

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5

New Day for America

ADDRESS (number and street) 4679 Winterset Drive

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

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C C00581868

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

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

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

- (b) Monthly Report Due On: Feb 20 (M2), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11), Dec 20 (M12), Jan 31 (YE)

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

Election on MM/DD/YYYY in the State of

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

Election on MM/DD/YYYY in the State of

5. Covering Period 01/01/2019 through 06/30/2019

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

Type or Print Name of Treasurer

Signature of Treasurer Yuskewich, J., Matthew, , [Electronically Filed] Date 07/31/2019

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

Table with 10 columns for Office Use Only

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**New Day for America**

Report Covering the Period: From:    To:

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2019"/>		478691.14
(b) Cash on Hand at Beginning of Reporting Period.....	478691.14	
(c) Total Receipts (from Line 19) .....	164307.60	164307.60
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	642998.74	642998.74
7. Total Disbursements (from Line 31).....	229157.78	229157.78
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	413840.96	413840.96
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

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

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

DETAILED SUMMARY PAGE  
of Receipts

Write or Type Committee Name

New Day for America

Report Covering the Period: From: 01 / 01 / 2019 To: 06 / 30 / 2019

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	100000.00	100000.00
(ii) Unitemized .....	25.00	25.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	100025.00	100025.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	63593.85	63593.85
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	163618.85	163618.85
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	688.75	688.75
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	164307.60	164307.60
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	164307.60	164307.60

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	229157.78	229157.78
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	229157.78	229157.78
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	229157.78	229157.78
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	229157.78	229157.78

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	163618.85	163618.85
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	163618.85	163618.85
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	229157.78	229157.78
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	229157.78	229157.78

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 6 OF 54
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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

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

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Wexner, Abigail, S., ,

Mailing Address 8000 Walton Parkway  
Ste 100

City New Albany State OH Zip Code 43054

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

Name of Employer (for Individual) Self Employed Occupation (for Individual) Philanthropist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100000.00

Date of Receipt  
MM / DD / YYYY  
03 / 20 / 2019

**Transaction ID : SA11AI.9037**

Amount of Each Receipt this Period  
100000.00

Memo Item

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

Mailing Address

City State Zip Code

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	100000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	100000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 54
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. KASICH FOR OHIO**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 211 S FIFTH STREET

City COLUMBUS	State OH	Zip Code 43215
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
04		23		2019

**Transaction ID : SA11C.9038**

Amount of Each Receipt this Period  
5000.00

Memo Item  
NON FEDERAL CONTRIBUTION-NON CORPORATE FUNDS

**B. NEW DAY INDEPENDENT MEDIA COMMITTEE INC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 4679 WINTERSET DRIVE

City COLUMBUS	State OH	Zip Code 43220
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FEC ID number of contributing federal political committee. **C** C00582973

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
58593.85

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01		29		2019

**Transaction ID : SA11C.9040**

Amount of Each Receipt this Period  
58593.85

Memo Item

**C.**

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

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	63593.85
<b>TOTAL</b> This Period (last page this line number only).....	63593.85

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

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

FOR LINE NUMBER: PAGE 8 OF 54  
(check only one)

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

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

**A. EDonation 5 Account**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 117 North Saint Asaph Street

City Alexandria	State VA	Zip Code 22314
--------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
688.75

Date of Receipt  

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

**Transaction ID : SA17.9043**

Amount of Each Receipt this Period  
688.75

Memo Item

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

Mailing Address

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

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

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	688.75
<b>TOTAL</b> This Period (last page this line number only).....▶	688.75



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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. American Express</b>		Date of Disbursement MM / DD / YYYY 02 / 26 / 2019
Mailing Address PO Box 299051		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9071</b> Amount of Each Disbursement this Period [ ] 25980.11
City Ft. Lauderdale	State FL	Zip Code 33329
Purpose of Disbursement CREDIT CARD PAYMENT		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. American Airlines</b>		Date of Disbursement MM / DD / YYYY 02 / 26 / 2019
Mailing Address 4330 Amon Carter Blvd		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9071.1</b> Amount of Each Disbursement this Period [ ] 204.06
City Fort Worth	State TX	Zip Code 76155
Purpose of Disbursement PLANE TICKET		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. American Airlines</b>		Date of Disbursement MM / DD / YYYY 02 / 26 / 2019
Mailing Address 4330 Amon Carter Blvd		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9071.</b> Amount of Each Disbursement this Period [ ] 204.06
City Fort Worth	State TX	Zip Code 76155
Purpose of Disbursement PLANE TICKET		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 25980.11
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. ROSEWOOD SANDHILL HOTEL</b>		Date of Disbursement MM / DD / YYYY 02 / 26 / 2019
Mailing Address 2825 SANDHILL ROAD		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9071.:</b> Amount of Each Disbursement this Period [ ] 1009.56
City MENLO PARK	State CA	Zip Code 94025
Purpose of Disbursement LODGING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. ROSEWOOD SANDHILL HOTEL</b>		Date of Disbursement MM / DD / YYYY 02 / 26 / 2019
Mailing Address 2825 SANDHILL ROAD		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9071.4</b> Amount of Each Disbursement this Period [ ] 968.21
City MENLO PARK	State CA	Zip Code 94025
Purpose of Disbursement LODGING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. ROSEWOOD SANDHILL HOTEL</b>		Date of Disbursement MM / DD / YYYY 02 / 26 / 2019
Mailing Address 2825 SANDHILL ROAD		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9071.</b> Amount of Each Disbursement this Period [ ] 953.16
City MENLO PARK	State CA	Zip Code 94025
Purpose of Disbursement LODGING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

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

[ ] 0.00

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

[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. ROSEWOOD SANDHILL HOTEL</b>		Date of Disbursement MM / DD / YYYY 02 / 26 / 2019
Mailing Address 2825 SANDHILL ROAD		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9071.f</b> Amount of Each Disbursement this Period [ ] 38.00
City MENLO PARK	State CA	Zip Code 94025
Purpose of Disbursement LODGING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Kimpton Hotel Palomar</b>		Date of Disbursement MM / DD / YYYY 02 / 26 / 2019
Mailing Address 10740 Wilshire Blvd		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9071.f</b> Amount of Each Disbursement this Period [ ] 460.52
City Los Angeles	State CA	Zip Code 90024
Purpose of Disbursement LODGING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. American Airlines</b>		Date of Disbursement MM / DD / YYYY 02 / 26 / 2019
Mailing Address 4330 Amon Carter Blvd		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9071.f</b> Amount of Each Disbursement this Period [ ] 55.61
City Fort Worth	State TX	Zip Code 76155
Purpose of Disbursement TRAVEL FEE		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. American Airlines</b>			Date of Disbursement MM / DD / YYYY 02 / 26 / 2019	
Mailing Address 4330 Amon Carter Blvd				
City Fort Worth	State TX	Zip Code 76155	FEC Identification Number C	
Purpose of Disbursement PLANE TICKET			Transaction ID : <b>SB21B.9071.</b>	
Candidate Name			Amount of Each Disbursement this Period 155.09	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:	<input checked="" type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) <b>B. American Airlines</b>			Date of Disbursement MM / DD / YYYY 02 / 26 / 2019	
Mailing Address 4330 Amon Carter Blvd				
City Fort Worth	State TX	Zip Code 76155	FEC Identification Number C	
Purpose of Disbursement TRAVEL FEE			Transaction ID : <b>SB21B.9071.1</b>	
Candidate Name			Amount of Each Disbursement this Period 77.05	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:	<input checked="" type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) <b>C. Hilton Garden Inn</b>			Date of Disbursement MM / DD / YYYY 02 / 26 / 2019	
Mailing Address 101 South Commercial Street				
City Manchester	State NH	Zip Code 03101	FEC Identification Number C	
Purpose of Disbursement LODGING			Transaction ID : <b>SB21B.9071.</b>	
Candidate Name			Amount of Each Disbursement this Period 385.06	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:	<input checked="" type="checkbox"/> Memo Item			

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Kimpton Hotel Palomar</b>		Date of Disbursement MM / DD / YYYY 02 / 26 / 2019	
Mailing Address 10740 Wilshire Blvd		FEC Identification Number C [REDACTED]	
City Los Angeles	State CA	Zip Code 90024	Transaction ID : <b>SB21B.9071.</b>
Purpose of Disbursement LODGING		Category/Type	Amount of Each Disbursement this Period 807.59
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Kimpton Hotel Palomar</b>		Date of Disbursement MM / DD / YYYY 02 / 26 / 2019	
Mailing Address 10740 Wilshire Blvd		FEC Identification Number C [REDACTED]	
City Los Angeles	State CA	Zip Code 90024	Transaction ID : <b>SB21B.9071.1</b>
Purpose of Disbursement LODGING		Category/Type	Amount of Each Disbursement this Period 830.10
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. American Airlines</b>		Date of Disbursement MM / DD / YYYY 02 / 26 / 2019	
Mailing Address 4330 Amon Carter Blvd		FEC Identification Number C [REDACTED]	
City Fort Worth	State TX	Zip Code 76155	Transaction ID : <b>SB21B.9071.</b>
Purpose of Disbursement PLANE TICKET		Category/Type	Amount of Each Disbursement this Period 433.01
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

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

0.00

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

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. American Airlines</b>		Date of Disbursement MM / DD / YYYY 02 / 26 / 2019
Mailing Address 4330 Amon Carter Blvd		FEC Identification Number C <b>Transaction ID : SB21B.9071.</b> Amount of Each Disbursement this Period 121.95
City Fort Worth	State TX	
Zip Code 76155	Purpose of Disbursement TRAVEL FEE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. American Airlines</b>		Date of Disbursement MM / DD / YYYY 02 / 26 / 2019
Mailing Address 4330 Amon Carter Blvd		FEC Identification Number C <b>Transaction ID : SB21B.9071.1</b> Amount of Each Disbursement this Period 121.95
City Fort Worth	State TX	
Zip Code 76155	Purpose of Disbursement TRAVEL FEE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. American Airlines</b>		Date of Disbursement MM / DD / YYYY 02 / 26 / 2019
Mailing Address 4330 Amon Carter Blvd		FEC Identification Number C <b>Transaction ID : SB21B.9071.</b> Amount of Each Disbursement this Period 433.01
City Fort Worth	State TX	
Zip Code 76155	Purpose of Disbursement PLACE TICKET	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input checked="" type="checkbox"/> Memo Item

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. United Airlines</b>		Date of Disbursement MM / DD / YYYY 02 / 26 / 2019	
Mailing Address 2 N. LaSalle Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9071.2</b> Amount of Each Disbursement this Period [ ] 280.30	
City Chicago	State IL	Zip Code 60602	Category/ Type [ ]
Purpose of Disbursement PLANE TICKET		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input checked="" type="checkbox"/>
State: [ ] District: [ ]			

Full Name (Last, First, Middle Initial) <b>B. United Airlines</b>		Date of Disbursement MM / DD / YYYY 02 / 26 / 2019	
Mailing Address 2 N. LaSalle Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9071.2</b> Amount of Each Disbursement this Period [ ] 280.30	
City Chicago	State IL	Zip Code 60602	Category/ Type [ ]
Purpose of Disbursement PLANE TICKET		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input checked="" type="checkbox"/>
State: [ ] District: [ ]			

Full Name (Last, First, Middle Initial) <b>C. Kimpton Hotel Palomar</b>		Date of Disbursement MM / DD / YYYY 02 / 26 / 2019	
Mailing Address 10740 Wilshire Blvd		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9071.2</b> Amount of Each Disbursement this Period [ ] 46.30	
City Los Angeles	State CA	Zip Code 90024	Category/ Type [ ]
Purpose of Disbursement FOOD AND BEVERAGES		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input checked="" type="checkbox"/>
State: [ ] District: [ ]			

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. American Airlines</b>		Date of Disbursement MM / DD / YYYY 02 / 26 / 2019
Mailing Address 4330 Amon Carter Blvd		FEC Identification Number C <b>Transaction ID : SB21B.9071.2</b> Amount of Each Disbursement this Period 180.30
City Fort Worth	State TX	
Zip Code 76155	Purpose of Disbursement PLANE TICKET	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. American Airlines</b>		Date of Disbursement MM / DD / YYYY 02 / 26 / 2019
Mailing Address 4330 Amon Carter Blvd		FEC Identification Number C <b>Transaction ID : SB21B.9071.2</b> Amount of Each Disbursement this Period 148.30
City Fort Worth	State TX	
Zip Code 76155	Purpose of Disbursement PLANE TICKET	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. American Airlines</b>		Date of Disbursement MM / DD / YYYY 02 / 26 / 2019
Mailing Address 4330 Amon Carter Blvd		FEC Identification Number C <b>Transaction ID : SB21B.9071.2</b> Amount of Each Disbursement this Period 36.87
City Fort Worth	State TX	
Zip Code 76155	Purpose of Disbursement TRAVEL FEE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input checked="" type="checkbox"/> Memo Item

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. American Airlines</b>		Date of Disbursement MM / DD / YYYY 02 / 26 / 2019
Mailing Address 4330 Amon Carter Blvd		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9071.2</b> Amount of Each Disbursement this Period [ ] 39.32
City Fort Worth	State TX	Zip Code 76155
Purpose of Disbursement TRAVEL FEE		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Delta Airlines</b>		Date of Disbursement MM / DD / YYYY 02 / 26 / 2019
Mailing Address 4600 International Gateway		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9071.2</b> Amount of Each Disbursement this Period [ ] 258.30
City Columbus	State OH	Zip Code 43219
Purpose of Disbursement PLANE TICKET		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. American Airlines</b>		Date of Disbursement MM / DD / YYYY 02 / 26 / 2019
Mailing Address 4330 Amon Carter Blvd		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9071.2</b> Amount of Each Disbursement this Period [ ] 52.12
City Fort Worth	State TX	Zip Code 76155
Purpose of Disbursement TRAVEL FEE		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)  
**A. American Airlines**

Date of Disbursement  
MM / DD / YYYY  
02 / 26 / 2019

Mailing Address 4330 Amon Carter Blvd

City Fort Worth State TX Zip Code 76155

Purpose of Disbursement PLANE TICKET

Candidate Name

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

State: District:

FEC Identification Number  
C  
Transaction ID : SB21B.9071.3  
Amount of Each Disbursement this Period  
281.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. INTERCONTINENTAL BOSTON**

Date of Disbursement  
MM / DD / YYYY  
02 / 26 / 2019

Mailing Address 510 ATLANTIC AVENUE

City BOSTON State MA Zip Code 02210

Purpose of Disbursement LODGING

Candidate Name

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

State: District:

FEC Identification Number  
C  
Transaction ID : SB21B.9071.3  
Amount of Each Disbursement this Period  
410.87

Memo Item

Full Name (Last, First, Middle Initial)  
**C. INTERCONTINENTAL BOSTON**

Date of Disbursement  
MM / DD / YYYY  
02 / 26 / 2019

Mailing Address 510 ATLANTIC AVENUE

City BOSTON State MA Zip Code 02210

Purpose of Disbursement LODGING

Candidate Name

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

State: District:

FEC Identification Number  
C  
Transaction ID : SB21B.9071.3  
Amount of Each Disbursement this Period  
668.55

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)  
**A. Delta Airlines**

Date of Disbursement: MM / DD / YYYY  
02 / 26 / 2019

Mailing Address 4600 International Gateway

City Columbus State OH Zip Code 43219

Purpose of Disbursement PLANE TICKET

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

FEC Identification Number: C

Transaction ID : SB21B.9071.3

Amount of Each Disbursement this Period: 418.30

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Kimpton Hotel Palomar**

Date of Disbursement: MM / DD / YYYY  
02 / 26 / 2019

Mailing Address 10740 Wilshire Blvd

City Los Angeles State CA Zip Code 90024

Purpose of Disbursement LODGING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

FEC Identification Number: C

Transaction ID : SB21B.9071.3

Amount of Each Disbursement this Period: 418.30

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Kimpton Hotel Palomar**

Date of Disbursement: MM / DD / YYYY  
02 / 26 / 2019

Mailing Address 10740 Wilshire Blvd

City Los Angeles State CA Zip Code 90024

Purpose of Disbursement LODGING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

FEC Identification Number: C

Transaction ID : SB21B.9071.3

Amount of Each Disbursement this Period: 1135.45

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Kimpton Hotel Palomar</b>		Date of Disbursement MM / DD / YYYY 02 / 26 / 2019	
Mailing Address 10740 Wilshire Blvd		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9071.4</b> Amount of Each Disbursement this Period [ ] 387.59	
City Los Angeles	State CA	Zip Code 90024	Category/ Type [ ]
Purpose of Disbursement LODGING		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input checked="" type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Beverly Hill Hotel</b>		Date of Disbursement MM / DD / YYYY 02 / 26 / 2019	
Mailing Address 9641 Sunset Blvd		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9071.4</b> Amount of Each Disbursement this Period [ ] 556.62	
City Beverly Hills	State CA	Zip Code 90210	Category/ Type [ ]
Purpose of Disbursement FOOD AND BEVERAGES		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input checked="" type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Delta Airlines</b>		Date of Disbursement MM / DD / YYYY 02 / 26 / 2019	
Mailing Address 4600 International Gateway		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9071.4</b> Amount of Each Disbursement this Period [ ] 418.30	
City Columbus	State OH	Zip Code 43219	Category/ Type [ ]
Purpose of Disbursement PLANE TICKET		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input checked="" type="checkbox"/>
State: District:			

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Delta Airlines**

Full Name (Last, First, Middle Initial)

Mailing Address 4600 International Gateway

City Columbus State OH Zip Code 43219

Purpose of Disbursement PLANE TICKET

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 26 / 2019

FEC Identification Number: C

Transaction ID : SB21B.9071.4

Amount of Each Disbursement this Period: 553.60

Memo Item

**B. American Express**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 299051

City Ft. Lauderdale State FL Zip Code 33329

Purpose of Disbursement CREDIT CARD PAYMENT

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 03 / 2019

FEC Identification Number: C

Transaction ID : SB21B.9092

Amount of Each Disbursement this Period: 6572.61

Memo Item

**C. United Airlines**

Full Name (Last, First, Middle Initial)

Mailing Address 2 N. LaSalle Street

City Chicago State IL Zip Code 60602

Purpose of Disbursement LODGING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 03 / 2019

FEC Identification Number: C

Transaction ID : SB21B.9092.

Amount of Each Disbursement this Period: 478.90

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 6572.61

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. Delta Airlines**

Mailing Address 4600 International Gateway

City Columbus State OH Zip Code 43219

Purpose of Disbursement  
PLANE TICKET

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 03 / 2019

FEC Identification Number

C  
Transaction ID : SB21B.9092.  
Amount of Each Disbursement this Period  
714.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Kimpton Hotel Palomar**

Mailing Address 10740 Wilshire Blvd

City Los Angeles State CA Zip Code 90024

Purpose of Disbursement  
LODGING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 03 / 2019

FEC Identification Number

C  
Transaction ID : SB21B.9092.2  
Amount of Each Disbursement this Period  
332.21

Memo Item

Full Name (Last, First, Middle Initial)

**C. American Airlines**

Mailing Address 4330 Amon Carter Blvd

City Fort Worth State TX Zip Code 76155

Purpose of Disbursement  
PLANE TICKET

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 03 / 2019

FEC Identification Number

C  
Transaction ID : SB21B.9092.  
Amount of Each Disbursement this Period  
538.00

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. American Airlines**

Mailing Address 4330 Amon Carter Blvd

City Fort Worth State TX Zip Code 76155

Purpose of Disbursement  
PLANE TICKET

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 03 / 2019

FEC Identification Number

C  
**Transaction ID : SB21B.9092.4**  
Amount of Each Disbursement this Period  
538.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Hilton**

Mailing Address Advance Purchase

City Memphis State TN Zip Code 38117

Purpose of Disbursement  
LODGING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 03 / 2019

FEC Identification Number

C  
**Transaction ID : SB21B.9092.7**  
Amount of Each Disbursement this Period  
430.77

Memo Item

Full Name (Last, First, Middle Initial)

**C. Delta Airlines**

Mailing Address 4600 International Gateway

City Columbus State OH Zip Code 43219

Purpose of Disbursement  
PLANE TICKET

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 03 / 2019

FEC Identification Number

C  
**Transaction ID : SB21B.9092.**  
Amount of Each Disbursement this Period  
283.30

Memo Item

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

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

0.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. MARRIOTT AUSTIN**

Full Name (Last, First, Middle Initial)

Mailing Address 110 E 2ND STREET

City AUSTIN State TX Zip Code 78701

Purpose of Disbursement LODGING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 03 / 2019

FEC Identification Number: C

Transaction ID : SB21B.9092.1

Amount of Each Disbursement this Period: 704.03

Memo Item

**B. MARRIOTT AUSTIN**

Full Name (Last, First, Middle Initial)

Mailing Address 110 E 2ND STREET

City AUSTIN State TX Zip Code 78701

Purpose of Disbursement LODGING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 03 / 2019

FEC Identification Number: C

Transaction ID : SB21B.9092.1

Amount of Each Disbursement this Period: 692.47

Memo Item

**C. United Airlines**

Full Name (Last, First, Middle Initial)

Mailing Address 2 N. LaSalle Street

City Chicago State IL Zip Code 60602

Purpose of Disbursement TRAVEL FEE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 03 / 2019

FEC Identification Number: C

Transaction ID : SB21B.9092.1

Amount of Each Disbursement this Period: 56.00

Memo Item

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

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

0.00



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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. United Airlines</b>		Date of Disbursement MM / DD / YYYY 04 / 03 / 2019
Mailing Address 2 N. LaSalle Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9092.</b> Amount of Each Disbursement this Period [ ] 240.00
City Chicago	State IL	Zip Code 60602
Purpose of Disbursement PLANE TICKET	Category/ Type [ ]	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. American Airlines</b>		Date of Disbursement MM / DD / YYYY 04 / 03 / 2019
Mailing Address 4330 Amon Carter Blvd		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9092.1</b> Amount of Each Disbursement this Period [ ] 82.19
City Fort Worth	State TX	Zip Code 76155
Purpose of Disbursement TRAVEL FEE	Category/ Type [ ]	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. American Airlines</b>		Date of Disbursement MM / DD / YYYY 04 / 03 / 2019
Mailing Address 4330 Amon Carter Blvd		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9092.</b> Amount of Each Disbursement this Period [ ] 238.50
City Fort Worth	State TX	Zip Code 76155
Purpose of Disbursement PLANE TICKET	Category/ Type [ ]	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
		<input checked="" type="checkbox"/> Memo Item

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Delta Airlines</b>		Date of Disbursement MM / DD / YYYY 04 / 03 / 2019
Mailing Address 4600 International Gateway		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9092.</b> Amount of Each Disbursement this Period [ ] 608.30
City Columbus	State OH	Zip Code 43219
Purpose of Disbursement PLANE TICKET		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. American Express</b>		Date of Disbursement MM / DD / YYYY 04 / 24 / 2019
Mailing Address PO Box 299051		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9097</b> Amount of Each Disbursement this Period [ ] 3298.57
City Ft. Lauderdale	State FL	Zip Code 33329
Purpose of Disbursement CREDIT CARD PAYMENT		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. SHERATON RALEIGH</b>		Date of Disbursement MM / DD / YYYY 04 / 24 / 2019
Mailing Address 421 S SALISBURY STREET		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9097.</b> Amount of Each Disbursement this Period [ ] 256.33
City RALEIGH	State NC	Zip Code 27601
Purpose of Disbursement LODGING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 3298.57
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. American Airlines</b>		Date of Disbursement MM / DD / YYYY 04 / 24 / 2019
Mailing Address 4330 Amon Carter Blvd		FEC Identification Number C <b>Transaction ID : SB21B.9097.!</b> Amount of Each Disbursement this Period 238.80
City Fort Worth	State TX	
Zip Code 76155	Purpose of Disbursement PLANE TICKET	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. Southwest Air</b>		Date of Disbursement MM / DD / YYYY 04 / 24 / 2019
Mailing Address PO Box 36647-1CR		FEC Identification Number C <b>Transaction ID : SB21B.9097.6</b> Amount of Each Disbursement this Period 277.98
City Dallas	State TX	
Zip Code 75235	Purpose of Disbursement PLANE TICKET	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. American Airlines</b>		Date of Disbursement MM / DD / YYYY 04 / 24 / 2019
Mailing Address 4330 Amon Carter Blvd		FEC Identification Number C <b>Transaction ID : SB21B.9097.</b> Amount of Each Disbursement this Period 360.30
City Fort Worth	State TX	
Zip Code 76155	Purpose of Disbursement PLANE TICKET	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. iContact**

Mailing Address 2450 Perimeter Park Dr.

City Morrisville State NC Zip Code 27560

Purpose of Disbursement  
EMAIL ADVERTISING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 28 / 2019

FEC Identification Number

C  
Transaction ID : SB21B.9116.  
Amount of Each Disbursement this Period  
84.93

Memo Item

Full Name (Last, First, Middle Initial)

**B. American Airlines**

Mailing Address 4330 Amon Carter Blvd

City Fort Worth State TX Zip Code 76155

Purpose of Disbursement  
PLANE TICKET

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 28 / 2019

FEC Identification Number

C  
Transaction ID : SB21B.9116.2  
Amount of Each Disbursement this Period  
266.30

Memo Item

Full Name (Last, First, Middle Initial)

**C. American Airlines**

Mailing Address 4330 Amon Carter Blvd

City Fort Worth State TX Zip Code 76155

Purpose of Disbursement  
TRAVEL FEE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 28 / 2019

FEC Identification Number

C  
Transaction ID : SB21B.9116.  
Amount of Each Disbursement this Period  
45.32

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Southwest Air**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 36647-1CR

City Dallas State TX Zip Code 75235

Purpose of Disbursement PLANE TICKET

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 28 / 2019

FEC Identification Number: C

Transaction ID : SB21B.9116.4

Amount of Each Disbursement this Period: 282.97

Memo Item

**B. Southwest Air**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 36647-1CR

City Dallas State TX Zip Code 75235

Purpose of Disbursement TRAVEL FEE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 28 / 2019

FEC Identification Number: C

Transaction ID : SB21B.9116.5

Amount of Each Disbursement this Period: 19.01

Memo Item

**C. THE MADISON HILTON**

Full Name (Last, First, Middle Initial)

Mailing Address 1177 15TH STREET NW

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement LODGING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 28 / 2019

FEC Identification Number: C

Transaction ID : SB21B.9116.

Amount of Each Disbursement this Period: 358.13

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)  
**A. Southwest Air**

Date of Disbursement  
MM / DD / YYYY  
05 / 28 / 2019

Mailing Address PO Box 36647-1CR

City Dallas State TX Zip Code 75235

Purpose of Disbursement  
LODGING

Candidate Name

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

State: District:

FEC Identification Number  
C  
Transaction ID : SB21B.9116.8  
Amount of Each Disbursement this Period  
215.96

Memo Item

Full Name (Last, First, Middle Initial)  
**B. GIOVANNI'S TRATTU**

Date of Disbursement  
MM / DD / YYYY  
05 / 28 / 2019

Mailing Address 1823 JEFFERSON PL NW

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement  
FOOD AND BEVERAGES

Candidate Name

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

State: District:

FEC Identification Number  
C  
Transaction ID : SB21B.9116.8  
Amount of Each Disbursement this Period  
269.46

Memo Item

Full Name (Last, First, Middle Initial)  
**C. American Express**

Date of Disbursement  
MM / DD / YYYY  
06 / 26 / 2019

Mailing Address PO Box 299051

City Ft. Lauderdale State FL Zip Code 33329

Purpose of Disbursement  
CREDIT CARD PAYMENT

Candidate Name

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

State: District:

FEC Identification Number  
C  
Transaction ID : SB21B.9127  
Amount of Each Disbursement this Period  
229.64

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 229.64

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Google</b>		Date of Disbursement MM / DD / YYYY 06 / 26 / 2019
Mailing Address 1600 Amphitheater Parkway		FEC Identification Number C <b>Transaction ID : SB21B.9127.1</b> Amount of Each Disbursement this Period 32.26 <input checked="" type="checkbox"/> Memo Item
City Mountain View	State CA	
Zip Code 94043	Category/ Type	
Purpose of Disbursement EMAIL ADVERTISING	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. iContact</b>		Date of Disbursement MM / DD / YYYY 06 / 26 / 2019
Mailing Address 2450 Perimeter Park Dr.		FEC Identification Number C <b>Transaction ID : SB21B.9127.1</b> Amount of Each Disbursement this Period 84.93 <input checked="" type="checkbox"/> Memo Item
City Morrisville	State NC	
Zip Code 27560	Category/ Type	
Purpose of Disbursement EMAIL ADVERTISING	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Southwest Air</b>		Date of Disbursement MM / DD / YYYY 06 / 26 / 2019
Mailing Address PO Box 36647-1CR		FEC Identification Number C <b>Transaction ID : SB21B.9127.1</b> Amount of Each Disbursement this Period 64.01 <input checked="" type="checkbox"/> Memo Item
City Dallas	State TX	
Zip Code 75235	Category/ Type	
Purpose of Disbursement PLANE TICKET	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Baker Hostetler LLP</b>		Date of Disbursement MM / DD / YYYY 04 / 03 / 2019
Mailing Address PO Box 70189		FEC Identification Number C <b>Transaction ID : SB21B.9091</b> Amount of Each Disbursement this Period 961.90
City Cleveland	State OH	
Zip Code 44190	Purpose of Disbursement LEGAL CONSULTING	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Baker Hostetler LLP</b>		Date of Disbursement MM / DD / YYYY 05 / 24 / 2019
Mailing Address PO Box 70189		FEC Identification Number C <b>Transaction ID : SB21B.9115</b> Amount of Each Disbursement this Period 122.31
City Cleveland	State OH	
Zip Code 44190	Purpose of Disbursement LEGAL CONSULTING	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. GARCEA, JORDAN, , Mr.,</b>		Date of Disbursement MM / DD / YYYY 01 / 03 / 2019
Mailing Address 41 S HIGH STREET		FEC Identification Number C <b>Transaction ID : SB21B.9046</b> Amount of Each Disbursement this Period 2100.00
City COLUMBUS	State OH	
Zip Code 43215	Purpose of Disbursement CONSULTING	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3184.21
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. GARCEA, JORDAN, , Mr.,</b>		Date of Disbursement MM / DD / YYYY 02 / 06 / 2019	
Mailing Address 41 S HIGH STREET		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.9064</b> Amount of Each Disbursement this Period [REDACTED] 1050.00	
City COLUMBUS	State OH	Zip Code 43215	Category/ Type [REDACTED]
Purpose of Disbursement CONSULTING		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. GARCEA, JORDAN, , Mr.,</b>		Date of Disbursement MM / DD / YYYY 04 / 11 / 2019	
Mailing Address 41 S HIGH STREET		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.9095</b> Amount of Each Disbursement this Period [REDACTED] 1050.00	
City COLUMBUS	State OH	Zip Code 43215	Category/ Type [REDACTED]
Purpose of Disbursement CONSULTING		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. GARCEA, JORDAN, , Mr.,</b>		Date of Disbursement MM / DD / YYYY 05 / 02 / 2019	
Mailing Address 41 S HIGH STREET		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.9102</b> Amount of Each Disbursement this Period [REDACTED] 1050.00	
City COLUMBUS	State OH	Zip Code 43215	Category/ Type [REDACTED]
Purpose of Disbursement CONSULTING		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 3150.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. GARCEA, JORDAN, , Mr.,</b>		Date of Disbursement MM / DD / YYYY 05 / 15 / 2019	
Mailing Address 41 S HIGH STREET		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9111</b> Amount of Each Disbursement this Period [ ] 1050.00	
City COLUMBUS	State OH	Zip Code 43215	Category/ Type [ ]
Purpose of Disbursement CONSULTING		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. HANSEN, BETH, , ,</b>		Date of Disbursement MM / DD / YYYY 01 / 16 / 2019	
Mailing Address 111 N ROOSEVELT		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9051</b> Amount of Each Disbursement this Period [ ] 4000.00	
City COLUMBUS	State OH	Zip Code 43209	Category/ Type [ ]
Purpose of Disbursement CONSULTING		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. HANSEN, BETH, , ,</b>		Date of Disbursement MM / DD / YYYY 02 / 01 / 2019	
Mailing Address 111 N ROOSEVELT		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9060</b> Amount of Each Disbursement this Period [ ] 8000.00	
City COLUMBUS	State OH	Zip Code 43209	Category/ Type [ ]
Purpose of Disbursement CONSULTING		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 13050.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]



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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. HANSEN, BETH, , ,</b>		Date of Disbursement MM / DD / YYYY 05 / 01 / 2019	
Mailing Address 111 N ROOSEVELT		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9098</b>	
City COLUMBUS	State OH	Zip Code 43209	Amount of Each Disbursement this Period 8000.00
Purpose of Disbursement CONSULTING		Category/ Type [ ]	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. HANSEN, BETH, , ,</b>		Date of Disbursement MM / DD / YYYY 06 / 03 / 2019	
Mailing Address 111 N ROOSEVELT		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9119</b>	
City COLUMBUS	State OH	Zip Code 43209	Amount of Each Disbursement this Period 8000.00
Purpose of Disbursement CONSULTING		Category/ Type [ ]	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Huntington National Bank</b>		Date of Disbursement MM / DD / YYYY 03 / 04 / 2019	
Mailing Address PO Box 1558		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9077</b>	
City Columbus	State OH	Zip Code 43216	Amount of Each Disbursement this Period 44.95
Purpose of Disbursement MERCHANT FEES		Category/ Type [ ]	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

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

16044.95

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Huntington National Bank</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2019
Mailing Address PO Box 1558		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9080</b> Amount of Each Disbursement this Period [ ] 35.00
City Columbus	State OH	Zip Code 43216
Purpose of Disbursement BANK FEES		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Huntington National Bank</b>		Date of Disbursement MM / DD / YYYY 04 / 02 / 2019
Mailing Address PO Box 1558		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9089</b> Amount of Each Disbursement this Period [ ] 44.95
City Columbus	State OH	Zip Code 43216
Purpose of Disbursement MERCHANT FEES		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Huntington National Bank</b>		Date of Disbursement MM / DD / YYYY 04 / 15 / 2019
Mailing Address PO Box 1558		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9096</b> Amount of Each Disbursement this Period [ ] 35.00
City Columbus	State OH	Zip Code 43216
Purpose of Disbursement BANK FEES		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 114.95
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Huntington National Bank</b>		Date of Disbursement MM / DD / YYYY 05 / 02 / 2019
Mailing Address PO Box 1558		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9107</b>
City Columbus	State OH	Zip Code 43216
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period [ ] 44.95
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Huntington National Bank</b>		Date of Disbursement MM / DD / YYYY 05 / 15 / 2019
Mailing Address PO Box 1558		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9112</b>
City Columbus	State OH	Zip Code 43216
Purpose of Disbursement BANK FEES		Amount of Each Disbursement this Period [ ] 35.00
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Huntington National Bank</b>		Date of Disbursement MM / DD / YYYY 06 / 03 / 2019
Mailing Address PO Box 1558		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9121</b>
City Columbus	State OH	Zip Code 43216
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period [ ] 44.95
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

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

[ ] 124.90
[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Huntington National Bank</b>		Date of Disbursement MM / DD / YYYY 06 / 17 / 2019
Mailing Address PO Box 1558		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9124</b> Amount of Each Disbursement this Period [ ] 54.00
City Columbus	State OH	Zip Code 43216
Purpose of Disbursement BANK FEES		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. JOHNSON, TREVOR, , ,</b>		Date of Disbursement MM / DD / YYYY 01 / 25 / 2019
Mailing Address 991 MACGREGOR		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9054</b> Amount of Each Disbursement this Period [ ] 750.00
City WORTHINGTON	State OH	Zip Code 43085
Purpose of Disbursement CONSULTING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. JOHNSON, TREVOR, , ,</b>		Date of Disbursement MM / DD / YYYY 02 / 06 / 2019
Mailing Address 991 MACGREGOR		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9065</b> Amount of Each Disbursement this Period [ ] 1500.00
City WORTHINGTON	State OH	Zip Code 43085
Purpose of Disbursement CONSULTING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 2304.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]



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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. JOHNSON, TREVOR, , ,</b>		Date of Disbursement MM / DD / YYYY 03 / 01 / 2019	
Mailing Address 991 MACGREGOR		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9074</b> Amount of Each Disbursement this Period [ ] 1500.00	
City WORTHINGTON	State OH	Zip Code 43085	Category/ Type [ ]
Purpose of Disbursement CONSULTING		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. JOHNSON, TREVOR, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2019	
Mailing Address 991 MACGREGOR		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9083</b> Amount of Each Disbursement this Period [ ] 1500.00	
City WORTHINGTON	State OH	Zip Code 43085	Category/ Type [ ]
Purpose of Disbursement CONSULTING		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. JOHNSON, TREVOR, , ,</b>		Date of Disbursement MM / DD / YYYY 05 / 01 / 2019	
Mailing Address 991 MACGREGOR		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9099</b> Amount of Each Disbursement this Period [ ] 1500.00	
City WORTHINGTON	State OH	Zip Code 43085	Category/ Type [ ]
Purpose of Disbursement CONSULTING		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 4500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. JOHNSON, TREVOR, , ,</b>		Date of Disbursement MM / DD / YYYY 06 / 03 / 2019	
Mailing Address 991 MACGREGOR		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9118</b> Amount of Each Disbursement this Period [ ] 1500.00	
City WORTHINGTON	State OH	Zip Code 43085	Category/ Type [ ]
Purpose of Disbursement CONSULTING		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. LYNCH PUBLIC RELATIONS</b>		Date of Disbursement MM / DD / YYYY 01 / 29 / 2019	
Mailing Address 20 S THIRD STREET SUITE 210		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9057</b> Amount of Each Disbursement this Period [ ] 2500.00	
City COLUMBUS	State OH	Zip Code 43215	Category/ Type [ ]
Purpose of Disbursement CONSULTING		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. LYNCH PUBLIC RELATIONS</b>		Date of Disbursement MM / DD / YYYY 02 / 01 / 2019	
Mailing Address 20 S THIRD STREET SUITE 210		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9061</b> Amount of Each Disbursement this Period [ ] 5000.00	
City COLUMBUS	State OH	Zip Code 43215	Category/ Type [ ]
Purpose of Disbursement CONSULTING		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

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

9000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. LYNCH PUBLIC RELATIONS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 20 S THIRD STREET  
SUITE 210

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

City COLUMBUS State OH Zip Code 43215

FEC Identification Number

Purpose of Disbursement  
CONSULTING

C
---

**Transaction ID : SB21B.9072**

Candidate Name

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

5000.00
---------

Memo Item

**B. LYNCH PUBLIC RELATIONS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 20 S THIRD STREET  
SUITE 210

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

City COLUMBUS State OH Zip Code 43215

FEC Identification Number

Purpose of Disbursement  
CONSULTING

C
---

**Transaction ID : SB21B.9084**

Candidate Name

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

5000.00
---------

Memo Item

**C. LYNCH PUBLIC RELATIONS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 20 S THIRD STREET  
SUITE 210

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

City COLUMBUS State OH Zip Code 43215

FEC Identification Number

Purpose of Disbursement  
CONSULTING

C
---

**Transaction ID : SB21B.9100**

Candidate Name

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

5000.00
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Memo Item

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

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

15000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. LYNCH PUBLIC RELATIONS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 20 S THIRD STREET  
SUITE 210

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

City COLUMBUS State OH Zip Code 43215

FEC Identification Number

Purpose of Disbursement  
CONSULTING

C
---

Candidate Name

**Transaction ID : SB21B.9117**  
Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

8625.00
---------

State: District:

Memo Item

**B. PAGNARD, DAVID, , ,**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 6894 FORESTHAVEN LOOP

M M M	/	D D D	/	Y Y Y Y Y
03		20		2019

City DUBLIN State OH Zip Code 43016

FEC Identification Number

Purpose of Disbursement  
MEDIA CONSULTING

C
---

Candidate Name

**Transaction ID : SB21B.9081**  
Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

2562.50
---------

State: District:

Memo Item

**C. PAGNARD, DAVID, , ,**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 6894 FORESTHAVEN LOOP

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

City DUBLIN State OH Zip Code 43016

FEC Identification Number

Purpose of Disbursement  
MEDIA CONSULTING

C
---

Candidate Name

**Transaction ID : SB21B.9088**  
Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

1062.50
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State: District:

Memo Item

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

8625.00
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**TOTAL** This Period (last page this line number only)..... ▶

8625.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. PAGNARD, DAVID, , ,</b>		Date of Disbursement MM / DD / YYYY 05 / 02 / 2019	
Mailing Address 6894 FORESTHAVEN LOOP		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.9106</b> Amount of Each Disbursement this Period [REDACTED] 1625.00	
City DUBLIN	State OH	Zip Code 43016	Category/ Type [REDACTED]
Purpose of Disbursement MEDIA CONSULTING		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. PAGNARD, DAVID, , ,</b>		Date of Disbursement MM / DD / YYYY 06 / 03 / 2019	
Mailing Address 6894 FORESTHAVEN LOOP		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.9120</b> Amount of Each Disbursement this Period [REDACTED] 1000.00	
City DUBLIN	State OH	Zip Code 43016	Category/ Type [REDACTED]
Purpose of Disbursement MEDIA CONSULTING		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Red Tack Strategies LLC</b>		Date of Disbursement MM / DD / YYYY 02 / 18 / 2019	
Mailing Address 113 S Ardmore		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.9068</b> Amount of Each Disbursement this Period [REDACTED] 5000.00	
City Bexley	State OH	Zip Code 43209	Category/ Type [REDACTED]
Purpose of Disbursement MEDIA CONSULTING		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 7625.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Red Tack Strategies LLC</b>		Date of Disbursement MM / DD / YYYY 04 / 02 / 2019
Mailing Address 113 S Ardmore		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9087</b> Amount of Each Disbursement this Period 15000.00
City Bexley	State OH	Zip Code 43209
Purpose of Disbursement MEDIA CONSULTING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Right Digital LLC</b>		Date of Disbursement MM / DD / YYYY 01 / 23 / 2019
Mailing Address 408 E. Scheyer Place		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9053</b> Amount of Each Disbursement this Period 2550.00
City Columbus	State OH	Zip Code 43214
Purpose of Disbursement MEDIA CONSULTING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Right Digital LLC</b>		Date of Disbursement MM / DD / YYYY 02 / 14 / 2019
Mailing Address 408 E. Scheyer Place		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9067</b> Amount of Each Disbursement this Period 2250.00
City Columbus	State OH	Zip Code 43214
Purpose of Disbursement MEDIA CONSULTING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

19800.00

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

[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Right Digital LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 408 E. Scheyer Place

City Columbus State OH Zip Code 43214

Purpose of Disbursement DIGITAL CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 06 / 2019

FEC Identification Number: C

Transaction ID : SB21B.9093

Amount of Each Disbursement this Period: 2250.00

Memo Item

**B. Right Digital LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 408 E. Scheyer Place

City Columbus State OH Zip Code 43214

Purpose of Disbursement DIGITAL CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 09 / 2019

FEC Identification Number: C

Transaction ID : SB21B.9109

Amount of Each Disbursement this Period: 2250.00

Memo Item

**C. Right Digital LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 408 E. Scheyer Place

City Columbus State OH Zip Code 43214

Purpose of Disbursement DIGITAL CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 12 / 2019

FEC Identification Number: C

Transaction ID : SB21B.9123

Amount of Each Disbursement this Period: 2250.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 6750.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Right Digital LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 408 E. Scheyer Place

City Columbus State OH Zip Code 43214

Purpose of Disbursement DIGITAL CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 19 / 2019

FEC Identification Number: C

Transaction ID : SB21B.9126

Amount of Each Disbursement this Period: 2250.00

Memo Item

**B. The Network Companies LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 7062 Comanche Trail

City Austin State TX Zip Code 78732

Purpose of Disbursement CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 01 / 2019

FEC Identification Number: C

Transaction ID : SB21B.9059

Amount of Each Disbursement this Period: 10000.00

Memo Item

**C. The Network Companies LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 7062 Comanche Trail

City Austin State TX Zip Code 78732

Purpose of Disbursement CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 01 / 2019

FEC Identification Number: C

Transaction ID : SB21B.9076

Amount of Each Disbursement this Period: 10000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 22250.00

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. The Network Companies LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 7062 Comanche Trail

City Austin State TX Zip Code 78732

Purpose of Disbursement CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 01 / 2019

FEC Identification Number: C

Transaction ID : SB21B.9086

Amount of Each Disbursement this Period: 10000.00

Memo Item

**B. The Network Companies LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 7062 Comanche Trail

City Austin State TX Zip Code 78732

Purpose of Disbursement CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 01 / 2019

FEC Identification Number: C

Transaction ID : SB21B.9101

Amount of Each Disbursement this Period: 10000.00

Memo Item

**C. The Network Companies LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 7062 Comanche Trail

City Austin State TX Zip Code 78732

Purpose of Disbursement CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 15 / 2019

FEC Identification Number: C

Transaction ID : SB21B.9110

Amount of Each Disbursement this Period: 10000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 30000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Winterset CPA Group</b>		Date of Disbursement MM / DD / YYYY 01 / 16 / 2019
Mailing Address 4679 Winterset Drive		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9050</b> Amount of Each Disbursement this Period [ ] 715.00
City Columbus	State OH	Zip Code 43220
Purpose of Disbursement ACCOUNTING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Winterset CPA Group</b>		Date of Disbursement MM / DD / YYYY 02 / 18 / 2019
Mailing Address 4679 Winterset Drive		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9069</b> Amount of Each Disbursement this Period [ ] 1408.75
City Columbus	State OH	Zip Code 43220
Purpose of Disbursement ACCOUNTING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Winterset CPA Group</b>		Date of Disbursement MM / DD / YYYY 02 / 18 / 2019
Mailing Address 4679 Winterset Drive		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9070</b> Amount of Each Disbursement this Period [ ] 393.75
City Columbus	State OH	Zip Code 43220
Purpose of Disbursement ACCOUNTING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 2517.50
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Winterset CPA Group</b>		Date of Disbursement MM / DD / YYYY 03 / 13 / 2019	
Mailing Address 4679 Winterset Drive		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9079</b> Amount of Each Disbursement this Period [ ] 816.25	
City Columbus	State OH	Zip Code 43220	Category/ Type [ ]
Purpose of Disbursement ACCOUNTING		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Winterset CPA Group</b>		Date of Disbursement MM / DD / YYYY 05 / 02 / 2019	
Mailing Address 4679 Winterset Drive		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9103</b> Amount of Each Disbursement this Period [ ] 343.75	
City Columbus	State OH	Zip Code 43220	Category/ Type [ ]
Purpose of Disbursement ACCOUNTING		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Winterset CPA Group</b>		Date of Disbursement MM / DD / YYYY 05 / 20 / 2019	
Mailing Address 4679 Winterset Drive		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9114</b> Amount of Each Disbursement this Period [ ] 680.00	
City Columbus	State OH	Zip Code 43220	Category/ Type [ ]
Purpose of Disbursement ACCOUNTING		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 1840.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Winterset CPA Group</b>		Date of Disbursement MM / DD / YYYY 06 / 19 / 2019	
Mailing Address 4679 Winterset Drive		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9125</b> Amount of Each Disbursement this Period [ ] 1644.78	
City Columbus	State OH	Zip Code 43220	Category/ Type [ ]
Purpose of Disbursement ACCOUNTING			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Zhdan, Nazar, , ,</b>		Date of Disbursement MM / DD / YYYY 01 / 29 / 2019	
Mailing Address 41 South High Street Ste 3710		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9056</b> Amount of Each Disbursement this Period [ ] 2000.00	
City Columbus	State OH	Zip Code 43215	Category/ Type [ ]
Purpose of Disbursement CONSULTING			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Zhdan, Nazar, , ,</b>		Date of Disbursement MM / DD / YYYY 05 / 02 / 2019	
Mailing Address 41 South High Street Ste 3710		FEC Identification Number C [ ] <b>Transaction ID : SB21B.9104</b> Amount of Each Disbursement this Period [ ] 2000.00	
City Columbus	State OH	Zip Code 43215	Category/ Type [ ]
Purpose of Disbursement CONSULTING			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 5644.78
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

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

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

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

**A. Zhdan, Nazar, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 41 South High Street  
Ste 3710

City Columbus State OH Zip Code 43215

Purpose of Disbursement REIMBURSE TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement 05 / 02 / 2019

FEC Identification Number C

Transaction ID : SB21B.9105

Amount of Each Disbursement this Period 1398.55

Memo Item

**B. Kimpton Hotel Palomar**

Full Name (Last, First, Middle Initial)

Mailing Address 10740 Wilshire Blvd

City Los Angeles State CA Zip Code 90024

Purpose of Disbursement LODGING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement 05 / 02 / 2019

FEC Identification Number C

Transaction ID : SB21B.9105.c

Amount of Each Disbursement this Period 1013.35

Memo Item

**C. AVIS**

Full Name (Last, First, Middle Initial)

Mailing Address Central Terminal Dr.

City East Elmhurst State NY Zip Code 11371

Purpose of Disbursement CAR RENTAL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement 05 / 02 / 2019

FEC Identification Number C

Transaction ID : SB21B.9105.

Amount of Each Disbursement this Period 385.20

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1398.55

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

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

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FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)  
**New Day for America**

**A.** Full Name (Last, First, Middle Initial)  
**Zhdan, Nazar, , ,**

Date of Disbursement  
MM / DD / YYYY  
05 / 20 / 2019

Mailing Address 41 South High Street  
Ste 3710

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
CONSULTING

Candidate Name

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

State: District:

FEC Identification Number  
**C**

**Transaction ID : SB21B.9113**

Amount of Each Disbursement this Period  
2000.00

Memo Item

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

Date of Disbursement  
MM / DD / YYYY

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

State: District:

FEC Identification Number  
**C**

Amount of Each Disbursement this Period

Memo Item

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

Date of Disbursement  
MM / DD / YYYY

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

State: District:

FEC Identification Number  
**C**

Amount of Each Disbursement this Period

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2000.00

**TOTAL** This Period (last page this line number only)..... ▶ 228738.88