

**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

Government Is Not God

ADDRESS (number and street)

P. O. Box 77237

Check if different  
than previously  
reported. (ACC)

Washington

DC

20013

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00297531

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☒ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

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

Murray, Nancy, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Murray, Nancy, , ,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

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

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

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Page 2

Write or Type Committee Name

**Government Is Not God**

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
07		01		2017

To:

M M	/	D D	/	Y Y Y Y Y
12		31		2017

	COLUMN A This Period	COLUMN B Calendar Year-to-Date																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																		
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="5">2017</td></tr></table>	Y	Y	Y	Y	Y	2017						<table><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><t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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

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Government Is Not God

Report Covering the Period:

From:

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

To:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	2		3	1		2	0	1	7		

**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).....

7019.00

15902.00

(ii) Unitemized .....

4628.00

13829.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

11647.00

29731.00

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

11647.00

29731.00

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3) .....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c)) .....

11647.00

29731.00

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

11647.00

29731.00

# **DETAILED SUMMARY PAGE** of Disbursements

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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 .....	10325.66	20595.59
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	10325.66	20595.59
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	500.00	4500.00
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	100.00
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)) ..	10825.66	25195.59
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10825.66	25195.59

**DETAILED SUMMARY PAGE**  
of Disbursements

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<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) .....	11647.00	29731.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	11647.00	29731.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....▶	10325.66	20595.59
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	10325.66	20595.59

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**Government Is Not God**

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

## **A. Contributions, Unitemized, , ,**

Mailing Address P. O. Box 77237

City  
 Washington

State  
 DC

Zip Code  
 20013

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 N/A

Occupation (for Individual)  
 N/A

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2097.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2017

**Transaction ID : SA11AI.13717**

Amount of Each Receipt this Period

554.00

☐ Memo Item

total of smaller contributions of less than \$20 each

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

## **B. Ferguson, Lisa, , ,**

Mailing Address 137 Darroch Rd

City  
 Delmar

State  
 NY

Zip Code  
 12054

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 Nigro Companies

Occupation (for Individual)  
 attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 08 / 07 / 2017

**Transaction ID : SA11AI.13553**

Amount of Each Receipt this Period

100.00

☐ Memo Item

political donation

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

## **C. Ferguson, Lisa, , ,**

Mailing Address 137 Darroch Rd

City  
 Delmar

State  
 NY

Zip Code  
 12054

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 Nigro Companies

Occupation (for Individual)  
 attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2017

**Transaction ID : SA11AI.13554**

Amount of Each Receipt this Period

100.00

☐ Memo Item

political donation

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

754.00

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

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NAME OF COMMITTEE (In Full)  
**Government Is Not God**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Ferguson, Lisa, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 16 / 2017 <b>Transaction ID : SA11AI.13555</b>	
Mailing Address 137 Darroch Rd			Amount of Each Receipt this Period 100.00	
City Delmar	State NY	Zip Code 12054	<input type="checkbox"/> Memo Item political donation	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 600.00	
Name of Employer (for Individual) Nigro Companies		Occupation (for Individual) attorney	<input type="checkbox"/> Memo Item political donation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			Aggregate Year-to-Date ▼ 600.00	
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Fitzgerald, Clendon, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 09 / 12 / 2017 <b>Transaction ID : SA11AI.13652</b>	
Mailing Address 7905 Vallejo St			Amount of Each Receipt this Period 100.00	
City Denver	State CO	Zip Code 80221	<input type="checkbox"/> Memo Item political donation	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 400.00	
Name of Employer (for Individual) n/a		Occupation (for Individual) best effort	<input type="checkbox"/> Memo Item political donation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			Aggregate Year-to-Date ▼ 400.00	
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Fitzgerald, Clendon, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 12 / 11 / 2017 <b>Transaction ID : SA11AI.13653</b>	
Mailing Address 7905 Vallejo St			Amount of Each Receipt this Period 100.00	
City Denver	State CO	Zip Code 80221	<input type="checkbox"/> Memo Item political donation	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 500.00	
Name of Employer (for Individual) n/a		Occupation (for Individual) best effort	<input type="checkbox"/> Memo Item political donation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			Aggregate Year-to-Date ▼ 500.00	
<b>SUBTOTAL</b> of Receipts This Page (optional).....			300.00	
<b>TOTAL</b> This Period (last page this line number only).....				

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

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NAME OF COMMITTEE (In Full)  
**Government Is Not God**

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

**A. Hank, Gabriella, , ,**

Mailing Address 4505 72nd St E

City  
Tacoma

State  
WA

Zip Code  
98443

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
n/a

Occupation (for Individual)  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2017

Transaction ID : SA11AI.13667

Amount of Each Receipt this Period

100.00

☐ Memo Item  
political donation

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

**B. Kiser, Robert, , ,**

Mailing Address 9106 Bedford Dr

City  
Odessa

State  
TX

Zip Code  
79764

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
none

Occupation (for Individual)  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2017

Transaction ID : SA11AI.13600

Amount of Each Receipt this Period

200.00

☐ Memo Item  
political donation

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

**C. Kopal, Robert, J., Mr.,**

Mailing Address 10 Shoreline Point Dr.

City  
The Woodlands

State  
TX

Zip Code  
77381

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 20 / 2017

Transaction ID : SA11AI.13596

Amount of Each Receipt this Period

50.00

☐ Memo Item  
political donation

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

350.00



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

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NAME OF COMMITTEE (In Full)  
**Government Is Not God**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Kuper, Stanley, , Mr.,**

Mailing Address 8 Rain Hollow Place

City  
Houston

State  
TX

Zip Code  
77024

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Bell South

Occupation (for Individual)  
technical writer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 31 / 2017

Transaction ID : SA11AI.13645

Amount of Each Receipt this Period

100.00

☐ Memo Item  
political donation

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

Mailing Address 8 Rain Hollow Place

City  
Houston

State  
TX

Zip Code  
77024

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Bell South

Occupation (for Individual)  
technical writer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 29 / 2017

Transaction ID : SA11AI.13646

Amount of Each Receipt this Period

100.00

☐ Memo Item  
political donation

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

Mailing Address 47 Ravenwood Circle

City  
Bloomington

State  
IL

Zip Code  
61704

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
State Farm Insurance Co's

Occupation (for Individual)  
attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 07 / 2017

Transaction ID : SA11AI.13578

Amount of Each Receipt this Period

150.00

☐ Memo Item  
political donation

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

350.00

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

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NAME OF COMMITTEE (In Full)  
**Government Is Not God**

<b>A. Merritt, Philip, , Mr.,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 47 Ravenwood Circle City Bloomington State IL Zip Code 61704 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) State Farm Insurance Co's Occupation (for Individual) attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00			Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 31 / 2017 <b>Transaction ID : SA11AI.13579</b> Amount of Each Receipt this Period 300.00 <input type="checkbox"/> Memo Item political donation
<b>B. Miller, Kendall, , Mr.,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 7350 Wakefield Ave. City Reedley State CA Zip Code 93654 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Farm manager Occupation (for Individual) Kencarol, Inc. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00			Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 14 / 2017 <b>Transaction ID : SA11AI.13610</b> Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Memo Item political donation
<b>C. Murphy, Louise, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 186 M St City Boston State MA Zip Code 02127 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) unknown Occupation (for Individual) unknown Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00			Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 27 / 2017 <b>Transaction ID : SA11AI.13618</b> Amount of Each Receipt this Period 50.00 <input type="checkbox"/> Memo Item political donation
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			850.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶			

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

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NAME OF COMMITTEE (In Full)  
**Government Is Not God**

<b>A. Nordskog, Jerry, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 2716 Sailor Ave City Ventura Harbor State CA Zip Code 93001 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Nordskog Publishing Occupation (for Individual) book publisher Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00			Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 31 / 2017 <b>Transaction ID : SA11AI.13659</b> Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Memo Item political donation
<b>B. Pederson, Irene, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 200 Sunnyside Ave City Plentywood State MT Zip Code 59254 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) n/a Occupation (for Individual) retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00			Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 31 / 2017 <b>Transaction ID : SA11AI.13585</b> Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Memo Item political donation
<b>C. Pederson, Irene, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 200 Sunnyside Ave City Plentywood State MT Zip Code 59254 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) n/a Occupation (for Individual) retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 16 / 2017 <b>Transaction ID : SA11AI.13586</b> Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Memo Item political donation
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			1500.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶			

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

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NAME OF COMMITTEE (In Full)  
**Government Is Not God**

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

**A. Pullin, Alice, , ,**

Mailing Address 8703 Jamaica Ct

City  
Indianapolis

State  
IN

Zip Code  
46219

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
unknown

Occupation (for Individual)  
unknown

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 31 / 2017

**Transaction ID : SA11Al.13662**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
political donation

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

**B. Rippere, Lawrence, , Mr.,**

Mailing Address 2459 Benjamin Drive

City  
Mountain View

State  
CA

Zip Code  
94043

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 27 / 2017

**Transaction ID : SA11Al.13660**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
political donation

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

**C. Scholten, Henry, , Mr.,**

Mailing Address 716 Wiser Shore Lane

City  
Lynden

State  
WA

Zip Code  
98264

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Scholten Roofing Co.

Occupation (for Individual)  
consruction

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 07 / 2017

**Transaction ID : SA11Al.13615**

Amount of Each Receipt this Period

100.00

☐ Memo Item  
political donation

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1600.00

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**Government Is Not God**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Schwanger, Robert, , Mr.,**

Mailing Address 1078 W. Meadowbrook Road

City  
Pottstown

State  
PA

Zip Code  
19465

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
The Master's Woodshop

Occupation (for Individual)  
furniture crafting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 21 / 2017

Transaction ID : SA11AI.13560

Amount of Each Receipt this Period

100.00

☐ Memo Item  
political donation

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

Mailing Address 1078 W. Meadowbrook Road

City  
Pottstown

State  
PA

Zip Code  
19465

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
The Master's Woodshop

Occupation (for Individual)  
furniture crafting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 21 / 2017

Transaction ID : SA11AI.13561

Amount of Each Receipt this Period

200.00

☐ Memo Item  
political donation

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

Mailing Address 18 Stony Ridge

City  
Asheville

State  
NC

Zip Code  
28804

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
n/a

Occupation (for Individual)  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 01 / 2017

Transaction ID : SA11AI.13696

Amount of Each Receipt this Period

125.00

☐ Memo Item  
political donation

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

425.00

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

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NAME OF COMMITTEE (In Full)  
**Government Is Not God**

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

Mailing Address 4396 Lake Ivanhoe Dr

City  
Tucker

State  
GA

Zip Code  
30084

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Tripp Technical Consulting Co.

Occupation (for Individual)  
engineering consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 01 / 2017

Transaction ID : SA11AI.13569

Amount of Each Receipt this Period

120.00

☐ Memo Item  
political donation

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

Mailing Address 4396 Lake Ivanhoe Dr

City  
Tucker

State  
GA

Zip Code  
30084

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Tripp Technical Consulting Co.

Occupation (for Individual)  
engineering consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 01 / 2017

Transaction ID : SA11AI.13570

Amount of Each Receipt this Period

120.00

☐ Memo Item  
political donation

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

Mailing Address 2767 Holland St

City  
Hudsonville

State  
MI

Zip Code  
49426

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
n/a

Occupation (for Individual)  
homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 27 / 2017

Transaction ID : SA11AI.13582

Amount of Each Receipt this Period

400.00

☐ Memo Item  
political donation

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

640.00

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

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

FOR LINE NUMBER: PAGE 15 OF 27

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Government Is Not God

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

A. Wimberg, Ruth, , ,

Mailing Address 4148 N 43rd St

City  
PhoenixState  
AZZip Code  
85018FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/AOccupation (for Individual)  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 12 / 2017

Transaction ID : SA11AI.13604

Amount of Each Receipt this Period

50.00

☐ Memo Item  
political donation

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

B. Woodruff, Piers, , ,

Mailing Address P O Box 503

City  
SomersetState  
VAZip Code  
22972FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
self-employedOccupation (for Individual)  
farmer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 27 / 2017

Transaction ID : SA11AI.13556

Amount of Each Receipt this Period

100.00

☐ Memo Item  
political donation

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

C. Woodruff, Piers, , ,

Mailing Address P O Box 503

City  
SomersetState  
VAZip Code  
22972FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
self-employedOccupation (for Individual)  
farmer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 18 / 2017

Transaction ID : SA11AI.13557

Amount of Each Receipt this Period

100.00

☐ Memo Item  
political donation

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

250.00

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

7019.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 16 OF 27

<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)

**Government Is Not God**

Full Name (Last, First, Middle Initial)

**A. Air Spark**

Mailing Address 7621 Kingston Pike

City  
KnoxvilleState  
TNZip Code  
37919Purpose of Disbursement  
Website maintenance

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		27		2017

FEC Identification Number

**C****Transaction ID : SB21B.13552**

Amount of Each Disbursement this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Constant Contact**Mailing Address 1601 Trapelo Rd  
# 329City  
WalthamState  
MAZip Code  
02451Purpose of Disbursement  
email distribution

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2017

☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		25		2017

FEC Identification Number

**C****Transaction ID : SB21B.13514**

Amount of Each Disbursement this Period

45.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Constant Contact**Mailing Address 1601 Trapelo Rd  
# 329City  
WalthamState  
MAZip Code  
02451Purpose of Disbursement  
email distribution

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2017

☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		30		2017

FEC Identification Number

**C****Transaction ID : SB21B.13515**

Amount of Each Disbursement this Period

66.50

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

511.50



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 27

<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)

**Government Is Not God**

Full Name (Last, First, Middle Initial)

**A. Constant Contact**Mailing Address 1601 Trapelo Rd  
# 329City  
WalthamState  
MAZip Code  
02451Purpose of Disbursement  
email distribution

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2017

☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2017

FEC Identification Number

**C****Transaction ID : SB21B.13529**

Amount of Each Disbursement this Period

45.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Constant Contact**Mailing Address 1601 Trapelo Rd  
# 329City  
WalthamState  
MAZip Code  
02451Purpose of Disbursement  
email distribution

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2017

☐ Primary ☒ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

FEC Identification Number

**C****Transaction ID : SB21B.13535**

Amount of Each Disbursement this Period

45.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Constant Contact**Mailing Address 1601 Trapelo Rd  
# 329City  
WalthamState  
MAZip Code  
02451Purpose of Disbursement  
email distribution

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		20		2017

FEC Identification Number

**C****Transaction ID : SB21B.13544**

Amount of Each Disbursement this Period

45.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

135.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 18 OF 27

<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)

**Government Is Not God**

Full Name (Last, First, Middle Initial)

**A. Constant Contact**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		22		2017

Mailing Address 1601 Trapelo Rd  
# 329City  
WalthamState  
MAZip Code  
02451Purpose of Disbursement  
email distribution

Candidate Name

Category/  
Type

FEC Identification Number

**C****Transaction ID : SB21B.13551**

Amount of Each Disbursement this Period

45.00

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. Frank York Consulting**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		11		2017

Mailing Address 7046 Bonnavent Dr

City  
HermitageState  
TNZip Code  
37076Purpose of Disbursement  
consulting fees

Candidate Name

Category/  
Type

FEC Identification Number

**C****Transaction ID : SB21B.13511**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2017

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. Frank York Consulting**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2017

Mailing Address 7046 Bonnavent Dr

City  
HermitageState  
TNZip Code  
37076Purpose of Disbursement  
consulting fees

Candidate Name

Category/  
Type

FEC Identification Number

**C****Transaction ID : SB21B.13517**

Amount of Each Disbursement this Period

600.00

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2017

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

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

1645.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 19 OF 27

<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)

**Government Is Not God**

Full Name (Last, First, Middle Initial)

**A. Frank York Consulting**

Mailing Address 7046 Bonnavent Dr

City  
HermitageState  
TNZip Code  
37076Purpose of Disbursement  
consulting fees

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2017

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	9			2	0	1	7		

FEC Identification Number

**C****Transaction ID : SB21B.13527**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Frank York Consulting**

Mailing Address 7046 Bonnavent Dr

City  
HermitageState  
TNZip Code  
37076Purpose of Disbursement  
consulting fees

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2017

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	3			2	0	1	7		

FEC Identification Number

**C****Transaction ID : SB21B.13540**

Amount of Each Disbursement this Period

600.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Frank York Consulting**

Mailing Address 7046 Bonnavent Dr

City  
HermitageState  
TNZip Code  
37076Purpose of Disbursement  
consulting fees

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			1	7			2	0	1	8		

FEC Identification Number

**C****Transaction ID : SB21B.13543**

Amount of Each Disbursement this Period

600.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2200.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 20 OF 27

<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)

**Government Is Not God**

Full Name (Last, First, Middle Initial)

**A. Frank York Consulting**

Mailing Address 7046 Bonnavent Dr

City  
HermitageState  
TNZip Code  
37076Purpose of Disbursement  
consulting fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		17		2017

FEC Identification Number

**C****Transaction ID : SB21B.13545**

Amount of Each Disbursement this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Frank York Consulting**

Mailing Address 7046 Bonnavent Dr

City  
HermitageState  
TNZip Code  
37076Purpose of Disbursement  
consulting fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		15		2017

FEC Identification Number

**C****Transaction ID : SB21B.13549**

Amount of Each Disbursement this Period

600.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Marmak Designs**

Mailing Address 2081 Hutton Dr. #301

City  
CarrolltonState  
TXZip Code  
75006Purpose of Disbursement  
mailing educational materials

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		03		2017

FEC Identification Number

**C****Transaction ID : SB21B.13511**

Amount of Each Disbursement this Period

146.77

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1146.77

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 21 OF 27

<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)

**Government Is Not God**

Full Name (Last, First, Middle Initial)

**A. Marmak Designs**

Mailing Address 2081 Hutton Dr. #301

City  
CarrolltonState  
TXZip Code  
75006Purpose of Disbursement  
printing educational materials

Candidate Name

 Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2017

☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		24		2017

FEC Identification Number

**C****Transaction ID : SB21B.13513**

Amount of Each Disbursement this Period

593.42

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Marmak Designs**

Mailing Address 2081 Hutton Dr. #301

City  
CarrolltonState  
TXZip Code  
75006Purpose of Disbursement  
mailing educational materials

Candidate Name

 Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2017

☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2017

FEC Identification Number

**C****Transaction ID : SB21B.13523**

Amount of Each Disbursement this Period

211.68

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Marmak Designs**

Mailing Address 2081 Hutton Dr. #301

City  
CarrolltonState  
TXZip Code  
75006Purpose of Disbursement  
printing educational materials

Candidate Name

 Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2017

☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2017

FEC Identification Number

**C****Transaction ID : SB21B.13524**

Amount of Each Disbursement this Period

539.76

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1344.86

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 22 OF 27

<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)

**Government Is Not God**

Full Name (Last, First, Middle Initial)

**A. Marmak Designs**

Mailing Address 2081 Hutton Dr. #301

City  
CarrolltonState  
TXZip Code  
75006Purpose of Disbursement  
mailing educational materials

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.13541**

Amount of Each Disbursement this Period

224.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Marmak Designs**

Mailing Address 2081 Hutton Dr. #301

City  
CarrolltonState  
TXZip Code  
75006Purpose of Disbursement  
printing educational materials

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.13546**

Amount of Each Disbursement this Period

607.53

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Murray, William, , Mr.,**

Mailing Address P. O. Box 7416

City  
FredericksburgState  
VAZip Code  
22404Purpose of Disbursement  
travel expenses

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2017

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.13512**

Amount of Each Disbursement this Period

266.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1097.83

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 23 OF 27

<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)

**Government Is Not God**

Full Name (Last, First, Middle Initial)

**A. Murray, William, , Mr.,**

Mailing Address P. O. Box 7416

City  
FredericksburgState  
VAZip Code  
22404Purpose of Disbursement  
travel expenses

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2017

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8				1	1				2	0	1	7

FEC Identification Number

**C****Transaction ID : SB21B.13518**

Amount of Each Disbursement this Period

266.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Murray, William, , Mr.,**

Mailing Address P. O. Box 7416

City  
FredericksburgState  
VAZip Code  
22404Purpose of Disbursement  
travel expenses

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2017

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				1	9				2	0	1	7

FEC Identification Number

**C****Transaction ID : SB21B.13528**

Amount of Each Disbursement this Period

266.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Murray, William, , Mr.,**

Mailing Address P. O. Box 7416

City  
FredericksburgState  
VAZip Code  
22404Purpose of Disbursement  
travel expenses

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2017

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
	1	0			1	3				2	0	1	7

FEC Identification Number

**C****Transaction ID : SB21B.13532**

Amount of Each Disbursement this Period

997.50

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1529.50

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 24 OF 27

<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)

**Government Is Not God**

Full Name (Last, First, Middle Initial)

**A. Murray, William, , Mr.,**

Mailing Address P. O. Box 7416

City  
FredericksburgState  
VAZip Code  
22404Purpose of Disbursement  
travel expenses

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		13		2017

FEC Identification Number

**C****Transaction ID : SB21B.13542**

Amount of Each Disbursement this Period

266.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Murray, William, , Mr.,**

Mailing Address P. O. Box 7416

City  
FredericksburgState  
VAZip Code  
22404Purpose of Disbursement  
travel expenses

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☐ Primary ☒ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		11		2017

FEC Identification Number

**C****Transaction ID : SB21B.13548**

Amount of Each Disbursement this Period

266.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Verizon**

Mailing Address P. O. Box 17577

City  
BaltimoreState  
MDZip Code  
21247

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		25		2017

FEC Identification Number

**C****Transaction ID : SB21B.13511**

Amount of Each Disbursement this Period

30.46

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

562.46



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 25 OF 27

<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)

**Government Is Not God**

Full Name (Last, First, Middle Initial)

**A. Verizon**

Mailing Address P. O. Box 17577

City  
BaltimoreState  
MDZip Code  
21247Purpose of Disbursement  
telephone service

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2017

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2017

FEC Identification Number

**C****Transaction ID : SB21B.13520**

Amount of Each Disbursement this Period

30.44

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Verizon**

Mailing Address P. O. Box 17577

City  
BaltimoreState  
MDZip Code  
21247Purpose of Disbursement  
telephone service

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2017

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2017

FEC Identification Number

**C****Transaction ID : SB21B.13530**

Amount of Each Disbursement this Period

30.44

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Verizon**

Mailing Address P. O. Box 17577

City  
BaltimoreState  
MDZip Code  
21247Purpose of Disbursement  
telephone service

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2017

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

FEC Identification Number

**C****Transaction ID : SB21B.13534**

Amount of Each Disbursement this Period

30.62

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

91.50

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 26 OF 27

<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)

**Government Is Not God**

Full Name (Last, First, Middle Initial)

**A. Verizon**

Mailing Address P. O. Box 17577

City  
BaltimoreState  
MDZip Code  
21247Purpose of Disbursement  
telephone service

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.13547**

Amount of Each Disbursement this Period

30.62

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Verizon**

Mailing Address P. O. Box 17577

City  
BaltimoreState  
MDZip Code  
21247Purpose of Disbursement  
telephone service

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C****Transaction ID : SB21B.13550**

Amount of Each Disbursement this Period

30.62

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

61.24

10325.66

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 27 OF 27

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

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NAME OF COMMITTEE (In Full)

**Government Is Not God**

Full Name (Last, First, Middle Initial)

**A. MOORE, ROY JUDGE, , ,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2017

Mailing Address PO BOX 5032

City  
MONTGOMERYState  
ALZip Code  
36103Purpose of Disbursement  
political contribution

011

Candidate Name

**JUDGE ROY MOORE FOR US SENATE**Category/  
Type

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2017

☐ Primary ☐ General  
☒ Other (specify) ▼

State: AL District: 00

Special-General

FEC Identification Number

C C00639401

**Transaction ID : SB23.13716**

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

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

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

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

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

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

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

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).....▶

500.00

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

500.00