



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**AMERICA ONE**

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="2021"/>	<input type="text" value="55964.69"/>	<input type="text" value="55964.69"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="79800.50"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="235000.00"/>	<input type="text" value="260496.51"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="314800.50"/>	<input type="text" value="316461.20"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="15141.80"/>	<input type="text" value="16802.50"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="299658.70"/>	<input type="text" value="299658.70"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**AMERICA ONE**

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

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).....	235000.00	235000.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	235000.00	235000.00
(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) .....	235000.00	235000.00
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	25496.51
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)).....▶	235000.00	260496.51
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	235000.00	260496.51

**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 .....	15141.80	16802.50
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	15141.80	16802.50
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)) ..	15141.80	16802.50
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	15141.80	16802.50

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

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) .....	235000.00	235000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	235000.00	235000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	15141.80	16802.50
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	25496.51
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	15141.80	- 8694.01

**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 13
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<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)  
**AMERICA ONE**

**A. BUCKLEY, WALTER, W., Jr.**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11450 TURTLE BEACH RD.

City NORTH PALM BEACH	State FL	Zip Code 33408
--------------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2021

**Transaction ID : SA11AI.4226**

Amount of Each Receipt this Period  

100000.00
-----------

 Memo Item

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

Mailing Address PO BOX 21440

City LITTLE ROCK	State AR	Zip Code 72221
---------------------	-------------	-------------------

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

Name of Employer (for Individual) MOUNTAIRE	Occupation (for Individual) CHAIRMAN
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		16		2021

**Transaction ID : SA11AI.4224**

Amount of Each Receipt this Period  

100000.00
-----------

 Memo Item

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

Mailing Address 6632 KENTWOOD BLUFFS DR

City LOS ANGELES	State CA	Zip Code 90045
---------------------	-------------	-------------------

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

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) INVESTOR
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
25000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11		19		2021

**Transaction ID : SA11AI.4228**

Amount of Each Receipt this Period  

25000.00
----------

 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	225000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 7 OF 13  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**AMERICA ONE**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
TAPIA, DON, R, ,

Mailing Address 112 HICKORY DRIVE

City NAPLES    State FL    Zip Code 34108

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 23 / 2021

**Transaction ID : SA11AI.4229**

Amount of Each Receipt this Period  
10000.00

Memo Item

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

Mailing Address

City    State    Zip Code

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City    State    Zip Code

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

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

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	235000.00

**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)  
**AMERICA ONE**

Full Name (Last, First, Middle Initial) <b>A. ANEDOT, INC.</b>		Date of Disbursement MM / DD / YYYY 12 / 23 / 2021
Mailing Address 1340 POYDRAS STREET STE 1770		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.4195</b> Amount of Each Disbursement this Period 400.30
City NEW ORLEANS	State LA	Zip Code 70112
Purpose of Disbursement CREDIT CARD PROCESSING 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. INTUIT</b>		Date of Disbursement MM / DD / YYYY 07 / 01 / 2021
Mailing Address 2700 COAST AVE		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.4199</b> Amount of Each Disbursement this Period 40.00
City MOUNTAIN VIEW	State CA	Zip Code 94043
Purpose of Disbursement SUBSCRIPTION		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. INTUIT</b>		Date of Disbursement MM / DD / YYYY 08 / 02 / 2021
Mailing Address 2700 COAST AVE		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.4211</b> Amount of Each Disbursement this Period 40.00
City MOUNTAIN VIEW	State CA	Zip Code 94043
Purpose of Disbursement SUBSCRIPTION		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)..... ▶

480.30

**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)  
**AMERICA ONE**

Full Name (Last, First, Middle Initial)

**A. INTUIT**

Mailing Address 2700 COAST AVE

City  
MOUNTAIN VIEW

State  
CA

Zip Code  
94043

Purpose of Disbursement  
SUBSCRIPTION

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

Transaction ID : SB21B.4212

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. INTUIT**

Mailing Address 2700 COAST AVE

City  
MOUNTAIN VIEW

State  
CA

Zip Code  
94043

Purpose of Disbursement  
SUBSCRIPTION

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

Transaction ID : SB21B.4213

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. INTUIT**

Mailing Address 2700 COAST AVE

City  
MOUNTAIN VIEW

State  
CA

Zip Code  
94043

Purpose of Disbursement  
SUBSCRIPTION

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

Transaction ID : SB21B.4214

Amount of Each Disbursement this Period

Memo Item

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

**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)  
**AMERICA ONE**

Full Name (Last, First, Middle Initial)

**A. INTUIT**

Mailing Address 2700 COAST AVE

City  
MOUNTAIN VIEW

State  
CA

Zip Code  
94043

Purpose of Disbursement  
SUBSCRIPTION

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			01			2021			

FEC Identification Number

**C**

**Transaction ID : SB21B.4215**

Amount of Each Disbursement this Period

50.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. INTUIT**

Mailing Address 2700 COAST AVE

City  
MOUNTAIN VIEW

State  
CA

Zip Code  
94043

Purpose of Disbursement  
SUBSCRIPTION

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			31			2021			

FEC Identification Number

**C**

**Transaction ID : SB21B.4216**

Amount of Each Disbursement this Period

50.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. RIGHTSIDE COMPLIANCE LLC**

Mailing Address PO BOX 341027

City  
AUSTIN

State  
TX

Zip Code  
78734

Purpose of Disbursement  
COMPLIANCE SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
07			07			2021			

FEC Identification Number

**C**

**Transaction ID : SB21B.4200**

Amount of Each Disbursement this Period

67.50

Memo Item

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

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

167.50

# 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)  
**AMERICA ONE**

## A. RIGHTSIDE COMPLIANCE LLC

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 341027

M M M	/	D D D	/	Y Y Y Y Y
08		12		2021

City  
AUSTIN

State  
TX

Zip Code  
78734

FEC Identification Number

Purpose of Disbursement  
COMPLIANCE SERVICES

C
---

Candidate Name

Transaction ID : SB21B.4217

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

337.50
--------

State: District:

Memo Item

## B. RIGHTSIDE COMPLIANCE LLC

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 341027

M M M	/	D D D	/	Y Y Y Y Y
09		08		2021

City  
AUSTIN

State  
TX

Zip Code  
78734

FEC Identification Number

Purpose of Disbursement  
COMPLIANCE SERVICES

C
---

Candidate Name

Transaction ID : SB21B.4218

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

67.50
-------

State: District:

Memo Item

## C. RIGHTSIDE COMPLIANCE LLC

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 341027

M M M	/	D D D	/	Y Y Y Y Y
10		06		2021

City  
AUSTIN

State  
TX

Zip Code  
78734

FEC Identification Number

Purpose of Disbursement  
COMPLIANCE SERVICES

C
---

Candidate Name

Transaction ID : SB21B.4219

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

112.50
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State: District:

Memo Item

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

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

517.50
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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)  
**AMERICA ONE**

**A. RIGHTSIDE COMPLIANCE LLC**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 341027

City AUSTIN State TX Zip Code 78734

Purpose of Disbursement COMPLIANCE SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 11 / 04 / 2021

FEC Identification Number: C

Transaction ID : SB21B.4220

Amount of Each Disbursement this Period: 360.00

Memo Item

**B. RIGHTSIDE COMPLIANCE LLC**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 341027

City AUSTIN State TX Zip Code 78734

Purpose of Disbursement COMPLIANCE SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 12 / 06 / 2021

FEC Identification Number: C

Transaction ID : SB21B.4221

Amount of Each Disbursement this Period: 495.00

Memo Item

**C. THE GOBER GROUP PLLC**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 341016

City AUSTIN State TX Zip Code 78734

Purpose of Disbursement LEGAL SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 12 / 06 / 2021

FEC Identification Number: C

Transaction ID : SB21B.4201

Amount of Each Disbursement this Period: 148.50

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1003.50

**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

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)  
**AMERICA ONE**

Full Name (Last, First, Middle Initial)  
**A. THE MORNING GROUP, LLC**

Mailing Address 5918 4TH STREET NW

City  
WASHINGTON

State  
DC

Zip Code  
20011

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
11 / 02 / 2021

FEC Identification Number

C

Transaction ID : SB21B.4202

Amount of Each Disbursement this Period

10000.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. THE MORNING GROUP, LLC**

Mailing Address 5918 4TH STREET NW

City  
WASHINGTON

State  
DC

Zip Code  
20011

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
12 / 06 / 2021

FEC Identification Number

C

Transaction ID : SB21B.4203

Amount of Each Disbursement this Period

2500.00

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:

Category/  
Type

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

12500.00

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

14818.80