

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**
1820 PAC

ADDRESS (number and street) PO BOX 15283
Check if different than previously reported. (ACC) WASHINGTON DC 20003

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00698126 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on [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 [MM] / [DD] / [YYYY] 07 / 01 / 2020 through [MM] / [DD] / [YYYY] 09 / 30 / 2020

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
DATWYLER, THOMAS, , ,
Type or Print Name of Treasurer

Signature of Treasurer DATWYLER, THOMAS, , , [Electronically Filed] Date [MM] / [DD] / [YYYY] 10 / 13 / 2020

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

1820 PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>	<input type="text" value=""/>	<input type="text" value="636496.59"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="1603894.64"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="4402450.00"/>	<input type="text" value="7775950.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="6006344.64"/>	<input type="text" value="8412446.59"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="4585157.68"/>	<input type="text" value="6991259.63"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="1421186.96"/>	<input type="text" value="1421186.96"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

1820 PAC

Report Covering the Period: From:

M M / D D / Y Y Y Y
07 / 01 / 2020

To:

M M / D D / Y Y Y Y
09 / 30 / 2020

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).....	4202400.00	7575900.00
(ii) Unitemized	50.00	50.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	4202450.00	7575950.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	200000.00	200000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	4402450.00	7775950.00
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)).....▶	4402450.00	7775950.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	4402450.00	7775950.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	463339.68	864696.63
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	463339.68	864696.63
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)	4121818.00	6126563.00
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)) ..	4585157.68	6991259.63
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4585157.68	6991259.63

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	4402450.00	7775950.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4402450.00	7775950.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	463339.68	864696.63
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	463339.68	864696.63

**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 6 OF 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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)
1820 PAC

A. BARBOUR, HALEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 648 DOGWOOD DRIVE
 City YAZOO CITY State MS Zip Code 39194
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BGR GROUP Occupation (for Individual) FOUNDING PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **08 / 21 / 2020**
Transaction ID : SA11AI.4414
 Amount of Each Receipt this Period 2500.00
 Memo Item

B. BLOOM, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 433 N CAMDEN DRIVE SUITE 888
 City BEVERLY HILLS State CA Zip Code 90210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CROWN ASSOCIATES REALTY INC. Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt **09 / 19 / 2020**
Transaction ID : SA11AI.4496
 Amount of Each Receipt this Period 15000.00
 Memo Item
 CONTRIBUTION EARMARKED THROUGH RJC VICTORY FUND

C. BOSARGE, ED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1604 NORTH BLVD
 City HOUSTON State TX Zip Code 77006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) QUANTLAB FINANCIAL Occupation (for Individual) BUSINESSMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt **09 / 17 / 2020**
Transaction ID : SA11AI.4479
 Amount of Each Receipt this Period 100000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 117500.00
TOTAL 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: (check only one)	PAGE 7 OF 41
<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

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NAME OF COMMITTEE (In Full)
1820 PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. BOYCE, RICHARD, , ,			Date of Receipt MM / DD / YYYY 09 / 08 / 2020 Transaction ID : SA11AI.4454		
Mailing Address 437 WHISKEY HILL RD			Amount of Each Receipt this Period 20000.00		
City WOODSIDE	State CA	Zip Code 94062	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 20000.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. BRADY, KATHERINE D., , ,			Date of Receipt MM / DD / YYYY 09 / 28 / 2020 Transaction ID : SA11AI.4510		
Mailing Address PO BOX 126			Amount of Each Receipt this Period 50000.00		
City OLDWICK	State NJ	Zip Code 08858	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 50000.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. BRADY, NICHOLAS, , ,			Date of Receipt MM / DD / YYYY 09 / 28 / 2020 Transaction ID : SA11AI.4511		
Mailing Address PO BOX 126			Amount of Each Receipt this Period 50000.00		
City OLDWICK	State NJ	Zip Code 08858	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) INFORMATION REQUESTED		Occupation (for Individual) INFORMATION REQUESTED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 50000.00			

SUBTOTAL of Receipts This Page (optional).....	120000.00
TOTAL 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: (check only one)	PAGE 8 OF 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
1820 PAC

A. Buckley, Walter, , , 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 ▼ 175000.00

Date of Receipt 08 / 06 / 2020
Transaction ID : SA11AI.4382
 Amount of Each Receipt this Period 100000.00
 Memo Item

B. Buckley, Walter, , , 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 ▼ 275000.00

Date of Receipt 08 / 12 / 2020
Transaction ID : SA11AI.4395
 Amount of Each Receipt this Period 100000.00
 Memo Item

C. Buckley, Walter, , , 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 ▼ 425000.00

Date of Receipt 09 / 30 / 2020
Transaction ID : SA11AI.4527
 Amount of Each Receipt this Period 150000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	350000.00
TOTAL 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 9 OF 41
	(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

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NAME OF COMMITTEE (In Full)
1820 PAC

A. CAMERON, RONALD, , ,
 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) **MOUNTAURE CORP** Occupation (for Individual) **CHAIRMAN**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250000.00**

Date of Receipt **08 / 20 / 2020**
Transaction ID : SA11AI.4412
 Amount of Each Receipt this Period **250000.00**
 Memo Item

B. CARLTON, ANDREA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **PO BOX 58258**
 City **NASHVILLE** State **TN** Zip Code **37205**
 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 **20000.00**

Date of Receipt **09 / 30 / 2020**
Transaction ID : SA11AI.4528
 Amount of Each Receipt this Period **20000.00**
 Memo Item

C. CHILDS, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address **20 PARK PLAZA**
 City **BOSTON** State **MA** Zip Code **02116**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **JW CHILDS ASSOCIATES** Occupation (for Individual) **OWNER**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **100000.00**

Date of Receipt **08 / 19 / 2020**
Transaction ID : SA11AI.4410
 Amount of Each Receipt this Period **100000.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	370000.00
TOTAL 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: (check only one)	PAGE 10 OF 41
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
1820 PAC

A. CITIZENS FOR RESPONSIBLE ENERGY SOLUTIONS
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 13TH ST NW STE 730N
 City WASHINGTON State DC Zip Code 20005
 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 ▼ 250000.00

Date of Receipt 09 / 28 / 2020
Transaction ID : SA11AI.4507
 Amount of Each Receipt this Period 250000.00
 Memo Item

B. CLEAVER, LARID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 730 REEF ROAD
 City VERO BEACH State FL Zip Code 32963
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 RETIRED RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 03 / 2020
Transaction ID : SA11AI.4390
 Amount of Each Receipt this Period 5000.00
 Memo Item
 CONTRIBUTION EARMARKED THROUGH WINRED

C. COHEN, HOWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10405 SANDRINGHAM CT
 City POTOMAC State MD Zip Code 20854
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 FEDERAL HEALTH COUNSEL ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 02 / 2020
Transaction ID : SA11AI.4450
 Amount of Each Receipt this Period 1000.00
 Memo Item
 CONTRIBUTION EARMARKED THROUGH WINRED

SUBTOTAL of Receipts This Page (optional).....	256000.00
TOTAL 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: (check only one)	PAGE 11 OF 41
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
1820 PAC

A. CROW, HARLAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3819 MAPLE AVENUE
 City DALLAS State TX Zip Code 75219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CROW HOLDINGS Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **25000.00**

Date of Receipt **07 / 28 / 2020**
Transaction ID : SA11AI.4372
 Amount of Each Receipt this Period **25000.00**
 Memo Item

B. DAVIS, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 GUEST STREET
 City BOSTON State MA Zip Code 02135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEW BALANCE Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **100000.00**

Date of Receipt **07 / 01 / 2020**
Transaction ID : SA11AI.4339
 Amount of Each Receipt this Period **100000.00**
 Memo Item

C. DAVIS, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 GUEST STREET
 City BOSTON State MA Zip Code 02135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEW BALANCE Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **200000.00**

Date of Receipt **09 / 28 / 2020**
Transaction ID : SA11AI.4509
 Amount of Each Receipt this Period **100000.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	225000.00
TOTAL 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: (check only one)	PAGE 12 OF 41
<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

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NAME OF COMMITTEE (In Full)
1820 PAC

A. DYSON, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address **6 WING ROAD**
City **MILLBROOK** State **NY** Zip Code **12545**
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) **MILLBROOK CAPITAL** Occupation (for Individual) **CHAIRMAN**
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **75000.00**

Date of Receipt **09 / 11 / 2020**
Transaction ID : SA11AI.4460
Amount of Each Receipt this Period **75000.00**
 Memo Item

B. Fischer, David, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address **1795 Maplelawn Drive**
City **Troy** State **MI** Zip Code **48084**
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) **US State Dept** Occupation (for Individual) **Ambassador**
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **17500.00**

Date of Receipt **08 / 28 / 2020**
Transaction ID : SA11AI.4429
Amount of Each Receipt this Period **10000.00**
 Memo Item

C. FISCHER, SHERRILYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address **5700 NW FISHER CREEK DRIVE**
City **CAMAS** State **WA** Zip Code **98607**
FEC ID number of contributing federal political committee. **C**
Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **5000.00**

Date of Receipt **08 / 28 / 2020**
Transaction ID : SA11AI.4421
Amount of Each Receipt this Period **5000.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... **90000.00**
TOTAL 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: (check only one)	PAGE 13 OF 41
	<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	

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NAME OF COMMITTEE (In Full)
1820 PAC

A. FISHER, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5700 NW FISHER CREEK DRIVE
 City CAMAS State WA Zip Code 98607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FISHER INVESTMENTS Occupation (for Individual) EXECUTIVE CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 28 / 2020
Transaction ID : SA11AI.4419
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. FOLEY, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1701 VILLAGE CENTER CIRCLE
 City LAS VEGAS State NV Zip Code 89134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FIDELITY NATIONAL FINANCIAL Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250000.00

Date of Receipt 08 / 28 / 2020
Transaction ID : SA11AI.4430
 Amount of Each Receipt this Period 250000.00
 Memo Item

C. GENDROW, CHARLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 175 GULFSHORE BLVD N
 City NAPLES State FL Zip Code 34102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LIHC INVESTMENTS Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 08 / 12 / 2020
Transaction ID : SA11AI.4396
 Amount of Each Receipt this Period 25000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	280000.00
TOTAL 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: (check only one)	PAGE 14 OF 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
1820 PAC

A. GILLIAM, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO BOX 820**

City **KESWICK** State **VA** Zip Code **22947**

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

Name of Employer (for Individual) **CUMBERLAND DEVELOPMENT** Occupation (for Individual) **MANAGER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
08 / 03 / 2020

Transaction ID : SA11AI.4392

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION EARMARKED THROUGH WINRED

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

Mailing Address **1 UNION SQUARE SOUTH
APT. 23A**

City **NEW YORK** State **NY** Zip Code **10003**

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

Name of Employer (for Individual) **JANE STREET** Occupation (for Individual) **MANAGER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
175000.00

Date of Receipt
09 / 21 / 2020

Transaction ID : SA11AI.4501

Amount of Each Receipt this Period
100000.00

Memo Item

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

Mailing Address **131 SOUTH DEARBORN STREET**

City **CHICAGO** State **IL** Zip Code **60603**

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

Name of Employer (for Individual) **CITADELL, LLC** Occupation (for Individual) **FOUNDER AND CEO**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1500000.00

Date of Receipt
08 / 27 / 2020

Transaction ID : SA11AI.4418

Amount of Each Receipt this Period
500000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... **605000.00**

TOTAL 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: (check only one)	PAGE 15 OF 41
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
1820 PAC

A. GUND, GORDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 NASSAU STREET
 City PRINCETON State NJ Zip Code 08542
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GUND INVESTMENT CORP. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 07 / 2020
Transaction ID : SA11AI.4404
 Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION EARMARKED THROUGH WINRED

B. HAAGA, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1743 FAIRMOUNT AVENUE
 City LA CANADA FLINTRIDGE State CA Zip Code 91011
 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 ▼ 25000.00

Date of Receipt 08 / 28 / 2020
Transaction ID : SA11AI.4432
 Amount of Each Receipt this Period 25000.00
 Memo Item

C. HARRISON, ANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33 SUNSET CHIMNEY ROAD
 City RAYMOND State ME Zip Code 04071
 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 ▼ 5000.00

Date of Receipt 08 / 04 / 2020
Transaction ID : SA11AI.4386
 Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION EARMARKED THROUGH WINRED

SUBTOTAL of Receipts This Page (optional).....	35000.00
TOTAL 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: (check only one)	PAGE 16 OF 41
	<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	

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NAME OF COMMITTEE (In Full)
1820 PAC

A. HARRISON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33 SUNSET CHIMNEY ROAD
 City RAYMOND State ME Zip Code 04071
 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 ▼ 5000.00

Date of Receipt 08 / 04 / 2020
Transaction ID : SA11AI.4388
 Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION EARMARKED THROUGH WINRED

B. HOFFMAN, ALFRED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12530 SEMINOLE BEACH ROAD
 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 ▼ 25000.00

Date of Receipt 08 / 28 / 2020
Transaction ID : SA11AI.4425
 Amount of Each Receipt this Period 25000.00
 Memo Item

C. HORRIGAN, GREGORY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11165 OLD HARBOUR ROAD
 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 ▼ 25000.00

Date of Receipt 08 / 28 / 2020
Transaction ID : SA11AI.4423
 Amount of Each Receipt this Period 25000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	55000.00
TOTAL 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: (check only one)	PAGE 17 OF 41
	<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	

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NAME OF COMMITTEE (In Full)
1820 PAC

A. HUGIN, KATHLEEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 ESSEX ROAD
 City SUMMIT State NJ Zip Code 07901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) VOLUNTEER
 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
 09 / 23 / 2020
Transaction ID : SA11AI.4503
 Amount of Each Receipt this Period
 25000.00
 Memo Item

B. JOHNSON, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1220 S OCEAN BLVD
 City PALM BEACH State FL Zip Code 33480
 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
 09 / 29 / 2020
Transaction ID : SA11AI.4513
 Amount of Each Receipt this Period
 100000.00
 Memo Item

C. KASSEN, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 YANKEE HILL RD W
 City ESTPORT State CT Zip Code 06880
 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 ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2020
Transaction ID : SA11AI.4471
 Amount of Each Receipt this Period
 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	130000.00
TOTAL 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: (check only one)	PAGE 18 OF 41
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
1820 PAC

A. LALLY, JASVINDER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6043 LOUISE COVE DRIVE
 City WINDERMERE State FL Zip Code 34786
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SUN STATE FORD Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 11 / 2020
Transaction ID : SA11AI.4498
 Amount of Each Receipt this Period 500.00
 Memo Item
CONTRIBUTION EARMARKED THROUGH WINRED

B. LEVY, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 970 SHIRLEY ROAD
 City BIRMINGHAM State MI Zip Code 48009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EDWICIEVY CO. Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 35000.00

Date of Receipt 09 / 30 / 2020
Transaction ID : SA11AI.4518
 Amount of Each Receipt this Period 35000.00
 Memo Item

C. MANOCHERIAN, JED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 EAST 50TH STREET SUITE 10
 City NEW YORK State NY Zip Code 10022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 07 / 21 / 2020
Transaction ID : SA11AI.4369
 Amount of Each Receipt this Period 100000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	135500.00
TOTAL 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: (check only one)	PAGE 19 OF 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
1820 PAC

A. MARCUS, BERNARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1266 WEST PACES FERRY ROAD
 SUITE 615
 City ATLANTA State GA Zip Code 30327
 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 ▼ 250000.00

Date of Receipt **09 / 17 / 2020**
Transaction ID : SA11AI.4482
 Amount of Each Receipt this Period 250000.00
 Memo Item

B. MARTIN, JERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 145 C SELNER LANE
 City DOYLESTOWN State PA Zip Code 18901
 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 ▼ 2800.00

Date of Receipt **09 / 02 / 2020**
Transaction ID : SA11AI.4448
 Amount of Each Receipt this Period 2800.00
 Memo Item
 CONTRIBUTION EARMARKED THROUGH WINRED

C. MCNA DENTAL
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 WEST CYPRESS CREEK ROAD
 City FORT LAUDERDALE State FL Zip Code 33309
 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 **07 / 20 / 2020**
Transaction ID : SA11AI.4367
 Amount of Each Receipt this Period 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 257800.00
TOTAL 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: (check only one)	PAGE 20 OF 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
1820 PAC

A. MONARCH INVESTMENT GROUP LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2195 N STATE HIGHWAY 83
 SUITE 14B
 City FRANKTOWN State CO Zip Code 80116
 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 ▼
 25000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2020
Transaction ID : SA11AI.4408
 Amount of Each Receipt this Period
 25000.00
 Memo Item

B. ORTHWEIN, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 154 GUARDS ROAD
 City GREENWICH State CT Zip Code 06831
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 THOR INDUSTRIES, INC. DIRECTOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2020
Transaction ID : SA11AI.4439
 Amount of Each Receipt this Period
 5000.00
 Memo Item

C. OVERDECK, LAURA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35 KENILWORTH DRIVE
 City SHORT HILLS State NJ Zip Code 07078
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 SELF-EMPLOYED NONPROFIT MANAGER
 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
 09 / 05 / 2020
Transaction ID : SA11AI.4466
 Amount of Each Receipt this Period
 10000.00
 Memo Item
 CONTRIBUTION EARMARKED THROUGH WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶ 40000.00
TOTAL 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: (check only one)	PAGE 21 OF 41
	<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	

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NAME OF COMMITTEE (In Full)
1820 PAC

A. Peterson, Milton, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 Milburg Lane
 City York Harbor State ME Zip Code 03911
 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 ▼ 35000.00

Date of Receipt 08 / 06 / 2020
Transaction ID : SA11AI.4383
 Amount of Each Receipt this Period 35000.00
 Memo Item

B. PROBITY INTERNATIONAL CORP
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 421 N BEVERLY DRIVE Suite 350
 City BEVERLY HILLS State CA Zip Code 90210
 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 09 / 19 / 2020
Transaction ID : SA11AI.4494
 Amount of Each Receipt this Period 5000.00
 Memo Item
 CONTRIBUTION EARMARKED THROUGH RJC VICTORY FUND

C. ROWE, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4351 GULF SHORE BLVD NORTH #2
 City NAPLES State FL Zip Code 34103
 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 ▼ 15000.00

Date of Receipt 07 / 19 / 2020
Transaction ID : SA11AI.4366
 Amount of Each Receipt this Period 10000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	50000.00
TOTAL 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: (check only one)	PAGE 22 OF 41
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
1820 PAC

A. SABIN, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 PANTIGO PLACE
 City EAST HAMPTON State NY Zip Code 11937
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SABIN METAL Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 09 / 19 / 2020
Transaction ID : SA11AI.4488
 Amount of Each Receipt this Period 10000.00
 Memo Item

B. SCHMERGEL, GABRIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 445 WALLS WAY
 City OSPREY State FL Zip Code 34229
 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 09 / 02 / 2020
Transaction ID : SA11AI.4452
 Amount of Each Receipt this Period 10000.00
 Memo Item
 CONTRIBUTION EARMARKED THROUGH WINRED

C. SCHWARZMAN, STEPHEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 345 PARK AVENUE
 City NEW YORK State NY Zip Code 10154
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BLACKSTONE Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000000.00

Date of Receipt 07 / 14 / 2020
Transaction ID : SA11AI.4363
 Amount of Each Receipt this Period 500000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	520000.00
TOTAL 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: (check only one)	PAGE 23 OF 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
1820 PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. SHEAR, HERB, , ,		Date of Receipt
Mailing Address 2660 SOUTH OCEAN BLVD. APT/ 503W		<input type="text" value="09"/> / <input type="text" value="02"/> / <input type="text" value="2020"/>
City PALM BEACH	State FL	Zip Code 22480
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.4468
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="5600.00"/>	Amount of Each Receipt this Period <input type="text" value="5600.00"/>
<input type="checkbox"/> Memo Item CONTRIBUTION EARMARKED THROUGH WINRED		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. SMITH, MICHAEL, , ,		Date of Receipt
Mailing Address 105 EDGEVIEW DR STE 390		<input type="text" value="08"/> / <input type="text" value="26"/> / <input type="text" value="2020"/>
City BROOMFIELD	State CO	Zip Code 80021
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.4416
Name of Employer (for Individual) KAITER RESOURCES		Occupation (for Individual) CEO
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="100000.00"/>	Amount of Each Receipt this Period <input type="text" value="100000.00"/>
<input type="checkbox"/> Memo Item		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. STEPHENS, WARREN, A, ,		Date of Receipt
Mailing Address 111 CENTER STREET		<input type="text" value="09"/> / <input type="text" value="22"/> / <input type="text" value="2020"/>
City LITTLE ROCK	State AR	Zip Code 72201
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.4502
Name of Employer (for Individual) STEPHENS, INC.		Occupation (for Individual) CEO
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="500000.00"/>	Amount of Each Receipt this Period <input type="text" value="250000.00"/>
<input type="checkbox"/> Memo Item		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="355600.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 24 OF 41
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
1820 PAC

A. STERN, ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 450 FORT HILL ROAD
 City SCARSDALE State NY Zip Code 10583
 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 ▼ 25000.00

Date of Receipt 09 / 15 / 2020
Transaction ID : SA11AI.4473
 Amount of Each Receipt this Period 25000.00
 Memo Item

B. STRAIGHT, CANDACE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 518 E PASSAIC AVENUE
 City BLOOMFIELD State NJ Zip Code 07003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 08 / 28 / 2020
Transaction ID : SA11AI.4427
 Amount of Each Receipt this Period 10000.00
 Memo Item

C. STRAIGHT, CANDACE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 518 E PASSAIC AVENUE
 City BLOOMFIELD State NJ Zip Code 07003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 20000.00

Date of Receipt 09 / 28 / 2020
Transaction ID : SA11AI.4533
 Amount of Each Receipt this Period 10000.00
 Memo Item
 CONTRIBUTION EARMARKED THROUGH WINRED

SUBTOTAL of Receipts This Page (optional).....▶	45000.00
TOTAL 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: (check only one)	PAGE 25 OF 41
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
1820 PAC

A. SULLIVAN, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 192 GOMEZ ROAD

City HOBE SOUND	State FL	Zip Code 33455
--------------------	-------------	-------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2020

Transaction ID : SA11AI.4530

Amount of Each Receipt this Period
5000.00

Memo Item

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

Mailing Address 2825 BROADWAY STREET

City SAN FRANCISCO	State CA	Zip Code 94115
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) DEPARTMENT OF STATE	Occupation (for Individual) AMBASSADOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
30000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		09		2020

Transaction ID : SA11AI.4357

Amount of Each Receipt this Period
30000.00

Memo Item

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

Mailing Address 1021 PARK AVENUE

City NEW YORK	State NY	Zip Code 10028
------------------	-------------	-------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2020

Transaction ID : SA11AI.4436

Amount of Each Receipt this Period
5000.00

Memo Item

CONTRIBUTION EARMARKED THROUGH WINRED

SUBTOTAL of Receipts This Page (optional).....	40000.00
TOTAL 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: (check only one)	PAGE 26 OF 41
	<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	

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NAME OF COMMITTEE (In Full)
1820 PAC

A. UTSCH, HANS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1021 PARK AVENUE
 City NEW YORK State NY Zip Code 10028
 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 ▼ 30000.00

Date of Receipt 08 / 31 / 2020
Transaction ID : SA11AI.4441
 Amount of Each Receipt this Period 25000.00
 Memo Item

B. WEISER, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 320 N MAIN STREET SUITE 200
 City ANN ARBOR State MI Zip Code 48104
 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 08 / 06 / 2020
Transaction ID : SA11AI.4381
 Amount of Each Receipt this Period 50000.00
 Memo Item

C. WESCON MANAGEMENT GROUP, INC.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 908001
 City MIDLAND State TX Zip Code 79708
 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 ▼ 50000.00

Date of Receipt 08 / 13 / 2020
Transaction ID : SA11AI.4399
 Amount of Each Receipt this Period 50000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	125000.00
TOTAL This Period (last page this line number only).....▶	4202400.00

**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 27 OF 41
<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)
1820 PAC

A. ESAFUND
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 610 S. BOULEVARD

City TAMPA	State FL	Zip Code 33606
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00489856

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	29	/	2020

Transaction ID : SA11C.4515

Amount of Each Receipt this Period
200000.00

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

SUBTOTAL of Receipts This Page (optional).....▶	200000.00
TOTAL This Period (last page this line number only).....▶	200000.00

**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)
1820 PAC

Full Name (Last, First, Middle Initial) A. 9SEVEN CONSULTING		Date of Disbursement MM / DD / YYYY 07 / 01 / 2020
Mailing Address 499 SOUTH CAPITOL STREET SW #405		FEC Identification Number C00698126 Transaction ID : SB21B.4338
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement COMPLIANCE CONSULTING		Category/Type 001
Candidate Name 1820 PAC		Amount of Each Disbursement this Period 4061.00
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. 9SEVEN CONSULTING		Date of Disbursement MM / DD / YYYY 07 / 31 / 2020
Mailing Address 499 SOUTH CAPITOL STREET SW #405		FEC Identification Number C00698126 Transaction ID : SB21B.4374
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement COMPLIANCE CONSULTING		Category/Type 001
Candidate Name 1820 PAC		Amount of Each Disbursement this Period 4059.99
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. 9SEVEN CONSULTING		Date of Disbursement MM / DD / YYYY 09 / 03 / 2020
Mailing Address 499 SOUTH CAPITOL STREET SW #405		FEC Identification Number C00698126 Transaction ID : SB21B.4445
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement COMPLIANCE CONSULTING		Category/Type 001
Candidate Name 1820 PAC		Amount of Each Disbursement this Period 4572.00
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

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

12692.99

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)
1820 PAC

Full Name (Last, First, Middle Initial)

A. ANEDOT

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		09		2020

Mailing Address **1920 MCKINNEY AVENUE
7TH FLOOR**

FEC Identification Number

C C00698126

City **DALLAS** State **TX** Zip Code **75201**

Transaction ID : SB21B.4359

Purpose of Disbursement
CREDIT CARD FEES

001
Category/
Type

Amount of Each Disbursement this Period

5400.90

Candidate Name
1820 PAC

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2020

Mailing Address **1920 MCKINNEY AVENUE
7TH FLOOR**

FEC Identification Number

C C00698126

City **DALLAS** State **TX** Zip Code **75201**

Transaction ID : SB21B.4394

Purpose of Disbursement
CREDIT CARD FEES

001
Category/
Type

Amount of Each Disbursement this Period

3200.90

Candidate Name
1820 PAC

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

Full Name (Last, First, Middle Initial)

C. ARISTEIA GROUP INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		05		2020

Mailing Address **1020 N. FAIRFAX STREET
SUITE 201**

FEC Identification Number

C C00698126

City **ALEXANDRIA** State **VA** Zip Code **22314**

Transaction ID : SB21B.4446

Purpose of Disbursement
FUNDRAISING CONSULTING

001
Category/
Type

Amount of Each Disbursement this Period

5000.00

Candidate Name
1820 PAC

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

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

13601.80

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)
1820 PAC

Full Name (Last, First, Middle Initial)
A. BIG DOG STRATEGIES, LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		31		2020

Mailing Address **141 ELM STREET
SUITE 500**

City **BUFFALO** State **NY** Zip Code **14203**

Purpose of Disbursement
COMMUNICATIONS CONSULTING

001
Category/ Type

FEC Identification Number

C	C00698126
----------	------------------

Transaction ID : SB21B.4375

Amount of Each Disbursement this Period

10000.00

Memo Item

Candidate Name
1820 PAC

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)
B. BIG DOG STRATEGIES, LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2020

Mailing Address **141 ELM STREET
SUITE 500**

City **BUFFALO** State **NY** Zip Code **14203**

Purpose of Disbursement
CAMPAIGN CONSULTING

001
Category/ Type

FEC Identification Number

C	C00698126
----------	------------------

Transaction ID : SB21B.4435

Amount of Each Disbursement this Period

10000.00

Memo Item

Candidate Name
1820 PAC

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)
C. CHAIN BRIDGE BANK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		18		2020

Mailing Address **1445A LAUGHLIN AVENUE**

City **MCLEAN** State **VA** Zip Code **22101**

Purpose of Disbursement
BANK FEES

001
Category/ Type

FEC Identification Number

C	C00698126
----------	------------------

Transaction ID : SB21B.4487

Amount of Each Disbursement this Period

20.00

Memo Item

Candidate Name
1820 PAC

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

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

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

20020.00

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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)
1820 PAC

Full Name (Last, First, Middle Initial) A. FOLEY & LARDNER LLP		Date of Disbursement MM / DD / YYYY 07 / 22 / 2020
Mailing Address 3000 K STREET, N.W. SUITE 600		FEC Identification Number C C00698126 Transaction ID : SB21B.4371 Amount of Each Disbursement this Period 693.00
City WASHINGTON	State DC	Zip Code 20007
Purpose of Disbursement LEGAL CONSULTING		Category/ Type 001
Candidate Name 1820 PAC		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. FOLEY & LARDNER LLP		Date of Disbursement MM / DD / YYYY 08 / 30 / 2020
Mailing Address 3000 K STREET, N.W. SUITE 600		FEC Identification Number C C00698126 Transaction ID : SB21B.4434 Amount of Each Disbursement this Period 4257.00
City WASHINGTON	State DC	Zip Code 20007
Purpose of Disbursement LEGAL CONSULTING		Category/ Type 001
Candidate Name 1820 PAC		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) C. NORTH STAR OPINION RESEARCH, INC.		Date of Disbursement MM / DD / YYYY 09 / 11 / 2020
Mailing Address 112 NORTH ALFRED STREET		FEC Identification Number C C00698126 Transaction ID : SB21B.4462 Amount of Each Disbursement this Period 30000.00
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement POLLING		Category/ Type 005
Candidate Name 1820 PAC		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:		

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

34950.00

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)
1820 PAC

A. SCR AND ASSOCIATES, LLC

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 100 TRADECENER
SUITE G-700

M M M	/	D D D	/	Y Y Y Y Y
07		02		2020

City
WOBURN

State
MA

Zip Code
01801

FEC Identification Number

Purpose of Disbursement
FUNDRAISING CONSULTING

C	C00698126
Transaction ID : SB21B.4346	
Amount of Each Disbursement this Period	
5000.00	
<input type="checkbox"/> Memo Item	

Candidate Name
1820 PAC

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B. SCR AND ASSOCIATES, LLC

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 100 TRADECENER
SUITE G-700

M M M	/	D D D	/	Y Y Y Y Y
07		17		2020

City
WOBURN

State
MA

Zip Code
01801

FEC Identification Number

Purpose of Disbursement
FUNDRAISING CONSULTING

C	C00698126
Transaction ID : SB21B.4365	
Amount of Each Disbursement this Period	
500.00	
<input type="checkbox"/> Memo Item	

Candidate Name
1820 PAC

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

C. SCR AND ASSOCIATES, LLC

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 100 TRADECENER
SUITE G-700

M M M	/	D D D	/	Y Y Y Y Y
09		29		2020

City
WOBURN

State
MA

Zip Code
01801

FEC Identification Number

Purpose of Disbursement
FUNDRAISING CONSULTING

C	C00698126
Transaction ID : SB21B.4517	
Amount of Each Disbursement this Period	
5000.00	
<input type="checkbox"/> Memo Item	

Candidate Name
1820 PAC

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

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

10500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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)
1820 PAC

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

Mailing Address 5918 4TH STREET NW

City WASHINGTON State DC Zip Code 20011

Purpose of Disbursement
FUNDRAISING CONSULTING

Category/
Type

Candidate Name
1820 PAC

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.4345

Amount of Each Disbursement this Period

Memo Item

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

Mailing Address 5918 4TH STREET NW

City WASHINGTON State DC Zip Code 20011

Purpose of Disbursement
FUNDRAISING CONSULTING

Category/
Type

Candidate Name
1820 PAC

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.4364

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)
C. THE MORNING GROUP

Mailing Address 5918 4TH STREET NW

City WASHINGTON State DC Zip Code 20011

Purpose of Disbursement
FUNDRAISING CONSULTING

Category/
Type

Candidate Name
1820 PAC

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.4376

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)
1820 PAC

A. THE MORNING GROUP

Full Name (Last, First, Middle Initial)

Mailing Address 5918 4TH STREET NW

City
WASHINGTON

State
DC

Zip Code
20011

Purpose of Disbursement
FUNDRAISING CONSULTING

001

Category/
Type

Candidate Name
1820 PAC

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
08	/	17	/	2020

FEC Identification Number

C C00698126

Transaction ID : SB21B.4407

Amount of Each Disbursement this Period

21109.07

Memo Item

B. THE MORNING GROUP

Full Name (Last, First, Middle Initial)

Mailing Address 5918 4TH STREET NW

City
WASHINGTON

State
DC

Zip Code
20011

Purpose of Disbursement
FUNDRAISING CONSULTING

001

Category/
Type

Candidate Name
1820 PAC

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
08	/	31	/	2020

FEC Identification Number

C C00698126

Transaction ID : SB21B.4442

Amount of Each Disbursement this Period

129250.00

Memo Item

C. THE MORNING GROUP

Full Name (Last, First, Middle Initial)

Mailing Address 5918 4TH STREET NW

City
WASHINGTON

State
DC

Zip Code
20011

Purpose of Disbursement
FUNDRAISING CONSULTING

001

Category/
Type

Candidate Name
1820 PAC

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
09	/	14	/	2020

FEC Identification Number

C C00698126

Transaction ID : SB21B.4470

Amount of Each Disbursement this Period

11500.00

Memo Item

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

161859.07

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)
1820 PAC

A. THE MORNING GROUP

Full Name (Last, First, Middle Initial)

Mailing Address 5918 4TH STREET NW

City
WASHINGTON

State
DC

Zip Code
20011

Purpose of Disbursement
FUNDRAISING CONSULTING

001

Category/
Type

Candidate Name
1820 PAC

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 28 / 2020

FEC Identification Number

C C00698126

Transaction ID : SB21B.4512

Amount of Each Disbursement this Period

105500.00

Memo Item

B. UPT STRATEGIES

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 31403

City
CHARLESTON

State
SC

Zip Code
29417

Purpose of Disbursement
WEBSITE

001

Category/
Type

Candidate Name
1820 PAC

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 10 / 2020

FEC Identification Number

C C00698126

Transaction ID : SB21B.4360

Amount of Each Disbursement this Period

203.52

Memo Item

C. VANDENBERG AND ASSOCIATES

Full Name (Last, First, Middle Initial)

Mailing Address 3927 ELM STREET

City
LONG BEACH

State
CA

Zip Code
90807

Purpose of Disbursement
FUNDRAISING CONSULTING

001

Category/
Type

Candidate Name
1820 PAC

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2020

FEC Identification Number

C C00698126

Transaction ID : SB21B.4443

Amount of Each Disbursement this Period

1750.00

Memo Item

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

107453.52

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)
1820 PAC

Full Name (Last, First, Middle Initial) A. WINRED		Date of Disbursement MM / DD / YYYY 08 / 05 / 2020
Mailing Address PO BOX 9891		FEC Identification Number C00698126 Transaction ID : SB21B.4385
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement CREDIT CARD FEES		Category/Type 001
Candidate Name 1820 PAC		Amount of Each Disbursement this Period 761.20
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) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. WINRED		Date of Disbursement MM / DD / YYYY 08 / 12 / 2020
Mailing Address PO BOX 9891		FEC Identification Number C00698126 Transaction ID : SB21B.4406
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement CREDIT CARD FEES		Category/Type 001
Candidate Name 1820 PAC		Amount of Each Disbursement this Period 192.50
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) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. WINRED		Date of Disbursement MM / DD / YYYY 08 / 24 / 2020
Mailing Address PO BOX 9891		FEC Identification Number C00698126 Transaction ID : SB21B.4438
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement CREDIT CARD FEES		Category/Type 001
Candidate Name 1820 PAC		Amount of Each Disbursement this Period 190.30
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) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....▶	1144.00
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)
1820 PAC

Full Name (Last, First, Middle Initial)

A. WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement
CREDIT CARD FEES

Category/
Type

Candidate Name
1820 PAC

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
09 / 02 / 2020

FEC Identification Number
C C00698126
Transaction ID : SB21B.4447
Amount of Each Disbursement this Period
525.30

Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement
CREDIT CARD FEES

Category/
Type

Candidate Name
1820 PAC

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
09 / 10 / 2020

FEC Identification Number
C C00698126
Transaction ID : SB21B.4465
Amount of Each Disbursement this Period
593.40

Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement
CREDIT CARD FEES

Category/
Type

Candidate Name
1820 PAC

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
09 / 17 / 2020

FEC Identification Number
C C00698126
Transaction ID : SB21B.4500
Amount of Each Disbursement this Period
19.30

Memo Item

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

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

1138.00

**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)
1820 PAC

Full Name (Last, First, Middle Initial)

A. WINRED

Mailing Address PO BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219

Purpose of Disbursement
CREDIT CARD FEES

001

Category/
Type

Candidate Name
1820 PAC

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2020

FEC Identification Number

C C00698126

Transaction ID : SB21B.4532

Amount of Each Disbursement this Period

380.30

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

380.30

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

463239.68

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) 1820 PAC	FEC IDENTIFICATION NUMBER ▼ C C00698126
--	--

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

Full Name of Payee <input type="checkbox"/> Memo Item SRCP MEDIA, INC.	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 201 N UNION STREET SUITE 200	Amount <input type="text"/> 1078642.00 Transaction ID : SE.4341 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City ALEXANDRIA State VA Zip Code 22314	
Purpose of Expenditure MEDIA PLACEMENT Category/Type <input type="text"/> 004	
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose GIDEON, SARA, , ,	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: ME
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 3083387.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item SRCP MEDIA, INC.	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 201 N UNION STREET SUITE 200	Amount <input type="text"/> 1000052.00 Transaction ID : SE.4377 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City ALEXANDRIA State VA Zip Code 22314	
Purpose of Expenditure MEDIA PLACEMENT Category/Type <input type="text"/> 004	
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose GIDEON, SARA, , ,	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: ME
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 1000052.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 2078694.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

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

DATWYLER, THOMAS, , ,

[Electronically Filed]

Date / /

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
1820 PAC
FEC IDENTIFICATION NUMBER
C C00698126

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

Full Name of Payee SRCP MEDIA, INC.
Mailing Address 201 N UNION STREET SUITE 200
City ALEXANDRIA State VA Zip Code 22314
Purpose of Expenditure MEDIA PLACEMENT Category/Type 004
Name of Federal Candidate: GIDEON, SARA, ,
Calendar Year-To-Date Per Election for Office Sought 2021606.00
Disbursement For: General 2020

Full Name of Payee SRCP MEDIA, INC.
Mailing Address 201 N UNION STREET SUITE 200
City ALEXANDRIA State VA Zip Code 22314
Purpose of Expenditure MEDIA PRODUCTION Category/Type 004
Name of Federal Candidate: GIDEON, SARA, ,
Calendar Year-To-Date Per Election for Office Sought 2043176.00
Disbursement For: General 2020

(a) SUBTOTAL of Itemized Independent Expenditures 1043124.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

DATWYLER, THOMAS, ,

[Electronically Filed]

Date 10 / 13 / 2020

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) 1820 PAC	FEC IDENTIFICATION NUMBER ▼ C C00698126
--	--

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

Full Name of Payee <input type="checkbox"/> Memo Item SRCP MEDIA, INC.	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 201 N UNION STREET SUITE 200	Amount <input type="text"/>
City ALEXANDRIA State VA Zip Code 22314	Transaction ID : SE.4484 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure MEDIA PLACEMENT Category/Type <input type="text"/>	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <input type="text"/> State: <input type="text"/>
Name of Federal Candidate: GIDEON, SARA, , ,	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination
Mailing Address	Amount
City State Zip Code	Date of Disbursement or Obligation
Purpose of Expenditure Category/Type	Name of Federal Candidate: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate:	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: State:
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

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

DATWYLER, THOMAS, , , *[Electronically Filed]* Date / /

Signature