

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED FEC MAIL CENTER 2020 JAN 31 AM 9:37

Office Use Only

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

12FE4M5

Committee for American Sovereignty

ADDRESS (number and street)

650 TOWN CENTER DRIVE, 12TH FLOOR

Check if different than previously reported. (ACC)

COSTA MESA

CA

92626

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C00614370

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 07/01/2019

through

MM/DD/YYYY 12/31/2019

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

Jensen, Pamela, . . .

Type or Print Name of Treasurer

Signature of Treasurer

Jensen, Pamela, . . .

Handwritten signature of Pamela Jensen

Date

MM/DD/YYYY 01/30/2020

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

Office Use Only

FEC FORM 3X Rev. 05/2016

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Committee for American Sovereignty

Report Covering the Period: From:

MM / DD / YYYY
07 / 01 / 2019

To:

MM / DD / YYYY
12 / 31 / 2019

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2019	0.00	0.00
(b) Cash on Hand at Beginning of Reporting Period	0.00	
(c) Total Receipts (from Line 19)	0.00	0.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	0.00	0.00
7. Total Disbursements (from Line 31)	0.00	0.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	0.00	0.00
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	17356.09	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Committee for American Sovereignty

Report Covering the Period: From: MM 07 DD 01 YYYY 2019 To: MM 12 DD 31 YYYY 2019

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized.....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	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 Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶	0.00	0.00
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)).....▶	0.00	0.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	0.00	0.00

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

DETAILED SUMMARY PAGE
of Disbursements

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

2025 RELEASE UNDER E.O. 14176

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

NAME OF COMMITTEE (In Full)
Committee for American Sovereignty

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Economic Development Department			Nature of Debt (Purpose): Payroll Withholdings and Employer Payroll Taxes
Mailing Address P. O. Box 989071			
City Sacramento	State CA	Zip Code 96798	

Outstanding Balance Beginning This Period 656.96	Transaction ID : SD10.8060	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 656.96

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Economic Development Department			Nature of Debt (Purpose): Payroll Withholdings and Employer Payroll Taxes
Mailing Address P. O. Box 989071			
City Sacramento.	State CA	Zip Code 96798	

Outstanding Balance Beginning This Period 926.92	Transaction ID : SD10.8061	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 926.92

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Economic Development Department			Nature of Debt (Purpose): Payroll Withholdings and Employer Payroll Taxes
Mailing Address P. O. Box 989071			
City Sacramento	State CA	Zip Code 96798	

Outstanding Balance Beginning This Period 348.84	Transaction ID : SD10.8062	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 348.84

1) SUBTOTALS This Period This Page (optional)..... ▶	1932.72
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 7 OF 11
	FOR LINE NUMBER: (check only one)
	<input type="checkbox"/> 9
	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Committee for American Sovereignty

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Economic Development Department			Nature of Debt (Purpose): Interest
Mailing Address P. O. Box 989071			
City Sacramento	State CA	Zip Code 96798	

Outstanding Balance Beginning This Period 43.24	Transaction ID : SD10.8087	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 43.24

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Economic Development Department			Nature of Debt (Purpose): Penalties and interest on late payroll taxes
Mailing Address P. O. Box 989071			
City Sacramento	State CA	Zip Code 96798	

Outstanding Balance Beginning This Period 741.61	Transaction ID : SD10.8121	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 741.61

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Economic Development Department			Nature of Debt (Purpose): Interest and Penalties on Payroll Taxes
Mailing Address P. O. Box 989071			
City Sacramento	State CA	Zip Code 96798	

Outstanding Balance Beginning This Period 223.00	Transaction ID : SD10.8217	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 223.00

1) SUBTOTALS This Period This Page (optional).....▶	1007.85
2) TOTALS This Period (last page this line number only).....▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 8 OF 11
	FOR LINE NUMBER: (check only one)
	<input type="checkbox"/> 9
	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Committee for American Sovereignty

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Economic Development Department			Nature of Debt (Purpose): Interest on taxes due
Mailing Address P. O. Box 989071			
City Sacramento	State CA	Zip Code 96798	

Outstanding Balance Beginning This Period <input type="text" value="50.00"/>	Transaction ID : SD10.8221	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="50.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Economic Development Department			Nature of Debt (Purpose): Interest on Balance Due
Mailing Address P. O. Box 989071			
City Sacramento	State CA	Zip Code 96798	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID : SD10.8226	
Amount Incurred This Period <input type="text" value="75.60"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="75.60"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Internal Revenue Service			Nature of Debt (Purpose): Payroll Withholding and Employer Payroll Taxes October 2016
Mailing Address Service Center			
City Ogden	State UT	Zip Code 84201	

Outstanding Balance Beginning This Period <input type="text" value="5975.91"/>	Transaction ID : SD10.8056	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="5975.91"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="6101.51"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 9 OF 11
	FOR LINE NUMBER: (check only one)
	<input type="checkbox"/> 9
	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Committee for American Sovereignty

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Internal Revenue Service			Nature of Debt (Purpose): Payroll Withholdings and Employer Payroll Taxes Nov 2016
Mailing Address Service Center			
City Ogden	State UT	Zip Code 84201	

Outstanding Balance Beginning This Period 3690.05	Transaction ID : SD10.8057
Amount Incurred This Period 0.00	Payment This Period 0.00
Outstanding Balance at Close of This Period 3690.05	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Internal Revenue Service			Nature of Debt (Purpose): Payroll Withholdings and Employer Payroll taxes Dec 2016
Mailing Address Service Center			
City Ogden	State UT	Zip Code 84201	

Outstanding Balance Beginning This Period 1427.27	Transaction ID : SD10.8058
Amount Incurred This Period 0.00	Payment This Period 0.00
Outstanding Balance at Close of This Period 1427.27	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Internal Revenue Service			Nature of Debt (Purpose): interest
Mailing Address Service Center			
City Ogden	State UT	Zip Code 84201	

Outstanding Balance Beginning This Period 75.78	Transaction ID : SD10.8086
Amount Incurred This Period 0.00	Payment This Period 0.00
Outstanding Balance at Close of This Period 75.78	

1) SUBTOTALS This Period This Page (optional).....	5193.10
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Committee for American Sovereignty

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Internal Revenue Service			Nature of Debt (Purpose): Interest on balance due
Mailing Address Service Center			
City Ogden	State UT	Zip Code 84201	

Outstanding Balance Beginning This Period 75.78	Transaction ID : SD10.8120	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 75.78

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Internal Revenue Service			Nature of Debt (Purpose): Interest and Penalties on payroll taxes
Mailing Address Service Center			
City Ogden	State UT	Zip Code 84201	

Outstanding Balance Beginning This Period 2864.00	Transaction ID : SD10.8216	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2864.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Internal Revenue Service			Nature of Debt (Purpose): Interest on taxes due
Mailing Address Service Center			
City Ogden	State UT	Zip Code 84201	

Outstanding Balance Beginning This Period 75.78	Transaction ID : SD10.8220	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 75.78

1) SUBTOTALS This Period This Page (optional)..... ▶	3015.56
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)
Committee for American Sovereignty

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Internal Revenue Service			Nature of Debt (Purpose): Interest on balance due
Mailing Address Service Center			
City Ogden	State UT	Zip Code 84201	

Outstanding Balance Beginning This Period		Transaction ID : SD10.8225	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
105.35	0.00	105.35	

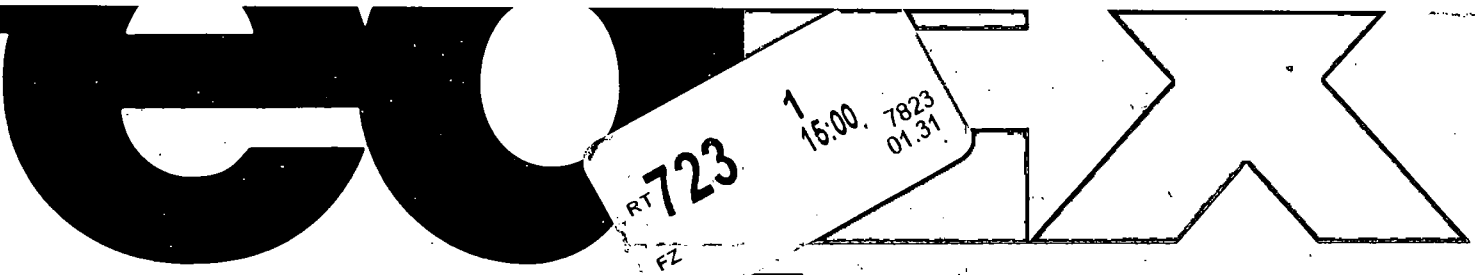
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

1) SUBTOTALS This Period This Page (optional)..... ▶	105.35
2) TOTALS This Period (last page this line number only)..... ▶	17356.09
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... ▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	17356.09



Express

RT 723
FZ
1 15:00 7823
01.31

RECEIVED
FED MAIL CENTER
JAN 31 AM 9:37

ORIGIN ID:APVA (949) 910-0000
PAHELJA JENSEN
650 TOWN CENTER DR STE 1200
COSTA MESA, CA 92626
UNITED STATES US

SHIP DATE: 30JAN20
ACTUAL WT: 0.10 LB
CND: 6992550/5SF02021
BILL CREDIT CARD

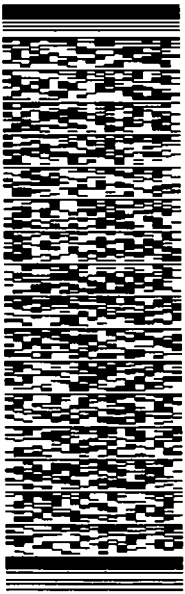
TO FEDERAL ELECTION COMMISSION

1050 FIRST ST NE

WASHINGTON DC 20002

(000) 000-0000 REF: 1

POST DEPT: 1



AN10811002102F

TRK# 3900 5193 7823
0201

STANDARD OVERNIGHT

FRI - 31 JAN 3:00P

XC YKNA

20002
DC-US IAD



NONO: 04: 14: 0M: 00M: 10: 04: 00

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Date of Receipt
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>FedEx</i>	Shipping Date <i>1/30/20</i>
	Next Business Day Delivery <input checked="" type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

PREPARER
(3/2015)

MP

1/31/20
DATE PREPARED

NONO OF MHI GA 00410004