppose	President Senate State: NE
Calendar Year-To-Date			Disbursement For: Primary Genera
Per Election for Office Sought	7	1787.62	2024
() () () () () () () () () () () () () (200
(a) SUBTOTAL of Itemized Independent Expenditures			0.00
(b) SUBTOTAL of Unitemized Independent Expenditure	es		>
(c) TOTAL Independent Expenditures			· •
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized	•	
CAPPLEMAN, OLIVER, , ,		Date	03 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
0:			

NAME OF COMMITTEE (In Full)

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

SUPPORT OUR FIREFIGHTERS AND PARAMEDICS PAC

			PAGE 22 OF 48					
			FOR LINE 24 OF FORM 3X					
FEC IDENTIFICATION NUMBER ▼								
		С	C00773788					
filed on M M / D D / Y Y Y Y								
n	Date	of Pub	olic Distribution/Dissemination					
	N	03	14 2024					
	Amou	nt						
-	\Box		16.18					
	Trans	action	n ID : SE-S1597129					
Н		of Disk	bursement or Obligation					
	L							
ffice	Sough		House District: 11					
	Preside		Senate State: VA					
ishu	rsemen							
24			specify) ▶					
n	Date of	of Pub	olic Distribution/Dissemination					
	N	03	14 Y 2024					
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	Amou	nt	16.18					
	Trans	sactio	on ID : SE-S1597131					
	Trans	saction of Disk	on ID : SE-S1597131 bursement or Obligation					
	Trans	saction of Disk	on ID : SE-S1597131					
ffice	Trans	saction of Disk	on ID : SE-S1597131 bursement or Obligation					
ffice	Trans Date	saction Disk	in ID : SE-S1597131 bursement or Obligation					
isbu	Trans Date of	saction Disk	win ID : SE-S1597131 bursement or Obligation / D D / Y Y Y Y Y House District: 02 Senate State: NE					
isbu	Trans Date of Sough Preside	saction of Disk	In ID: SE-S1597131 bursement or Obligation House District: 02 Senate State: NE Primary General					
	Trans Date of Sough Preside	saction of Disk	win ID : SE-S1597131 bursement or Obligation / D D / Y Y Y Y Y House District: 02 Senate State: NE					
isbu	Trans Date of Sough Preside	saction of Disk	In ID: SE-S1597131 bursement or Obligation House District: 02 Senate State: NE Primary General					
isbu	Trans Date of Sough Preside	saction of Disk	In ID : SE-S1597131 bursement or Obligation D D V V V V V V V V V V V V V V V V					
isbu	Trans Date of Sough Preside	saction of Disk	In ID : SE-S1597131 bursement or Obligation D D V V V V V V V V V V V V V V V V					
isbu	Trans Date of Sough Preside	saction of Disk	In ID : SE-S1597131 bursement or Obligation D D V V V V V V V V V V V V V V V V					

Check if 24-hour report 48-hour report New report Amends report Full Name of Payee X Memo Ite **CLOUD DATA SERVICES** INVOICE DID NOT CLEAR BANK BEFORE CLOSE OF BOOKS Mailing Address 1009 WHITNEY RANCH DR. City State Zip Code **HENDERSON** NV89014 Purpose of Expenditure Category/ LEADS/PHONE LISTS Type Name of Federal Candidate: X Support CONNOLLY, GERALD, EDWARD, , Oppose Calendar Year-To-Date 674.95 2 Per Election for Office Sought Full Name of Payee × Memo Ite **CLOUD DATA SERVICES** INVOICE DID NOT CLEAR BANK BEFORE CLOSE OF BOOKS Mailing Address 1009 WHITNEY RANCH DR. City State Zip Code **HENDERSON** NV89014 Purpose of Expenditure Category/ 004 LEADS/PHONE LISTS Type Name of Federal Candidate: X Support BACON, DON, , , Oppose Calendar Year-To-Date 1890.38 Per Election for Office Sought (a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures Under penalty of perjury I certify that the independent expenditures reported herein were no 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, , , 2024 14 03 Date Signature FEC Schedule E (Form 3X) Rev. 05/2016

SCHEDULE F (FEC Form 3X)

TEMIZED INDEPENDENT EXPENDITURES				PAGE 23 OF 48 FOR LINE 24 OF FORM 3X		
NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼						
SUPPORT OUR FIREFIGHTERS AN	D DARAME	EDICS PAC				
OUT ON TOOK TIKE TOTTE KO /IIV	D I 7 (I () (IVIL			C C00773788		
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M M / D D / Y Y Y Y		
Full Name of Payee CLOUD DATA SERVICES		X Memo	Item	Date of Public Distribution/Dissemination		
INVOICE DID NOT CLEAR BANK BEFORE CLOSI Mailing Address 1009 WHITNEY RANCH DR.	E OF BOOKS			M 03		
				Amount		
City	State	Zip Code		26.65		
HENDERSON	NV	89014		Transaction ID : SE-S1597605 Date of Disbursement or Obligation		
Purpose of Expenditure LEADS/PHONE LISTS		Category/ Type		M = M / D = D / Y = Y = Y		
Name of Federal Candidate:		Support	Office	e Sought: X House District: 11		
CONNOLLY, GERALD, EDWARD, ,		Oppose		President Senate State: VA		
Calendar Year-To-Date Per Election for Office Sought	7 1 7	796.08	Disbu 2024	ursement For:		
Full Name of Payee CLOUD DATA SERVICES		x Memo	Item	Date of Public Distribution/Dissemination		
INVOICE DID NOT CLEAR BANK BEFORE CLOSI	E OF BOOKS			03 / 21 / Y 2024		
Mailing Address 1009 WHITNEY RANCH DR.				Amount		
City	State	Zip Code		26.65		
HENDERSON	NV	89014		Transaction ID : SE-S1597607 Date of Disbursement or Obligation		
Purpose of Expenditure	I	Category/	$\overline{}$	M M / D D / Y Y Y Y		
LEADS/PHONE LISTS		Type 004				
Name of Federal Candidate: BACON, DON, , ,		Support	Office	e Sought: House District: 02 Provident Senate State: NE		
		Oppose		Fresident Senate State.		
Calendar Year-To-Date Per Election for Office Sought		2011.51	Disbu 2024	ursement For:		
			<u> </u>			
(a) SUBTOTAL of Itemized Independent Expenditures			•	0.00		
(b) SUBTOTAL of Unitemized Independent Expenditure	'es		•			
(c) TOTAL Independent Expenditures						
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized					
CAPPLEMAN, OLIVER, , ,		Date	_ M	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		

TEMIZED INDEPENDENT EXPENDITURES	3		PAGE 24 OF 48			
			FOR LINE 24 OF FORM 3X			
NAME OF COMMITTEE (In Full)		-DIOO DAO	FEC IDENTIFICATION NUMBER ▼			
SUPPORT OUR FIREFIGHTERS AN	ND PAKAIVII	EDICS PAC	C C00773788			
Check if 24-hour report 48-hour report	New rep	ort Amends repo	rt filed on M M / D D / Y Y Y Y			
Full Name of Payee CLOUD DATA SERVICES		X Memo				
INVOICE FOR THIS ESTIMATE NOT ISSUED OF Mailing Address 1009 WHITNEY RANCH DR.	R PAID BEFORE	CLOSE OF BOOKS	M 03			
City	State	Zip Code	26.65			
HENDERSON	NV	89014	Transaction ID : SE-S1597733 Date of Disbursement or Obligation			
Purpose of Expenditure LEADS / PHONE LISTS(ESTIMATE)		Category/ Type	M M / D D / Y Y Y Y			
Name of Federal Candidate:		Support	Office Sought:			
CONNOLLY, GERALD, EDWARD, ,		Oppose	President Senate State: VA			
Calendar Year-To-Date Per Election for Office Sought	7 7	796.08	Disbursement For:			
Full Name of Payee		▼ Memo	Item Date of Public Distribution/Dissemination			
CLOUD DATA SERVICES		CLOSE OF BOOKS	03 28 / Y Y Y Y Y Y			
Mailing Address 1009 WHITNEY RANCH DR.	X PAID BEFORE	CLUSE OF BOOKS				
			Amount			
City	State	Zip Code	26.64			
HENDERSON	NV	89014	Transaction ID : SE-S1597735 Date of Disbursement or Obligation			
Purpose of Expenditure LEADS / PHONE LISTS(ESTIMATE)		Category/ Type 004	M M / D D / Y Y Y Y			
Name of Federal Candidate:		X Support	Office Sought: X House District: 02			
BACON, DON, , ,		Oppose	President Senate State: NE			
Calendar Year-To-Date Per Election for Office Sought	7 7	2011.51	Disbursement For: ☐ Primary ☐ General 2024 ☐ Other (specify) ▶			
(a) SUBTOTAL of Itemized Independent Expenditure	·s		0.00			
(b) SUBTOTAL of Unitemized Independent Expenditures						
(c) TOTAL Independent Expenditures			•			
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candic party committee) any political party committee or its	date or authorized	•	·			
CAPPLEMAN, OLIVER, , ,		Date	03 28 2024			

SCHEDULE E (FEC Form 3X)

TEMIZED INDEPENDENT EXPENDITURES					PAGE 2	
NAME OF COMMITTEE (In Full)						24 OF FORM 3X
SUPPORT OUR FIREFIGHTERS AN	D PARAMI	EDICS PAC		C	C0077378	TION NUMBER ▼
					00011010	•
Check if 24-hour report 48-hour report	New rep	ort Amends repor	t filed on	M = M /	D D /	Y Y Y Y Y
Full Name of Payee CLOUD DATA SERVICES		☐ Memo I	tem Da	te of Publi	/ D D	n/Dissemination
Mailing Address 1009 WHITNEY RANCH DR.	Δn	12 nount	28	2023		
				lount		
City	State	Zip Code				67.06
HENDERSON	NV	89014			ID : SE-S14 irsement or	
Purpose of Expenditure LEADS / PHONE LISTS		Category/ Type		M 03	01	2024
Name of Federal Candidate:		Support	Office Sc	ught:	House	District:02
BACON, DON, , ,		Oppose		sident	Senate	State: NE
Calendar Year-To-Date			Disburse	ment For:	X Prima	ry General
Per Election for Office Sought	7	45825.98	2024	Other (sp	ecify) ▶	
Full Name of Payee		☐ Memo I	tem Da	te of Public	Distributio	n/Dissemination
CLOUD DATA SERVICES				01 M	04	2024
Mailing Address 1009 WHITNEY RANCH DR.			An	nount		
City	State	Zip Code	— Г			56.68
HENDERSON	NV	89014			ID : SE-S14	
Purpose of Expenditure		Category/		M M M	01	/ Y Y Y Y Y Y 2024
LEADS / PHONE LISTS		Type 004		00	0.1	2021
Name of Federal Candidate:		X Support	Office Sc	ught:	X House	District:02
BACON, DON, , ,		Oppose	Pre	sident	Senate	State: NE
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	255.04	Disburser 2024	ment For:	Prima	ry General
				<u> </u>		_
(a) SUBTOTAL of Itemized Independent Expenditures			. Г			123.74
(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					7	
(b) SUBTOTAL of Unitemized Independent Expenditure	es		•			
(c) TOTAL Independent Expenditures			•			
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized	•				
CARRIEMAN OLIVER			M = M	/ D D		TY TY
CAPPLEMAN, OLIVER, , ,		_ Date	12	28	20)23

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

TEMIZED INDEPENDENT EXPENDITURES				PAGE 26 OF 48
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
SUPPORT OUR FIREFIGHTERS AN	D PARAMI	EDICS PAC		FEC IDENTIFICATION NUMBER ▼
COLL COLL MELLICITIES AND		LDIOOTAG		C C00773788
Check if 24-hour report 48-hour report	New rep	ort Amends repo	rt filed on	M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item Date of	of Public Distribution/Dissemination
CLOUD DATA SERVICES				01
Mailing Address 1009 WHITNEY RANCH DR.	Amour	nt		
			7111041	
City	State	Zip Code		56.68
HENDERSON	NV	89014		action ID : SE-S1405491 of Disbursement or Obligation
Purpose of Expenditure LEADS / PHONE LISTS		Category/ Type		03 01 2024
Name of Federal Candidate:		X Support	Office Sough	it: X House District: 24
CARBAJAL, SALUD, O, ,		Oppose	Preside	C^
Colondon Voca To Doto			Disbursemen	
Calendar Year-To-Date Per Election for Office Sought	7	255.04	2024	ther (specify)
Full Name of Payee		☐ Memo	Item Date of	of Public Distribution/Dissemination
CLOUD DATA SERVICES			M	0.4M / D.D / Y.Y.Y.Y
Mailing Address 1000 WHITNEY BANCH DR				01 11 2024
1009 WHITNEY RANCH DR.			Amour	nt
City	State	Zip Code	— Г	70.98
HENDERSON	NV	89014	Trans	saction ID : SE-S1412831 of Disbursement or Obligation
Purpose of Expenditure LEADS / PHONE LISTS		Category/ Type 004	N	03 / 01 / 2024
Name of Federal Candidate:		X Support	Office Sough	it: X House District:02
BACON, DON, , ,		Oppose	Preside	NE
Calendar Year-To-Date		1 1 1 1 1 1 1	Disbursemen	t For: X Primary General
Per Election for Office Sought	7 7	574.44	²⁰²⁴	ther (specify)
(a) SUBTOTAL of Itemized Independent Expenditures			•	127.66
(b) SUBTOTAL of Unitemized Independent Expenditure	'es		•	
(a) TOTAL Independent Expenditures				
(c) TOTAL Independent Expenditures			•	7 7 7
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
CAPPLEMAN, OLIVER, , ,		Date	M = M /	04 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

SCHEDULE E (FEC Form 3X)

TEMIZED INDEPENDENT EXPENDITURES				PAGE 27 OF 48 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
SUPPORT OUR FIREFIGHTERS AN	D PARAME	EDICS PAC		C C00773788
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M = M / D = D / Y = Y = Y
Full Name of Payee CLOUD DATA SERVICES		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address 1009 WHITNEY RANCH DR.		01 11 2024 Amount		
0.4	04-4-	7:- 01-		70.98
City HENDERSON	State NV	Zip Code 89014		Transaction ID : SE-S1412833 Date of Disbursement or Obligation
Purpose of Expenditure LEADS / PHONE LISTS		Category/ Type		03 / 01 / 2024
Name of Federal Candidate:		Support	Office	Sought: X House District: 24
CARBAJAL, SALUD, O, ,		Oppose		President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	574.44	Disbu 2024	rsement For:
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address				12 / 28 / 2023
1009 WHITNEY RANCH DR.				Amount
City HENDERSON	State	Zip Code 89014		67.06 Transaction ID : SE-S1403067
Purpose of Expenditure	140	03014		Date of Disbursement or Obligation
LEADS / PHONE LISTS		Category/ Type 004		03 / 01 / 2024
Name of Federal Candidate:		X Support	Office	Sought: House District: 24
CARBAJAL, SALUD, O, ,		Oppose		President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought	7 7	20306.20	Disbu 2024	rsement For:
(a) SUBTOTAL of Itemized Independent Expenditures			•	138.04
(b) SUBTOTAL of Unitemized Independent Expenditure	res		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
CAPPLEMAN, OLIVER, , ,		Date		M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

SCHEDULE E (FEC FORM 3X) ITEMIZED INDEPENDENT EXPENDITURES	3			PAGE 28 OF 48
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
, , ,				FEC IDENTIFICATION NUMBER ▼
SUPPORT OUR FIREFIGHTERS AN	ND PARAIVIE	EDICS PAC		C C00773788
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M M / D D / Y Y Y Y
Full Name of Payee LAV SERVICES LLC		X Memo	Item	Date of Public Distribution/Dissemination
INVOICE DID NOT CLEAR BANK BEFORE CLOSE OF BOOKS Mailing Address 1009 WHITNEY RANCH DR.				M 03
				Amount
City	State	Zip Code		58.61
HENDERSON	NV	89014		Transaction ID : SE-S1587345 Date of Disbursement or Obligation
Purpose of Expenditure PHONEBANK PAYROLL SERVICES		Category/ Type		M = M / D = D / Y = Y = Y
Name of Federal Candidate:		Support	Office	e Sought: X House District: 11
CONNOLLY, GERALD, EDWARD, ,		Oppose		President Senate State: VA
Calendar Year-To-Date Per Election for Office Sought	7 1 7	632.07	Disbi 2024	ursement For:
Full Name of Payee		X Memo	Item	Date of Public Distribution/Dissemination
LAV SERVICES LLC	LAV SERVICES LLC			
Mailing Address 1009 WHITNEY RANCH DR.	SE OF BOOKS			03 07 2024
1009 WITHET KANOTI DK.				Amount
City	State	Zip Code		58.61
HENDERSON	NV	89014		Transaction ID : SE-S1587347 Date of Disbursement or Obligation
Purpose of Expenditure PHONEBANK PAYROLL SERVICES		Category/ Type 004		M = M / D = D / Y = Y = Y
Name of Federal Candidate:		Support	Offic	e Sought: House District: 02
BACON, DON, , ,		Oppose		President Senate State: NE
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	1787.62	Disbi 2024	ursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	3		•	0.00
(b) SUBTOTAL of Unitemized Independent Expenditu	ıres		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candid party committee) any political party committee or its	ate or authorized			
CAPPLEMAN, OLIVER, , ,		Date	e 0	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

Date

SCHEDULE E (FEC FORM 3X) ITEMIZED INDEPENDENT EXPENDITURES				PAGE 29 OF 48		
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X		
, , ,				FEC IDENTIFICATION NUMBER ▼		
SUPPORT OUR FIREFIGHTERS AN	ID PARAIVIE	EDICS PAC		C C00773788		
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M M / D D / Y Y Y Y		
Full Name of Payee LAV SERVICES LLC		X Memo	Item	Date of Public Distribution/Dissemination		
INVOICE DID NOT CLEAR BANK BEFORE CLOS Mailing Address 1009 WHITNEY RANCH DR.		03 / 014 / 2024				
1009 WHITNEY RANCH DR.				Amount		
City	State	Zip Code		15.37		
HENDERSON	NV	89014		Transaction ID : SE-S1597137 Date of Disbursement or Obligation		
Purpose of Expenditure PHONEBANK PAYROLL SERVICES		Category/ Type				
Name of Federal Candidate:		Support	Offic	e Sought: X House District: 11		
CONNOLLY, GERALD, EDWARD, ,		Oppose		President Senate State: VA		
Calendar Year-To-Date Per Election for Office Sought	, , ,	674.95	Disbi 2024	ursement For:		
Full Name of Payee			Item	Date of Public Distribution/Dissemination		
	LAV SERVICES LLC					
Mailing Address 1009 WHITNEY RANCH DR.	DE OF BOOKS			03 14 2024		
				Amount		
City	State	Zip Code		15.37		
HENDERSON	NV	89014		Transaction ID : SE-S1597139 Date of Disbursement or Obligation		
Purpose of Expenditure		Category/ 004	\neg	M = M / D = D / Y = Y = Y		
PHONEBANK PAYROLL SERVICES		Type 004				
Name of Federal Candidate:		X Support	Offic	e Sought:		
BACON, DON, , ,		Oppose		President Senate State: NE		
Calendar Year-To-Date Per Election for Office Sought	7	1890.38	Disbi 2024	ursement For:		
<u> </u>						
(a) SUBTOTAL of Itemized Independent Expenditures	S		•	0.00		
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•			
(c) TOTAL Independent Expenditures						
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidaparty committee) any political party committee or its	ate or authorized					
CAPPLEMAN, OLIVER, , ,		Date	e 0)3		

Date

TEMIZED INDEPENDENT EXPENDITURES				PAGE 30 OF 48
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
SUPPORT OUR FIREFIGHTERS AN	ID PARAMI	EDICS PAC		C C00773788
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed	on M M / D D / Y Y Y Y
Full Name of Payee LAV SERVICES LLC INVOICE DID NOT CLEAR BANK BEFORE CLOS Mailing Address 1009 WHITNEY RANCH DR.	E OF BOOKS	⊠ Memo	Item	Date of Public Distribution/Dissemination M03
City	Ctata	Zin Codo		27.86
City HENDERSON	State NV	Zip Code 89014		Transaction ID : SE-S1597613 Date of Disbursement or Obligation
Purpose of Expenditure PHONEBANK PAYROLL SERVICES		Category/ Type		M = M / D = D / Y = Y = Y
Name of Federal Candidate:		X Support	Office	e Sought: X House District: 11
CONNOLLY, GERALD, EDWARD, ,		Oppose		President Senate State: VA
Calendar Year-To-Date Per Election for Office Sought	, , ,	796.08	Disbu 2024	ursement For:
Full Name of Payee LAV SERVICES LLC INVOICE DID NOT CLEAR BANK BEFORE CLOS	SE OF BOOKS	⊠ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address 1009 WHITNEY RANCH DR.				Amount
City HENDERSON	State NV	Zip Code 89014		27.86 Transaction ID : SE-S1597615 Date of Disbursement or Obligation
Purpose of Expenditure PHONEBANK PAYROLL SERVICES		Category/ Type 004		M = M / D = D / Y = Y = Y
Name of Federal Candidate: BACON, DON, , ,		Support Oppose	Office	e Sought:
Calendar Year-To-Date Per Election for Office Sought	7 1 7	2011.51	Disbu 2024	orsement For:
(a) SUBTOTAL of Uniterprized Independent Expenditures				0.00
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidaparty committee) any political party committee or its	ate or authorized	•		· · · · · · · · · · · · · · · · · · ·
CAPPLEMAN, OLIVER, , ,		_ Date	e 0	3 21 2024

SCHEDULE E (FEC Form 3X) TEMIZED INDEPENDENT EXPENDITURES				
TEMIZED INDEPENDENT EXPENDITORES				PAGE 31 OF 48 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
SUPPORT OUR FIREFIGHTERS AN	D PARAME	EDICS PAC		C C00773788
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	M
Full Name of Payee LAV SERVICES LLC		⊠ Memo	Item Date	of Public Distribution/Dissemination
INVOICE FOR THIS ESTIMATE NOT ISSUED OR Mailing Address 1009 WHITNEY RANCH DR.	PAID BEFORE (CLOSE OF BOOKS	Amou	M 03 / 28 / Y 2024 Y
City	State	Zip Code		27.86
HENDERSON	NV	89014		saction ID : SE-S1597741 of Disbursement or Obligation
Purpose of Expenditure PHONEBANK PAYROLL SERVICES(ESTIMATE)		Category/ Type		M M / D D / Y Y Y Y
Name of Federal Candidate:		N Curan aut	Office Cours	ht. Villausa Diatriat, 11
CONNOLLY, GERALD, EDWARD, ,		Support Oppose	Office Sough	nt. House District.
Calendar Year-To-Date Per Election for Office Sought	7	796.08	Disbursemen	nt For:
Full Name of Payee		× Memo	Item Date	of Public Distribution/Dissemination
INVOICE FOR THIS ESTIMATE NOT ISSUED OR Mailing Address 1009 WHITNEY RANCH DR.	PAID BEFORE (CLOSE OF BOOKS	[03 / 28 / 2024
			Amou	ınt
City HENDERSON	State NV	Zip Code 89014		27.86 saction ID : SE-S1597743
Purpose of Expenditure		Category/	Date	of Disbursement or Obligation
PHONEBANK PAYROLL SERVICES(ESTIMATE)		Type 004		
Name of Federal Candidate: BACON, DON, , ,		Support Oppose	Office Soug	
		Оррозе	Presid	Seriale State.
Calendar Year-To-Date Per Election for Office Sought	7	2011.51	Disbursement 2024	nt For:
(a) SUBTOTAL of Itemized Independent Expenditures			. [0.00
(b) SUBTOTAL of Unitemized Independent Expenditur	es		• —	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized			
CAPPLEMAN, OLIVER, , ,		Date	03	28 2024

Date

SCHEDULE E (FEC Form 3X)

TEMIZED INDEPENDENT EXPENDITURES				PAGE 32 OF 48
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
SUPPORT OUR FIREFIGHTERS AN		EDICS DAC		IDENTIFICATION NUMBER ▼
3011 OKT OOKT IKEI IGITIEKS AN	D I AITAIVII	LDICOT AC	C	C00773788
Check if 24-hour report 48-hour report	New rep	ort Amends report	filed on	/ D D / Y T Y T Y
Full Name of Payee LAV SERVICES LLC		☐ Memo It	em Date of Publ	lic Distribution/Dissemination
Mailing Address 1009 WHITNEY RANCH DR.	12	28 2023		
			Amount	
City	State	Zip Code		63.71
HENDERSON	NV	89014		ID: SE-S1403075 oursement or Obligation
Purpose of Expenditure PHONEBANK PAYROLL SERVICES		Category/ Type	03	01 / 2024
Name of Federal Candidate:		Support	Office Sought:	House District: 24
CARBAJAL, SALUD, O, ,		Oppose	President	Senate State: CA
Calendar Year-To-Date Per Election for Office Sought	77		Disbursement For:	Primary General
Full Name of Payee		☐ Memo It	T =	lic Distribution/Dissemination
LAV SERVICES LLC			M M M 12	/ DDD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1009 WHITNEY RANCH DR.			Amount	20 2020
City	State	Zip Code		63.71
HENDERSON	NV	89014	I	
Purpose of Expenditure	•	Category/ 004	M	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
PHONEBANK PAYROLL SERVICES		Type 004	03	01 2024
Name of Federal Candidate:		X Support	Office Sought:	House District: 02
BACON, DON, , ,		Oppose	President	Senate State: NE
Calendar Year-To-Date Per Election for Office Sought	7 7	4500500	Disbursement For: 2024 Other (s	✓ Primary General
		<u> </u>		
(a) SUBTOTAL of Itemized Independent Expenditures			-	127.42
(b) SUBTOTAL of Unitemized Independent Expenditure	es			
(c) TOTAL Independent Expenditures			>	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized	•	•	*
CADDIEMAN OLIVED			M = M / D = D) / Y Y Y Y
CAPPLEMAN, OLIVER, , ,		Date	12 28	2023

SCHEDULE E (FEC Form 3X)

TEMIZED INDEPENDENT EXPENDITURES				PAGE 33 OF 48
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
SUPPORT OUR FIREFIGHTERS AN	D PARAME	EDICS PAC		C C00773788
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	/ D D / Y Y Y Y
Full Name of Payee LAV SERVICES LLC		☐ Memo	Item Date	of Public Distribution/Dissemination
Mailing Address 1009 WHITNEY RANCH DR.	01 04 2024			
			Amou	unt
City	State	Zip Code		53.84
HENDERSON	NV	89014		saction ID : SE-S1405497 of Disbursement or Obligation
Purpose of Expenditure PHONEBANK PAYROLL SERVICES		Category/ Type		03 / 01 / 2024
Name of Federal Candidate:		Support	Office Soug	ht: X House District:02
BACON, DON, , ,		Oppose	Presid	dent Senate State: NE
Calendar Year-To-Date Per Election for Office Sought		255.04	Disburseme	nt For: Primary General
Tot Election for Office Godgite	7			Other (specify)
Full Name of Payee LAV SERVICES LLC		☐ Memo	_	of Public Distribution/Dissemination
Mailing Address			L	01 04 2024
1009 WHITNEY RANCH DR.			Amou	unt
City	State	Zip Code		53.84
HENDERSON	NV	89014	Tran	nsaction ID : SE-S1405499 of Disbursement or Obligation
Purpose of Expenditure PHONEBANK PAYROLL SERVICES		Category/ Type 004		03 / 01 / 2024
Name of Federal Candidate:		Support	Office Soug	ht: X House District: 24
CARBAJAL, SALUD, O, ,		Oppose	Presid	The District
Calendar Year-To-Date Per Election for Office Sought		255.04	Disburseme	nt For: X Primary General
Fer Election for Office Sought	7 7		(Other (specify)
			_	
(a) SUBTOTAL of Itemized Independent Expenditures			· •	107.68
(b) SUBTOTAL of Unitemized Independent Expenditur	es		•	7 7 7
(c) TOTAL Independent Expenditures			• •	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
CAPPLEMAN, OLIVER, , ,		_	M M /	D D / Y Y Y Y Y
Signature		_ Date	e 01	04 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 34 OF 48
				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
SUPPORT OUR FIREFIGHTERS AN	ID PARAMI	EDICS PAC		C C00773788
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed o	on M = M / D = D / Y = Y = Y
Full Name of Payee LAV SERVICES LLC		☐ Memo	Item	Date of Public Distribution/Dissemination 01 11 2024
Mailing Address 1009 WHITNEY RANCH DR.				Amount
City	State	Zip Code		67.43
HENDERSON	NV	89014	Transaction ID : SE-S1412839 Date of Disbursement or Obligation	
Purpose of Expenditure PHONEBANK PAYROLL SERVICES		Category/ Type		03 / 01 / 2024
Name of Federal Candidate:		Support	Office	Sought: X House District: 02
BACON, DON, , ,		Oppose		President Senate State: NE
Calendar Year-To-Date Per Election for Office Sought	7 1 7	574.44	Disbur 2024	sement For:
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
LAV SERVICES LLC				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1009 WHITNEY RANCH DR.				Amount
City	State	Zip Code		67.43
HENDERSON	NV	89014		Transaction ID : SE-S1412841 Date of Disbursement or Obligation
Purpose of Expenditure PHONEBANK PAYROLL SERVICES		Category/ Type 004		03 / 01 / 2024
Name of Federal Candidate:		Support	Office	Sought: X House District: 24
CARBAJAL, SALUD, O, ,		Oppose		President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought	7	574.44	Disbur 2024	sement For:
(a) SUBTOTAL of Itemized Independent Expenditures	·		. •	134.86
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•	
(c) TOTAL Independent Expenditures			• •	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized			
CAPPLEMAN, OLIVER, , ,		_ Date	e 01	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

CAPPLEMAN, OLIVER, , ,

Signature

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SCHEDULE E (FEC Form 3X) TEMIZED INDEPENDENT EXPENDITURES				5. 55 . 55 . 49		
TEMIZED INDEFENDENT EXTENDITORES				PAGE 35 OF 48 FOR LINE 24 OF FORM 3X		
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼		
SUPPORT OUR FIREFIGHTERS AN						
				C C00773788		
Check if 24-hour report 48-hour report	New rep	port Amends repo	ort filed on	/ B D / Y F Y F Y F Y		
Full Name of Payee STANDARD DATA SERVICES LLC	_	of Public Distribution/Dissemination				
INVOICE DID NOT CLEAR BANK BEFORE CLOS		03 07 7 2024				
Mailing Address 513 MILL AVE SE	Amou	unt				
SUITE 206	State	Zip Code		43.18		
		44663	Tron			
NEW PHILADELPHIA	OH	44003		Transaction ID : SE-S1587341 Date of Disbursement or Obligation		
Purpose of Expenditure CAGING AND DATABASE SERVICES		Category/ Type		M = M / D = D / Y = Y = Y		
Name of Federal Candidate:		Support	Office Soug	ht: X House District:11		
CONNOLLY, GERALD, EDWARD, ,		Oppose	Presid	\/\		
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	632.07	Disburseme	nt For:		
Full Name of Payee STANDARD DATA SERVICES LLC		🗷 Memo	_	of Public Distribution/Dissemination		
INVOICE DID NOT CLEAR BANK BEFORE CLOS Mailing Address 513 MILL AVE SE	E OF BOOKS		— L	03 07 2024		
SUITE 206			Amou	unt		
City	State	Zip Code		43.18		
NEW PHILADELPHIA	ОН	44663		saction ID : SE-S1587343 of Disbursement or Obligation		
Purpose of Expenditure		Category/		M M / D D / Y Y Y		
CAGING AND DATABASE SERVICES		Type 004				
Name of Federal Candidate:		X Support	Office Soug	ht: House District:02		
BACON, DON, , ,		Oppose	Presid	dent Senate State: NE		
Calendar Year-To-Date Per Election for Office Sought		1787.62	Disburseme	nt For: Primary General		
Per Election for Office Sought	7 7		(Other (specify)		
(a) SUBTOTAL of Itemized Independent Expenditures			•	0.00		
(b) SUBTOTAL of Unitemized Independent Expenditure	res		•			
(c) TOTAL Independent Expenditures			•	1 1 1 1 1 1 1 1		
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized					

2024

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03

Date

TEMIZED INDEPENDENT EXPENDITURES			PAGE 36 OF 48		
NAME OF COMMITTEE (I. F.II)			FOR LINE 24 OF FORM 3X		
NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼					
SUPPORT OUR FIREFIGHTERS AN	D PARAME	EDICS PAC	C C00773788		
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on		
Full Name of Payee STANDARD DATA SERVICES LLC M M M M M / D D / Y Y Y Y Y					
INVOICE DID NOT CLEAR BANK BEFORE CLOS Mailing Address 513 MILL AVE SE	03 14 2024				
SUITE 206			Amount		
City	State	Zip Code	11.33		
NEW PHILADELPHIA	ОН	44663	Transaction ID : SE-S1597133 Date of Disbursement or Obligation		
Purpose of Expenditure CAGING AND DATABASE SERVICES		Category/ Type	M M / D D / Y Y Y Y		
Name of Federal Candidate:		Support	Office Sought:		
CONNOLLY, GERALD, EDWARD, ,		Oppose	President Senate State: VA		
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	674.95	Disbursement For:		
Full Name of Payee		× Memo	Item Date of Public Distribution/Dissemination		
STANDARD DATA SERVICES LLC	03 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
INVOICE DID NOT CLEAR BANK BEFORE CLOSE OF BOOKS Mailing Address F13 MILL AVE SE					
513 MILL AVE SE			Amount		
SUITE 206	T -	T =			
City	State	Zip Code	11.33		
NEW PHILADELPHIA	OH	44663	Transaction ID : SE-S1597135 Date of Disbursement or Obligation		
Purpose of Expenditure		Category/	M M / D D / Y Y Y Y		
CAGING AND DATABASE SERVICES		Type 004			
Name of Federal Candidate:		Support	Office Sought: X House District: 02		
BACON, DON, , ,		Oppose	President Senate State: NE		
Calendar Year-To-Date		4000 20	Disbursement For: X Primary General		
Per Election for Office Sought	7 7	1890.38	2024		
(a) SUBTOTAL of Itemized Independent Expenditures			0.00		
(b) SUBTOTAL of Unitemized Independent Expenditure	res		•		
(c) TOTAL Independent Expenditures			•		
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	-	•		
CAPPLEMAN, OLIVER, , ,		Date	9 03 14 2024		
0: 1		_ Date			

Signature

CAPPLEMAN, OLIVER, , ,

SCHEDULE E (FEC ITEMIZED INDEPENDEN

CHEDULE E (FEC Form 3X) EMIZED INDEPENDENT EXPENDITURES	.				DAGE 3	7 OF 48
LIMILLO INDEI ENDENT EXI ENDITOREO	,				PAGE 37	7 OF 48 24 OF FORM 3X
AME OF COMMITTEE (In Full)				FFC I		ION NUMBER ▼
SUPPORT OUR FIREFIGHTERS AN	ND PARAM	EDICS PAC		C	C0077378	
theck if 24-hour report 48-hour report	New rep	port Amends repo	ort filed on	M = M	/ D D /	Y " Y " Y " Y
Full Name of Payee STANDARD DATA SERVICES LLC		X Memo	Item D	ate of Publ	c Distribution	n/Dissemination
INVOICE DID NOT CLEAR BANK BEFORE CLOS	SE OF BOOKS			03	21	2024
313 WILL AVE 3E			A	mount		
SUITE 206	State	Zip Code				19.38
NEW PHILADELPHIA	ОН	44663			ID : SE-S159 ursement or	7609
Purpose of Expenditure CAGING AND DATABASE SERVICES		Category/ Type		M M	/ D = D	Y Y Y Y Y
Name of Federal Candidate:		X Support	Office S	ought:	House	District:11
CONNOLLY, GERALD, EDWARD, ,		Oppose	l	esident	Senate	State: VA
Calendar Year-To-Date Per Election for Office Sought	7 1 7	796.08	Disburse 2024	ement For: Other (s	Primai	g General
Full Name of Payee		X Memo	Item D			n/Dissemination
STANDARD DATA SERVICES LLC INVOICE DID NOT CLEAR BANK BEFORE CLOS	SE OE BOOKS			03	/ 21	2024
Mailing Address 513 MILL AVE SE	JE OF BOOKS		A	mount		
SUITE 206	04-4-	7:- 01-				19.38
City NEW PHILADELPHIA	State OH	Zip Code 44663			ID : SE-S15	97611
Purpose of Expenditure		Category/		M M	ursement or	Obligation
CAGING AND DATABASE SERVICES		Type 004				
Name of Federal Candidate:		X Support	Office S	ought:	X House	District:02
BACON, DON, , ,		Oppose	Pr	esident	Senate	State: NE
Calendar Year-To-Date Per Election for Office Sought		2011.51	Disburse	ement For:	Prima	g General
, <u></u>	1 1 1 1			Other (s	pecify) ►	
(a) SUBTOTAL of Itemized Independent Expenditures	S		•			0.00
(b) SUBTOTAL of Unitemized Independent Expenditu	ıres		•			
(c) TOTAL Independent Expenditures			• [
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candid party committee) any political party committee or its	ate or authorize					

2024

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03

Date

TEMIZED INDEPENDENT EXPENDITURES				PAGE 38 OF 48
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
SUPPORT OUR FIREFIGHTERS AN		EDICS DAC		FEC IDENTIFICATION NUMBER ▼
SUFFORT OUR FIREFIGHTERS AN		EDICS PAC		C C00773788
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M M / D D / Y Y Y Y
Full Name of Payee		X Memo	Item	Date of Public Distribution/Dissemination
STANDARD DATA SERVICES LLC INVOICE FOR THIS ESTIMATE NOT ISSUED OR Mailing Address 513 MILL AVE SE	PAID BEFORE (CLOSE OF BOOKS		03 / 28 / 2024
SUITE 206				Amount
City	State	Zip Code		19.38
NEW PHILADELPHIA	ОН	44663		Transaction ID : SE-S1597737 Date of Disbursement or Obligation
Purpose of Expenditure CAGING AND DATABASE SERVICES(ESTIMATE))	Category/ Type		M M / D D / Y Y Y Y
Name of Federal Candidate:		Support	Office	e Sought: X House District: 11
CONNOLLY, GERALD, EDWARD, ,		Oppose		President Senate State: VA
Calendar Year-To-Date Per Election for Office Sought	7 1 7	796.08	Disbu 2024	orsement For:
Full Name of Payee		▼ Memo	Item	Date of Public Distribution/Dissemination
STANDARD DATA SERVICES LLC INVOICE FOR THIS ESTIMATE NOT ISSUED OR Mailing Address 513 MILL AVE SE	PAID BEFORE	CLOSE OF BOOKS		M 03 / 28 / Y 2024 Y Amount
SUITE 206				Amount
City NEW PHILADELPHIA	State OH	Zip Code 44663		Transaction ID : SE-S1597739 Date of Disbursement or Obligation
Purpose of Expenditure CAGING AND DATABASE SERVICES(ESTIMATION	E)	Category/ Type 004		M M / D D / Y Y Y Y
Name of Federal Candidate:		Support	Office	e Sought: X House District: 02
BACON, DON, , ,		Oppose		President Senate State: NE
Calendar Year-To-Date Per Election for Office Sought	7	2011.51	Disbu 2024	orsement For:
(a) SUBTOTAL of Itemized Independent Expenditures	\$. •	0.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•		·
CAPPLEMAN, OLIVER, , ,		Date	e 0	3 28 2024

Date

ITEMIZED INDEPENDENT EXPENDITURES	i			PAGE 39 OF 48 FOR LINE 24 OF FORM 3X			
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼			
SUPPORT OUR FIREFIGHTERS AN	SUDDODT OUR EIREIGHTERS AND DARAMEDICS DAC						
				C C00773788			
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M M / D D / Y Y Y Y			
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination			
STANDARD DATA SERVICES LLC				12 / 28 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address 513 MILL AVE SE							
SUITE 206				Amount			
City	State	Zip Code		46.94			
NEW PHILADELPHIA	ОН	44663		Transaction ID : SE-S1403069 Date of Disbursement or Obligation			
Purpose of Expenditure		Category/		M M / D D / Y Y Y			
CAGING AND DATABASE SERVICES		Type		03 01 2024			
Name of Federal Candidate:		X Support	Office	Sought: X House District: 02			
BACON, DON, , ,		Oppose		President Senate State: NE			
Calendar Year-To-Date		45005.00		rsement For: X Primary General			
Per Election for Office Sought	7	45825.98	2024	Other (specify) ▶			
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination			
STANDARD DATA SERVICES LLC				M M / D D / Y Y Y Y			
Mailing Address 513 MILL AVE SE				01 04 2024			
SUITE 206				Amount			
City	State	Zip Code		39.67			
NEW PHILADELPHIA	ОН	44663		Transaction ID : SE-S1405493 Date of Disbursement or Obligation			
Purpose of Expenditure		Category/ 004		03 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
CAGING AND DATABASE SERVICES		Type 004					
Name of Federal Candidate:		X Support	Office	Sought: House District: 02			
BACON, DON, , ,		Oppose		President Senate State: NE			
Calendar Year-To-Date		255.04		rsement For:			
Per Election for Office Sought	7 7	200.04	2024	Other (specify) ►			
(a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditures			ŕ	86.61			
(4)							
(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, , ,		_	M	M / D D / Y Y Y Y			
Signature		_ Date	e 12	2 28 2023			

TEMIZED INDEPENDENT EXPENDITURES				PAGE 40 OF 48
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
SUPPORT OUR FIREFIGHTERS AN		EDICS DAC	F	EC IDENTIFICATION NUMBER ▼
SUFFORT OUR FIREFIGHTERS AN	ID PARAIVII	EDICS PAC		C C00773788
Check if 24-hour report 48-hour report	New rep	ort Amends repo	rt filed on	M / D D / Y Y Y Y
Full Name of Payee STANDARD DATA SERVICES LLC		☐ Memo	tem Date of	
Mailing Address 513 MILL AVE SE				2024
SUITE 206			Amount	
City	State	Zip Code		39.67
NEW PHILADELPHIA	ОН	44663		tion ID : SE-S1405495 Disbursement or Obligation
Purpose of Expenditure CAGING AND DATABASE SERVICES		Category/ Type	03	M / D D / Y Y Y
Name of Federal Candidate:		Support	Office Sought:	House District: 24
CARBAJAL, SALUD, O, ,		Oppose	President	C^
Calendar Year-To-Date Per Election for Office Sought	7	255.04	Disbursement F	For:
Full Name of Payee STANDARD DATA SERVICES LLC		☐ Memo		Public Distribution/Dissemination
Mailing Address 513 MILL AVE SE SUITE 206			Amount	
City NEW PHILADELPHIA	State OH	Zip Code 44663	Transac	49.68 ction ID : SE-S1412835 Disbursement or Obligation
Purpose of Expenditure CAGING AND DATABASE SERVICES		Category/ Type 004	M 0:	M / D D / Y Y Y
Name of Federal Candidate: BACON, DON, , ,		Support Oppose	Office Sought:	House District: 02 Senate State: NE
Calendar Year-To-Date Per Election for Office Sought	7 1 7	574.44	Disbursement F	For:
(a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditu	res		>	89.35
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ent expenditures ate or authorized	reported herein were		
CAPPLEMAN, OLIVER, , ,		Date	M = M / D	04 2024

ILIMIZED INDEFENDENT EXPENDITORES				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
SUPPORT OUR FIREFIGHTERS AN	D PARAME	EDICS PAC		C C00773788
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	"M" / D "D / Y "Y "Y "Y
Full Name of Payee		Memo	Item Date	of Public Distribution/Dissemination
STANDARD DATA SERVICES LLC			I N	01 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 513 MILL AVE SE				
SUITE 206			Amou	nt
City	State	Zip Code		49.68
NEW PHILADELPHIA	ОН	44663		saction ID : SE-S1412837 of Disbursement or Obligation
Purpose of Expenditure CAGING AND DATABASE SERVICES		Category/ Type		03 / 01 / 2024
Name of Federal Candidate:		Support	Office Sough	nt: X House District: 24
CARBAJAL, SALUD, O, ,		Oppose	Preside	
Calendar Year-To-Date Per Election for Office Sought	7 7	574.44	Disbursemer 2024	nt For:
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
STANDARD DATA SERVICES LLC				12 28 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 513 MILL AVE SE			A == 0.11	
SUITE 206			Amou	
City NEW PHILADELPHIA	State	Zip Code 44663	Trans	46.94 saction ID : SE-S1403071
Purpose of Expenditure				of Disbursement or Obligation
CAGING AND DATABASE SERVICES		Category/ Type 004		03 / 01 / 2024
Name of Federal Candidate:		X Support	Office Sough	nt: X House District: 24
CARBAJAL, SALUD, O, ,		Oppose	Preside	ent Senate State: CA
Calendar Year-To-Date		20306.20	Disbursemer	nt For: Primary General
Per Election for Office Sought	7 7	2000.20	²⁰²⁴	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures				96.62
(b) SUBTOTAL of Unitemized Independent Expenditure	es		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized	•		•
CAPPLEMAN, OLIVER, , ,		Date	M M /	11 2024
Signature		_ Date	7	

NAME OF COMMITTEE (In Full)

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

PAGE 42 OF 48							
FOR LINE 24 OF FORM 3X							
FEC IDENTIFICATION NUMBER ▼							
C C00773788							
M M / D D / Y Y Y Y							
te of Public Distribution/Dissemination							
03 / 07 / 2024							
ount							
114.13							
insaction ID: SE-S1587349 se of Disbursement or Obligation							
M M / D D / Y Y Y Y							
ught: X House District: 11							
sident Senate State: VA							
nent For: Primary General							
Other (specify) ▶							
te of Public Distribution/Dissemination							
03 / 07 / 2024							
ount							
114.13							
ansaction ID : SE-S1587351							
te of Disbursement or Obligation							
ught: X House District: 02							
sident Senate State: NE							
nent For: X Primary General							
Other (specify) ▶							
0.00							

SUPPORT OUR FIREFIGHTERS AND PARAMEDICS PAC Check if 24-hour report 48-hour report New report Amends report filed on Dat Full Name of Payee X Memo Item WIRED4DATA INVOICE DID NOT CLEAR BANK BEFORE CLOSE OF BOOKS Mailing Address 55 LAKE HAVASU AVE SOUTH Am F-677 City State Zip Code LAKE HAVASU CITY AZ86403 Tra Dat Purpose of Expenditure Category/ PHONEBANK IT/TECH SUPPORT Type Name of Federal Candidate: Support Office Sou CONNOLLY, GERALD, EDWARD, , Oppose Pres Disbursem Calendar Year-To-Date 632.07 2024 Per Election for Office Sought Dat Full Name of Payee × Memo Item WIRED4DATA INVOICE DID NOT CLEAR BANK BEFORE CLOSE OF BOOKS Mailing Address 55 LAKE HAVASU AVE SOUTH Am F-677 City State Zip Code LAKE HAVASU CITY Tra ΑZ 86403 Dat Purpose of Expenditure Category/ 004 PHONEBANK IT/TECH SUPPORT Type Name of Federal Candidate: X Support Office Sou BACON, DON, , , Oppose Pres Disbursen Calendar Year-To-Date 1787.62 2024 Per Election for Office Sought (a) SUBTOTAL of Itemized Independent Expenditures (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, , , 07 2024 03 Date Signature FEC Schedule E (Form 3X) Rev. 05/2016

TEMIZED INDEPENDENT EXPENDITURES	;		PAGE 43 OF 48
NAME OF COMMITTEE (In Full)			FOR LINE 24 OF FORM 3X
, ,			FEC IDENTIFICATION NUMBER ▼
SUPPORT OUR FIREFIGHTERS AN	ND PARAIVII	EDICS PAC	C C00773788
Check if 24-hour report 48-hour report	New rep	ort Amends repo	rt filed on
Full Name of Payee WIRED4DATA		X Memo	Item Date of Public Distribution/Dissemination
INVOICE DID NOT CLEAR BANK BEFORE CLOS Mailing Address 55 LAKE HAVASU AVE SOUTH	SE OF BOOKS		03 14 2024 Amount
F-677			
City	State	Zip Code	29.94
LAKE HAVASU CITY	AZ	86403	Transaction ID : SE-S1597143 Date of Disbursement or Obligation
Purpose of Expenditure PHONEBANK IT/TECH SUPPORT		Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate:		X Support	Office Sought: House District: 02
BACON, DON, , ,		Oppose	President Senate State: NE
Calendar Year-To-Date Per Election for Office Sought	7 7	1890.38	Disbursement For:
Full Name of Payee		X Memo	Item Date of Public Distribution/Dissemination
WIRED4DATA			03 14 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
INVOICE DID NOT CLEAR BANK BEFORE CLOS Mailing Address 55 LAKE HAVASU AVE SOUTH	DE OF BOOKS		
F-677			Amount
City	State	Zip Code	29.94
LAKE HAVASU CITY	AZ	86403	Transaction ID : SE-S1597147 Date of Disbursement or Obligation
Purpose of Expenditure PHONEBANK IT/TECH SUPPORT		Category/ Type 004	M = M / D = D / Y = Y = Y
Name of Federal Candidate:		X Support	Office Sought: X House District: 02
BACON, DON, , ,		Oppose	President Senate State: NE
Calendar Year-To-Date Per Election for Office Sought	7 7	1890.38	Disbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	S		0.00
(b) SUBTOTAL of Unitemized Independent Expenditu	ıres		•
(c) TOTAL Independent Expenditures			•
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candid party committee) any political party committee or its	ate or authorized	•	·
CAPPLEMAN, OLIVER, , ,		Date	9 03 14 2024

ITEMIZED INDEPENDENT EXPENDITURES			PAGE 44 OF 48
NAME OF COMMITTEE (In Full)			FOR LINE 24 OF FORM 3X
SUPPORT OUR FIREFIGHTERS AN		EDICS DAC	FEC IDENTIFICATION NUMBER ▼
SOFFORT OOK TIKELIGHTERS AN	ID FARAIVIL	-DIOS FAC	C C00773788
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on M M M / D D / Y Y Y Y Y
Full Name of Payee WIRED4DATA		X Memo	
INVOICE DID NOT CLEAR BANK BEFORE CLOS Mailing Address	E OF BOOKS		03 / 21 / Y Y Y Y Y
33 LAKE HAVASO AVE SOOTH			Amount
F-677 City	State	Zip Code	47.24
LAKE HAVASU CITY	AZ	86403	Transaction ID : SE-S1597617
Purpose of Expenditure		Category/	Date of Disbursement or Obligation
PHONEBANK IT/TECH SUPPORT		Type	
Name of Federal Candidate:		X Support	Office Sought: House District: 11
CONNOLLY, GERALD, EDWARD, ,		Oppose	President Senate State: VA
Calendar Year-To-Date Per Election for Office Sought	7	796.08	Disbursement For:
Full Name of Payee		X Memo	
WIRED4DATA			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 55 LAKE HAVASU AVE SOUTH			
F-677			Amount
City	State	Zip Code	47.24
LAKE HAVASU CITY	AZ	86403	Transaction ID : SE-S1597619 Date of Disbursement or Obligation
Purpose of Expenditure PHONEBANK IT/TECH SUPPORT		Category/ Type 004	4 M M / D D / Y Y Y Y
Name of Federal Candidate:		Support	Office Sought: X House District: 02
BACON, DON, , ,		Oppose	President Senate State: NE
Calendar Year-To-Date		2011.51	Disbursement For:
Per Election for Office Sought	7 7	2011.51	2024 ☐ Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			> 0.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		
(c) TOTAL Independent Expenditures			>
Under penalty of perjury I certify that the independed with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized		
CAPPLEMAN, OLIVER, , ,			Man / Dad / Yayayay
Signature		_ Date	e 03 21 2024

SCHEDULE F (FEC Form 3X)

TEMIZED INDEPENDENT EXPENDITURES				PAGE 45 OF 48
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
SUPPORT OUR FIREFIGHTERS AN		EDICS DAC		FEC IDENTIFICATION NUMBER ▼
3011 ON 1 OUN 1 INCL IOTHERS AN				C C00773788
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M M / D D / Y Y Y Y
Full Name of Payee WIRED4DATA		X Memo	Item	Date of Public Distribution/Dissemination
INVOICE FOR THIS ESTIMATE NOT ISSUED OR Mailing Address 55 LAKE HAVASU AVE SOUTH	PAID BEFORE	CLOSE OF BOOKS		03 28 2024
F-677				Amount
City	State	Zip Code		47.24
LAKE HAVASU CITY	AZ	86403		Transaction ID : SE-S1597745 Date of Disbursement or Obligation
Purpose of Expenditure PHONEBANK IT/TECH SUPPORT(ESTIMATE)		Category/ Type		M = M / D = D / Y = Y = Y
Name of Federal Candidate:		Support	Office	e Sought: X House District: 11
CONNOLLY, GERALD, EDWARD, ,		Oppose		President Senate State: VA
Calendar Year-To-Date Per Election for Office Sought	7 1 7	796.08	Disbu 2024	ursement For:
Full Name of Payee		X Memo	Item	Date of Public Distribution/Dissemination
INVOICE FOR THIS ESTIMATE NOT ISSUED OR Mailing Address 55 LAKE HAVASU AVE SOUTH	PAID BEFORE	CLOSE OF BOOKS		M 03
F-677				Alloun
City LAKE HAVASU CITY	State AZ	Zip Code 86403		47.24 Transaction ID : SE-S1597747
Purpose of Expenditure		Ontonomi	_	Date of Disbursement or Obligation
PHONEBANK IT/TECH SUPPORT(ESTIMATE)		Category/ Type 004		W - W / D - D / Y - Y - Y - Y
Name of Federal Candidate:		X Support	Office	e Sought: X House District: 02
BACON, DON, , ,		Oppose		President Senate State: NE
Calendar Year-To-Date Per Election for Office Sought	7 7	2011.51	Disbu 2024	ursement For:
(a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures	ires		•	0.00
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candid party committee) any political party committee or its	ate or authorized	•		
CAPPLEMAN, OLIVER, , ,		_ Date	e Mo	28 2024

SCHEDULE E (FEC Form 3X)

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TE	EMIZED INDEPENDENT EXPENDITURES	3			PAGE 46 OF 48
N/	AME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
	SUPPORT OUR FIREFIGHTERS AN	ND PARAMI	FDICS PAC		FEC IDENTIFICATION NUMBER ▼
	7011 0111 00111 1111 10111 2110 7	1D 1 / 11 / 11 / 11 / 1			C C00773788
Cł	heck if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M M / D D / Y Y Y Y
_	Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
	WIRED4DATA				12 28 2023
	Mailing Address 55 LAKE HAVASU AVE SOUTH				
	F-677				Amount
	City	State	Zip Code		124.06
	LAKE HAVASU CITY	AZ	86403		Transaction ID : SE-S1403079 Date of Disbursement or Obligation
	Purpose of Expenditure PHONEBANK IT/TECH SUPPORT		Category/ Type		03 01 / 2024
	Name of Federal Candidate:		Support	Office	e Sought: X House District: 24
	CARBAJAL, SALUD, O, ,		Oppose		President Senate State: CA
	Calendar Year-To-Date Per Election for Office Sought	7 1 7	20306.20	Disbui 2024	Other (specify) ►
	Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
	WIRED4DATA		momo	ltoni	12 28 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 55 LAKE HAVASU AVE SOUTH				12 20 2025
	55 LAKE HAVASU AVE SOUTH				Amount
	City	State	Zip Code	$\overline{}$	124.06
	LAKE HAVASU CITY	AZ	86403		Transaction ID : SE-S1403077 Date of Disbursement or Obligation
	Purpose of Expenditure		Category/ 004		03 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	PHONEBANK IT/TECH SUPPORT		Type 004		
	Name of Federal Candidate:		X Support	Office	Sought: House District: 02
	BACON, DON, , ,		Oppose		President Senate State: NE
	Calendar Year-To-Date Per Election for Office Sought	7 7	45825.98	Disbur 2024	orsement For:
_					
	(a) SUBTOTAL of Itemized Independent Expenditure	+S		•	248.12
	(b) SUBTOTAL of Unitemized Independent Expenditu	ures		. •	
	(c) TOTAL Independent Expenditures			. •	
	Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candid party committee) any political party committee or its	date or authorized			
	CAPPLEMAN, OLIVER, , ,		Date	M =	2 28 2023

SCHEDULE E (FEC Form 3X)

TEMIZED INDEPENDENT EXPENDITURES				PAGE 47 OF 48 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
SUPPORT OUR FIREFIGHTERS AN	D PARAME	EDICS PAC		C C00773788
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	M = M / D = D / Y = Y = Y
Full Name of Payee WIRED4DATA		☐ Memo	Item Da	te of Public Distribution/Dissemination
Mailing Address 55 LAKE HAVASU AVE SOUTH				
F-677			AIII	ount
City	State	Zip Code		104.85
LAKE HAVASU CITY	AZ	86403		ansaction ID : SE-S1405501 te of Disbursement or Obligation
Purpose of Expenditure PHONEBANK IT/TECH SUPPORT		Category/ Type		03 / 01 / 2024
Name of Federal Candidate:		Support	Office So	ught: House District:02
BACON, DON, , ,		Oppose		sident Senate State: NE
Calendar Year-To-Date Per Election for Office Sought	T 1 1 T	255.04	Disbursen 2024	nent For:
Full Name of Payee WIRED4DATA		☐ Memo	Item Da	te of Public Distribution/Dissemination
Mailing Address 55 LAKE HAVASU AVE SOUTH F-677			Am	ount 04 2024
City	State	Zip Code	— Г	104.85
LAKE HAVASU CITY	AZ	86403		ansaction ID : SE-S1405503 te of Disbursement or Obligation
Purpose of Expenditure PHONEBANK IT/TECH SUPPORT		Category/ Type 004		03 / 01 / 2024
Name of Federal Candidate: CARBAJAL, SALUD, O, ,		Support Oppose	Office So	ught: House District: 24 Senate State: CA
Calendar Year-To-Date Per Election for Office Sought		255.04	Disbursen 2024	nent For: X Primary General
(a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditure (c) TOTAL Independent Expenditures	res		• [Other (specify) 209.70
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			(if the reporting entity is not a political
CAPPLEMAN, OLIVER, , ,		Date	01	04 2024

SCHEDULE E (FEC Form 3X)

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TEMIZED INDEPENDENT EXPENDITURES				PAGE 48 OF 48
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
, ,		-DIOC DAO		FEC IDENTIFICATION NUMBER ▼
SUPPORT OUR FIREFIGHTERS AN	D PARAME	EDICS PAC		C C00773788
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee WIRED4DATA		☐ Memo	Item Dat	e of Public Distribution/Dissemination
Mailing Address				01 11 2024
55 LAKE HAVASU AVE SOUTH			Am	ount
City	State	Zip Code		131.31
LAKE HAVASU CITY	AZ	86403		insaction ID : SE-S1412091 e of Disbursement or Obligation
Purpose of Expenditure PHONEBANK IT/TECH SUPPORT		Category/ Type		03 01 7 2024
Name of Federal Candidate:		Support	Office Sou	ught: House District: 02
BACON, DON, , ,		Oppose		sident Senate State: NE
Calendar Year-To-Date Per Election for Office Sought	7 7	574.44	Disbursem 2024	nent For:
Full Name of Payee		☐ Memo	Item Dat	e of Public Distribution/Dissemination
WIRED4DATA				01 11 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 55 LAKE HAVASU AVE SOUTH			^	ount
F-677			Am	ount
City	State	Zip Code		131.31
LAKE HAVASU CITY	AZ	86403	I	ansaction ID : SE-S1412093 e of Disbursement or Obligation
Purpose of Expenditure PHONEBANK IT/TECH SUPPORT		Category/ Type 004		03
Name of Federal Candidate:		Support	Office Sou	ught: X House District: 24
CARBAJAL, SALUD, O, ,		Oppose	Pres	sident Senate State: CA
Calendar Year-To-Date Per Election for Office Sought	7	574.44	Disbursem 2024	nent For: ☐ Primary ☐ General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			•	262.62
(b) SUBTOTAL of Unitemized Independent Expenditure	'es		•	
(c) TOTAL Independent Expenditures			•	1752.42
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
CAPPLEMAN, OLIVER, , ,		Date	M = M	/ DDD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y