

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**
AMERICA FIRST ACTION, INC.

ADDRESS (number and street) **1400 Crystal Drive**
Suite 850
 Check if different than previously reported. (ACC) **Arlington VA 22202**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00637512 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 / / in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on **03** / **13** / **2018** in the State of **PA**

5. Covering Period **01** / **02** / **2018** through **04** / **02** / **2018**

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

Signature of Treasurer PROCH, JON, , , [Electronically Filed] Date **04** / **12** / **2018**

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

AMERICA FIRST ACTION, INC.

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="2018"/>		1899129.69
(b) Cash on Hand at Beginning of Reporting Period.....	1899905.69	
(c) Total Receipts (from Line 19)	4773474.46	4774250.46
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	6673380.15	6673380.15
7. Total Disbursements (from Line 31).....	1555347.38	1555347.38
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	5118032.77	5118032.77
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)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

AMERICA FIRST ACTION, INC.

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	4722451.00	4722451.00
(ii) Unitemized	45556.97	46332.97
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	4768007.97	4768783.97
(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)	4768007.97	4768783.97
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).....	5466.49	5466.49
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)).....▶	4773474.46	4774250.46
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	4773474.46	4774250.46

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	450640.35	450640.35
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	450640.35	450640.35
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)	1103797.03	1103797.03
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	910.00	910.00
(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)).....	910.00	910.00
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)) ..	1555347.38	1555347.38
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1555347.38	1555347.38

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)	4768007.97	4768783.97
34. Total Contribution Refunds (from Line 28(d))	910.00	910.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4767097.97	4767873.97
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	450640.35	450640.35
37. Offsets to Operating Expenditures (from Line 15, page 3).....	5466.49	5466.49
38. Net Operating Expenditures (subtract Line 37 from Line 36)	445173.86	445173.86

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XN

Transaction ID :

The disbursements made to Parscale Strategy LLC on March 5, 2018 and March 13, 2018 were for services performed prior to February 27, 2018.

Form/Schedule:

Transaction ID:

**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 112
	<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)
AMERICA FIRST ACTION, INC.

A. AMERICA FIRST POLICIES, INC.

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

Mailing Address 1400 CRYSTAL DRIVE
SUITE 850

City ARLINGTON State VA Zip Code 22202

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 ▼
85201.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 02 / 2018

Transaction ID : SA11AI.17071

Amount of Each Receipt this Period
85201.00

Memo Item
 IN-KIND: PAYROLL / OFFICE EXPENSES/ OTHER SHARED DIRECT EXPENSES

B. BARTON, TIMOTHY, L, ,

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

Mailing Address 13901 MIDWAY
STE 102-LB 243

City DALLAS State TX Zip Code 75244

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

Name of Employer (for Individual) Occupation (for Individual)
 JMJ DEVELOPMENT PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 01 / 2018

Transaction ID : SA11AI.16358

Amount of Each Receipt this Period
50000.00

Memo Item

C. BAXTER, KEN, , ,

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

Mailing Address 8440 CARMEL RIDGE COURT

City LAS VEGAS State NV Zip Code 89113

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

Name of Employer (for Individual) Occupation (for Individual)
 APOLLO REALTY INVESTOR

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2018

Transaction ID : SA11AI.16472

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	135301.00
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 8 OF 112
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. BIGGER, DON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 591 PUTTER LN
 City LONGBOAT KEY State FL Zip Code 34228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MULTAX CORPORATION Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 31 / 2018
Transaction ID : SA11AI.15497
 Amount of Each Receipt this Period 250.00
 Memo Item

B. BISHOP, ROBERT, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 66 MIDDLE RD
 City PALM BEACH State FL Zip Code 33480
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IMPALA ASSET MANAGEMENT Occupation (for Individual) MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 01 / 09 / 2018
Transaction ID : SA11AI.14321
 Amount of Each Receipt this Period 50000.00
 Memo Item

C. BRAME, RANDALL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4964 BONITA PARK TRL
 City EVERGREEN State CO Zip Code 06896
 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 ▼ 250.00

Date of Receipt 01 / 13 / 2018
Transaction ID : SA11AI.14567
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	50500.00
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 112
	(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)
AMERICA FIRST ACTION, INC.

A. BREEDEN, MITCH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1920 SADDLEHORN LANE
 City MANSFIELD State TX Zip Code 76063
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 01 / 13 / 2018
Transaction ID : SA11AI.14602
 Amount of Each Receipt this Period 350.00
 Memo Item

B. CALDERON, ERNESTINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 146 ROCK HILL CHURCH RD
 City STAFFORD State VA Zip Code 22556
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DON Occupation (for Individual) LOG MGMT SPECIALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 29 / 2018
Transaction ID : SA11AI.16292
 Amount of Each Receipt this Period 100.00
 Memo Item

C. CRUZ, JUAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 444 SE 5TH TERRACE
 City POMPANO BEACH State FL Zip Code 33060
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FLORIDIAN COASTLINE GROUP Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 12 / 2018
Transaction ID : SA11AI.14481
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	700.00
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 10 OF 112
	(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)
AMERICA FIRST ACTION, INC.

A. DANIELS, GEORGE, G, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 526 THORPE RD
 City ORLANDO State FL Zip Code 32824
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DANIELS MANUFACTURING CORPORATION Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 51000.00

Date of Receipt **01 / 10 / 2018**
Transaction ID : SA11AI.14326
 Amount of Each Receipt this Period 51000.00
 Memo Item

B. DEUBNER, WAYNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4080 HIGHWAY 344N
 City BROCKTON State MT Zip Code 59213
 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 ▼ 250.00

Date of Receipt **02 / 09 / 2018**
Transaction ID : SA11AI.15914
 Amount of Each Receipt this Period 250.00
 Memo Item

C. DORAN, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 753 FARNHAM LANE
 City VIRGINIA BEACH State VA Zip Code 23455
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MELTON TRUCK LINES Occupation (for Individual) OTR DRIVER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **03 / 23 / 2018**
Transaction ID : SA11AI.16611
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 51500.00
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 11 OF 112
	(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)
AMERICA FIRST ACTION, INC.

A. DOUGLASS, WILLIAM, S, , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1616 SE 7TH ST
 City FORT LAUDERDALE State FL Zip Code 33316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 01 / 02 / 2018
Transaction ID : SA11AI.14240
 Amount of Each Receipt this Period 50000.00
 Memo Item

B. ETEMADI, ALIREZA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2258 FRONT RANGE CT
 City ERIE State CO Zip Code 80516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 05 / 2018
Transaction ID : SA11AI.15898
 Amount of Each Receipt this Period 100.00
 Memo Item

C. ETEMADI, ALIREZA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2258 FRONT RANGE CT
 City ERIE State CO Zip Code 80516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 03 / 05 / 2018
Transaction ID : SA11AI.16369
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	50200.00
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 112
	<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)
AMERICA FIRST ACTION, INC.

A. FERTITTA, FRANK, J, , III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1505 S. PAVILION CENTER DRIVE

City LAS VEGAS	State NV	Zip Code 89135
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RED ROCK RESORTS	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		13		2018

Transaction ID : SA11AI.16394

Amount of Each Receipt this Period
1000000.00

Memo Item

B. FERTITTA, LORENZO, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1505 S. PAVILION CENTER DR

City LAS VEGAS	State NV	Zip Code 89135
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STATION CASINOS	Occupation (for Individual) VICE-CHAIRMAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		13		2018

Transaction ID : SA11AI.16392

Amount of Each Receipt this Period
1000000.00

Memo Item

C. FULLER, JOSEPH, LINDSAY, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 204 WEST RT 38

City MOORESTOWN	State NJ	Zip Code 08057
--------------------	-------------	-------------------

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

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) INSURANCE & SECURITIES SALES &
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		08		2018

Transaction ID : SA11AI.16381

Amount of Each Receipt this Period
75.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	2000075.00
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 13 OF 112
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. GAGNEBIN, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 GARDEN ST
 City CAMBRIDGE State MA Zip Code 02138
 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 ▼ 250.00

Date of Receipt 01 / 31 / 2018
Transaction ID : SA11AI.15499
 Amount of Each Receipt this Period 250.00
 Memo Item

B. GOLDBLATT, SIDNEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1243 LAUREL VIEW DR
 City JOHNSTOWN State PA Zip Code 15905
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GOLDBLATT SYSTEMS Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 26 / 2018
Transaction ID : SA11AI.16658
 Amount of Each Receipt this Period 500.00
 Memo Item

C. GOLDSTEIN, PAULA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1600 POST OAK BLVD UNIT 1803
 City HOUSTON State TX Zip Code 01803
 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 ▼ 250.00

Date of Receipt 03 / 31 / 2018
Transaction ID : SA11AI.16324
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 1000.00
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 112
	<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)
AMERICA FIRST ACTION, INC.

A. HAMM, HAROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1295
 City OKLAHOMA CITY State OK Zip Code 73101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONTINENTAL RESOURCES Occupation (for Individual) CEO/CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500000.00

Date of Receipt 01 / 12 / 2018
Transaction ID : SA11AI.14485
 Amount of Each Receipt this Period 500000.00
 Memo Item

B. HAWKINS, GREGG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 113 SHADOW LAKE DRIVE
 City BUCKHEAD State GA Zip Code 30625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE SILVER MOON Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 14 / 2018
Transaction ID : SA11AI.16419
 Amount of Each Receipt this Period 100.00
 Memo Item

C. HODGE, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2180 IDLEWILD RD
 City PALM BEACH GARDENS State FL Zip Code 33410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE WAYS BOATYARD Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 03 / 07 / 2018
Transaction ID : SA11AI.16374
 Amount of Each Receipt this Period 75.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 500175.00
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 112
	<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)
AMERICA FIRST ACTION, INC.

A. JERGER, BRET, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1310 E ELWIN RD

City DECATUR	State IL	Zip Code 62521
-----------------	-------------	-------------------

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

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) PEDIATRIC DENTIST
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		31		2018

Transaction ID : SA11AI.16326

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 4111 MANORFIELD

City SEABROOK	State TX	Zip Code 77586
------------------	-------------	-------------------

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 ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		01		2018

Transaction ID : SA11AI.16354

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 4111 MANORFIELD

City SEABROOK	State TX	Zip Code 77586
------------------	-------------	-------------------

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 ▼
400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		01		2018

Transaction ID : SA11AI.16825

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	450.00
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 112
	<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)
AMERICA FIRST ACTION, INC.

A. MARTIN, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 RODRIC DRIVE
 City DOVER State DE Zip Code 19901
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2018
Transaction ID : SA11AI.16293
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. MAX KING REALTY, LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8240 EXCHANGE DRIVE STE. CLOUD 9
 City ORLANDO State FL Zip Code 32809
 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 ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 12 / 2018
Transaction ID : SA11AI.14483
 Amount of Each Receipt this Period
 1000.00
 Memo Item

C. MCGEE, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2006
 City COLUMBUS State IN Zip Code 47202
 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 ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2018
Transaction ID : SA11AI.15503
 Amount of Each Receipt this Period
 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	2100.00
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 17 OF 112
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. MEDVE, JAKOB, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3401 LEE PARKWAY, 2203
 2203
 City DALLAS State TX Zip Code 75219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE MEDVE GROUP Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 13 / 2018
Transaction ID : SA11AI.16409
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. MELLON, MATTHEW, T, , II
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 W 53 ST
 City NEW YORK State NY Zip Code 10019
 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 ▼ 1000000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 23 / 2018
Transaction ID : SA11AI.16458
 Amount of Each Receipt this Period
 1000000.00
 Memo Item

C. MEUSER, STANLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5050 N OCEAN DR
 City WEST PALM BEACH State FL Zip Code 33404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PRIDE MOBILITY PROD INV Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2018
Transaction ID : SA11AI.16328
 Amount of Each Receipt this Period
 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 1000600.00
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 112
<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)
AMERICA FIRST ACTION, INC.

A. PICKARD, TINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 430 PICKARD RD
 City FORT VALLEY State GA Zip Code 31030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PICKARD SALES CO Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 07 / 2018
Transaction ID : SA11AI.16375
 Amount of Each Receipt this Period 100.00
 Memo Item

B. RASTIN, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 243
 City MOUNT VERNON State OH Zip Code 43050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARIEL CORPORATION Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 125000.00

Date of Receipt 03 / 26 / 2018
Transaction ID : SA11AI.16469
 Amount of Each Receipt this Period 125000.00
 Memo Item

C. ROACH, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1093 BIG TREE RD
 City ST. HELENA State CA Zip Code 94574
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MENO ENTERPRISES Occupation (for Individual) REAL ESTATE DEVELOPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 24 / 2018
Transaction ID : SA11AI.16656
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	125350.00
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 19 OF 112
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. RUSSELL, LELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2901 S. BAYSHORE DR.
 #5B
 City MIAMI State FL Zip Code 33133
 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 ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2018
Transaction ID : SA11AI.16332
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. SANDBROOK, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2500 N HOUSTON ST APT 2804
 City DALLAS State TX Zip Code 75219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US CONCRETE, INC Occupation (for Individual) PRESIDENT AND CEO
 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
 01 / 02 / 2018
Transaction ID : SA11AI.14238
 Amount of Each Receipt this Period
 25000.00
 Memo Item

C. SANDERS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7117 MARLAN DRIVE
 City ALEXANDRIA State VA Zip Code 22307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DAVITA Occupation (for Individual) GOVERNMENT AFFAIRS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 27 / 2018
Transaction ID : SA11AI.16662
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	25750.00
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 20 OF 112
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. SCHWARTZ, ARTHUR, BENJAMIN, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 610 W 42ND STREET 20E
 City NEW YORK State NY Zip Code 10036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AXIUM ADVISORS Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 01 / 26 / 2018
Transaction ID : SA11AI.15260
 Amount of Each Receipt this Period 50000.00
 Memo Item

B. SUTTON, NICHOLAS, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3465 N. PINES WAY STE#104
 City WILSON State WY Zip Code 83014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RESOLUTE ENERGY CORPORATION Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 03 / 22 / 2018
Transaction ID : SA11AI.16448
 Amount of Each Receipt this Period 100000.00
 Memo Item

C. TALCOTT, MARIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 186 ANTLER LANE
 City GOLDEN State CO Zip Code 80403
 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 ▼ 500.00

Date of Receipt 01 / 19 / 2018
Transaction ID : SA11AI.14865
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150500.00
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 112
	<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)
AMERICA FIRST ACTION, INC.

A. TALCOTT, MARIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 186 ANTLER LANE
 City GOLDEN State CO Zip Code 80403
 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 ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 19 / 2018
Transaction ID : SA11AI.15917
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. TOBIN, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8007 162ND AVE KPS
 City LONGBRANCH State WA Zip Code 98351
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE TOBIN GROUP, INC. Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2018
Transaction ID : SA11AI.16330
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. WALKER, PAMELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15604 HUBBARD
 City LIVONIA State MI Zip Code 48154
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WALGREENS Occupation (for Individual) PHARMACIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 20 / 2018
Transaction ID : SA11AI.15058
 Amount of Each Receipt this Period
 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1500.00
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 112
	<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)
AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. WARRIX, LORA, , ,		Date of Receipt MM / DD / YYYY 01 / 31 / 2018 Transaction ID : SA11AI.15501
Mailing Address 4500 FRANKLIN PIKE		Amount of Each Receipt this Period 500.00
City NASHVILLE	State TN	Zip Code 37204
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
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 ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. WARRIX, LORA, , ,		Date of Receipt MM / DD / YYYY 02 / 28 / 2018 Transaction ID : SA11AI.15918
Mailing Address 4500 FRANKLIN PIKE		Amount of Each Receipt this Period 500.00
City NASHVILLE	State TN	Zip Code 37204
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
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 ▼ 1000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. WARRIX, LORA, , ,		Date of Receipt MM / DD / YYYY 03 / 28 / 2018 Transaction ID : SA11AI.16669
Mailing Address 4500 FRANKLIN PIKE		Amount of Each Receipt this Period 500.00
City NASHVILLE	State TN	Zip Code 37204
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
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 ▼ 1500.00	

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
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 112
	<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)
AMERICA FIRST ACTION, INC.

A. WATTLES, GURDON, B, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 43 ROCKBRIDGE DR

City LITTLE COMPTON	State RI	Zip Code 02837
------------------------	-------------	-------------------

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 ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	02	/	2018

Transaction ID : SA11AI.15916

Amount of Each Receipt this Period
250.00

Memo Item

B. WRIGHT, KAREN, BUCHWALD, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 243

City MOUNT VERNON	State OH	Zip Code 43050
----------------------	-------------	-------------------

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

Name of Employer (for Individual) ARIEL CORPORATION	Occupation (for Individual) EXECUTIVE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	26	/	2018

Transaction ID : SA11AI.16467

Amount of Each Receipt this Period
125000.00

Memo Item

C. WYNN, STEPHEN, A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3131 LAS VEGAS BLVD S

City LAS VEGAS	State NV	Zip Code 89109
-------------------	-------------	-------------------

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

Name of Employer (for Individual) WYNN RESORTS	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	23	/	2018

Transaction ID : SA11AI.15254

Amount of Each Receipt this Period
500000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	625250.00
TOTAL This Period (last page this line number only).....	4722451.00

**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 24 OF 112
<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

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

NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. PETRA RMS

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

Mailing Address PO BOX 43709

City BIRMINGHAM	State AL	Zip Code 35243
--------------------	-------------	-------------------

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 ▼
5461.49

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	20	/	2018

Transaction ID : SA15.15919

Amount of Each Receipt this Period
5461.49

Memo Item
REFUND: INSURANCE

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).....	5461.49
TOTAL This Period (last page this line number only).....	5461.49

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. 1ST BANKCARD

Mailing Address **COMMERCIAL CARD PAYMENT PROCESSING
P.O. BOX 2818**

City **OMAHA** State **NE** Zip Code **68103-2818**

Purpose of Disbursement
CREDIT CARD PAYMENT: SEE MEMO ENTRIES

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
01 / 04 / 2018

FEC Identification Number

C
Transaction ID : SB21B.15510
Amount of Each Disbursement this Period
 4162.94

Memo Item

Full Name (Last, First, Middle Initial)

B. 1ST BANKCARD

Mailing Address **COMMERCIAL CARD PAYMENT PROCESSING
P.O. BOX 2818**

City **OMAHA** State **NE** Zip Code **68103-2818**

Purpose of Disbursement
CREDIT CARD PAYMENT: SEE MEMO ENTRIES

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
01 / 18 / 2018

FEC Identification Number

C
Transaction ID : SB21B.15511
Amount of Each Disbursement this Period
 1002.86

Memo Item

Full Name (Last, First, Middle Initial)

C. 1ST BANKCARD

Mailing Address **COMMERCIAL CARD PAYMENT PROCESSING
P.O. BOX 2818**

City **OMAHA** State **NE** Zip Code **68103-2818**

Purpose of Disbursement
CREDIT CARD PAYMENT: SEE MEMO ENTRIES

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
01 / 18 / 2018

FEC Identification Number

C
Transaction ID : SB21B.15512
Amount of Each Disbursement this Period
 7617.37

Memo Item

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

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

12783.17

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. 1ST BANKCARD

Mailing Address **COMMERCIAL CARD PAYMENT PROCESSING
P.O. BOX 2818**

City **OMAHA** State **NE** Zip Code **68103-2818**

Purpose of Disbursement
CREDIT CARD PAYMENT: SEE MEMO ENTRIES

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y
01 / 22 / 2018

FEC Identification Number

C
Transaction ID : SB21B.15513
Amount of Each Disbursement this Period
 1245.66

Memo Item

Full Name (Last, First, Middle Initial)

B. 1ST BANKCARD

Mailing Address **COMMERCIAL CARD PAYMENT PROCESSING
P.O. BOX 2818**

City **OMAHA** State **NE** Zip Code **68103-2818**

Purpose of Disbursement
CREDIT CARD PAYMENT: SEE MEMO ENTRIES

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y
01 / 31 / 2018

FEC Identification Number

C
Transaction ID : SB21B.15514
Amount of Each Disbursement this Period
 1136.60

Memo Item

Full Name (Last, First, Middle Initial)

C. 1ST BANKCARD

Mailing Address **COMMERCIAL CARD PAYMENT PROCESSING
P.O. BOX 2818**

City **OMAHA** State **NE** Zip Code **68103-2818**

Purpose of Disbursement
CREDIT CARD PAYMENT: SEE MEMO ENTRIES

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y
02 / 06 / 2018

FEC Identification Number

C
Transaction ID : SB21B.1592z
Amount of Each Disbursement this Period
 2628.14

Memo Item

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

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

5010.40

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. 1ST BANKCARD

Mailing Address **COMMERCIAL CARD PAYMENT PROCESSING
P.O. BOX 2818**

City **OMAHA** State **NE** Zip Code **68103-2818**

Purpose of Disbursement
CREDIT CARD PAYMENT: SEE MEMO ENTRIES

Candidate Name

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

Date of Disbursement

/ /
02 / 13 / 2018

FEC Identification Number

Transaction ID : SB21B.15923
Amount of Each Disbursement this Period
 773.63

Memo Item

Full Name (Last, First, Middle Initial)

B. 1ST BANKCARD

Mailing Address **COMMERCIAL CARD PAYMENT PROCESSING
P.O. BOX 2818**

City **OMAHA** State **NE** Zip Code **68103-2818**

Purpose of Disbursement
CREDIT CARD PAYMENT: SEE MEMO ENTRIES

Candidate Name

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

Date of Disbursement

/ /
02 / 23 / 2018

FEC Identification Number

Transaction ID : SB21B.15924
Amount of Each Disbursement this Period
 461.41

Memo Item

Full Name (Last, First, Middle Initial)

C. 1ST BANKCARD

Mailing Address **COMMERCIAL CARD PAYMENT PROCESSING
P.O. BOX 2818**

City **OMAHA** State **NE** Zip Code **68103-2818**

Purpose of Disbursement
CREDIT CARD PAYMENT: SEE MEMO ENTRIES

Candidate Name

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

Date of Disbursement

/ /
03 / 01 / 2018

FEC Identification Number

Transaction ID : SB21B.16671
Amount of Each Disbursement this Period
 693.30

Memo Item

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

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

1928.34

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. 1ST BANKCARD

Mailing Address **COMMERCIAL CARD PAYMENT PROCESSING
P.O. BOX 2818**

City **OMAHA** State **NE** Zip Code **68103-2818**

Purpose of Disbursement
CREDIT CARD PAYMENT: SEE MEMO ENTRIES

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 05 / 2018

FEC Identification Number

C
Transaction ID : SB21B.16671
Amount of Each Disbursement this Period
 663.73

Memo Item

Full Name (Last, First, Middle Initial)

B. 1ST BANKCARD

Mailing Address **COMMERCIAL CARD PAYMENT PROCESSING
P.O. BOX 2818**

City **OMAHA** State **NE** Zip Code **68103-2818**

Purpose of Disbursement
CREDIT CARD PAYMENT: SEE MEMO ENTRIES

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 07 / 2018

FEC Identification Number

C
Transaction ID : SB21B.16672
Amount of Each Disbursement this Period
 5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. 1ST BANKCARD

Mailing Address **COMMERCIAL CARD PAYMENT PROCESSING
P.O. BOX 2818**

City **OMAHA** State **NE** Zip Code **68103-2818**

Purpose of Disbursement
CREDIT CARD PAYMENT: SEE MEMO ENTRIES

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 09 / 2018

FEC Identification Number

C
Transaction ID : SB21B.16673
Amount of Each Disbursement this Period
 1242.97

Memo Item

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

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

6906.70

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. 1ST BANKCARD

Mailing Address **COMMERCIAL CARD PAYMENT PROCESSING
P.O. BOX 2818**

City **OMAHA** State **NE** Zip Code **68103-2818**

Purpose of Disbursement
CREDIT CARD PAYMENT: SEE MEMO ENTRIES

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.16674
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. 1ST BANKCARD

Mailing Address **COMMERCIAL CARD PAYMENT PROCESSING
P.O. BOX 2818**

City **OMAHA** State **NE** Zip Code **68103-2818**

Purpose of Disbursement
CREDIT CARD PAYMENT: SEE MEMO ENTRIES

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.16675
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. 1ST BANKCARD

Mailing Address **COMMERCIAL CARD PAYMENT PROCESSING
P.O. BOX 2818**

City **OMAHA** State **NE** Zip Code **68103-2818**

Purpose of Disbursement
CREDIT CARD PAYMENT: SEE MEMO ENTRIES

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.16676
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. AHEARN, JOSEPH, , ,		Date of Disbursement MM / DD / YYYY 02 / 21 / 2018
Mailing Address C/O AMERICA FIRST ACTION INC 1400 CRYSTAL DRIVE STE 850		FEC Identification Number C Transaction ID : SB21B.15935 Amount of Each Disbursement this Period 722.92
City ARLINGTON	State VA	
Purpose of Disbursement REIMBURSEMENT: SEE MEMO ENTRIES IF REQUIRED		Memo Item <input type="checkbox"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. AHEARN, JOSEPH, , ,		Date of Disbursement MM / DD / YYYY 03 / 28 / 2018
Mailing Address C/O AMERICA FIRST ACTION INC 1400 CRYSTAL DRIVE STE 850		FEC Identification Number C Transaction ID : SB21B.16692 Amount of Each Disbursement this Period 2484.02
City ARLINGTON	State VA	
Purpose of Disbursement REIMBURSEMENT: SEE MEMO ENTRIES IF REQUIRED		Memo Item <input type="checkbox"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. AMERICA FIRST POLICIES, INC.		Date of Disbursement MM / DD / YYYY 04 / 02 / 2018
Mailing Address 1400 CRYSTAL DRIVE SUITE 850		FEC Identification Number C Transaction ID : SB21B.17077 Amount of Each Disbursement this Period 85201.00
City ARLINGTON	State VA	
Purpose of Disbursement IN-KIND: PAYROLL / OFFICE EXPENSES/ OTHER SHARED DIRECT EXPENSES		Memo Item <input type="checkbox"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

88407.94

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. AMERICAN AIRLINES

Full Name (Last, First, Middle Initial)
AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement MASON REIMBURSEMENT [SB21B.15516]: TRAVEL: AIR

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 02 / 2017

FEC Identification Number: C
Transaction ID : SB21B.15590
Amount of Each Disbursement this Period: 464.20

Memo Item

B. AMERICAN AIRLINES

Full Name (Last, First, Middle Initial)
AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement WALSH REIMBURSEMENT [SB21B.15515]: TRAVEL: AIR

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 02 / 2017

FEC Identification Number: C
Transaction ID : SB21B.15595
Amount of Each Disbursement this Period: 567.11

Memo Item

C. AMERICAN AIRLINES

Full Name (Last, First, Middle Initial)
AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement MASON REIMBURSEMENT [SB21B.15516]: TRAVEL: AIR

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 03 / 2017

FEC Identification Number: C
Transaction ID : SB21B.15591
Amount of Each Disbursement this Period: 464.20

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 12 / 03 / 2017
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [] Transaction ID : SB21B.15592 Amount of Each Disbursement this Period [] 464.20
City FORT WORTH	State TX	Zip Code 76155
Purpose of Disbursement MASON REIMBURSEMENT [SB21B.15516]: TRAVEL: AIR		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 12 / 05 / 2017
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [] Transaction ID : SB21B.15594 Amount of Each Disbursement this Period [] 257.49
City FORT WORTH	State TX	Zip Code 76155
Purpose of Disbursement WALSH REIMBURSEMENT [SB21B.15515]: TRAVEL: AIR		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 12 / 06 / 2017
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [] Transaction ID : SB21B.15593 Amount of Each Disbursement this Period [] 67.66
City FORT WORTH	State TX	Zip Code 76155
Purpose of Disbursement WALSH REIMBURSEMENT [SB21B.15515]: TRAVEL: AIR		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 01 / 20 / 2018
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [] Transaction ID : SB21B.15976 Amount of Each Disbursement this Period [] 230.00
City FORT WORTH	State TX	Zip Code 76155
Purpose of Disbursement WALSH REIMBURSEMENT [SB21B.15929]: TRAVEL: AIR		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 01 / 26 / 2018
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [] Transaction ID : SB21B.15975 Amount of Each Disbursement this Period [] 202.65
City FORT WORTH	State TX	Zip Code 76155
Purpose of Disbursement WALSH REIMBURSEMENT [SB21B.15929]: TRAVEL: AIR		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 02 / 22 / 2018
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [] Transaction ID : SB21B.17077 Amount of Each Disbursement this Period [] 508.61
City FORT WORTH	State TX	Zip Code 76155
Purpose of Disbursement WALSH REIMBURSEMENT [SB21B.17077]: TRAVEL: AIR		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 02 / 22 / 2018
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.17079 Amount of Each Disbursement this Period [REDACTED] 508.61
City FORT WORTH	State TX	Zip Code 76155
Purpose of Disbursement WALSH REIMBURSEMENT [SB21B.17077]: TRAVEL: AIR		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 02 / 25 / 2018
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.16753 Amount of Each Disbursement this Period [REDACTED] 341.30
City FORT WORTH	State TX	Zip Code 76155
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.16670]: TRAVEL: AIR		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 02 / 26 / 2018
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.16754 Amount of Each Disbursement this Period [REDACTED] 261.30
City FORT WORTH	State TX	Zip Code 76155
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.16671]: TRAVEL: AIR		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

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

[REDACTED] 0.00

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

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 02 / 26 / 2018
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [] Transaction ID : SB21B.16755 Amount of Each Disbursement this Period [] 26.21
City FORT WORTH	State TX	Zip Code 76155
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.16671]: TRAVEL: AIR		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 02 / 27 / 2018
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [] Transaction ID : SB21B.16756 Amount of Each Disbursement this Period [] 75.00
City FORT WORTH	State TX	Zip Code 76155
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.16671]: TRAVEL: AIR		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 02 / 27 / 2018
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [] Transaction ID : SB21B.16757 Amount of Each Disbursement this Period [] 75.00
City FORT WORTH	State TX	Zip Code 76155
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.16671]: TRAVEL: AIR		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 02 / 27 / 2018
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [] Transaction ID : SB21B.16758 Amount of Each Disbursement this Period 75.00
City FORT WORTH	State TX	Zip Code 76155
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.16671]: TRAVEL: AIR		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 02 / 28 / 2018
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [] Transaction ID : SB21B.16759 Amount of Each Disbursement this Period - 37.63
City FORT WORTH	State TX	Zip Code 76155
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.16673]: CREDIT: TRAVEL: AIR		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 03 / 20 / 2018
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [] Transaction ID : SB21B.1676t Amount of Each Disbursement this Period 662.59
City FORT WORTH	State TX	Zip Code 76155
Purpose of Disbursement 1ST BANKCARD PMT [SB21B. 16676]: TRAVEL: AIR		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 03 / 20 / 2018
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.16761 Amount of Each Disbursement this Period [REDACTED] 26.21
City FORT WORTH	State TX	Zip Code 76155
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.16676]: TRAVEL: AIR		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. BENJAMIN BAR AND LOUNGE		Date of Disbursement MM / DD / YYYY 01 / 10 / 2018
Mailing Address 1100 PENNSYLVANIA AVE		FEC Identification Number C [REDACTED] Transaction ID : SB21B.15977 Amount of Each Disbursement this Period [REDACTED] 19.60
City WASHINGTON	State DC	Zip Code 20004
Purpose of Disbursement AHEARN REIMBURSEMENT [SB21B.15935]: FUNDRAISING EXPENSE		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. BENJAMIN BAR AND LOUNGE		Date of Disbursement MM / DD / YYYY 01 / 29 / 2018
Mailing Address 1100 PENNSYLVANIA AVE		FEC Identification Number C [REDACTED] Transaction ID : SB21B.15966 Amount of Each Disbursement this Period [REDACTED] 47.40
City WASHINGTON	State DC	Zip Code 20004
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.15922]: FUNDRAISING EXPENSE		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

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

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

[REDACTED] 0.00
[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. BENJAMIN BAR AND LOUNGE		Date of Disbursement MM / DD / YYYY 01 / 29 / 2018
Mailing Address 1100 PENNSYLVANIA AVE		FEC Identification Number C [] Transaction ID : SB21B.15982 Amount of Each Disbursement this Period [] 249.00
City WASHINGTON	State DC	Zip Code 20004
Purpose of Disbursement AHEARN REIMBURSEMENT [SB21B.15935]: FUNDRAISING EXPENSE		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. BLT PRIME BY DAVID BURKE		Date of Disbursement MM / DD / YYYY 12 / 09 / 2017
Mailing Address 1100 PENNSYLVANIA AVE NW		FEC Identification Number C [] Transaction ID : SB21B.15600 Amount of Each Disbursement this Period [] 639.50
City WASHINGTON	State DC	Zip Code 20004
Purpose of Disbursement WALSH REIMBURSEMENT [SB21B.15515]: FUNDRAISING EXPENSE		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. BLT PRIME BY DAVID BURKE		Date of Disbursement MM / DD / YYYY 12 / 12 / 2017
Mailing Address 1100 PENNSYLVANIA AVE NW		FEC Identification Number C [] Transaction ID : SB21B.15595 Amount of Each Disbursement this Period [] 324.00
City WASHINGTON	State DC	Zip Code 20004
Purpose of Disbursement MASON REIMBURSEMENT [SB21B.15517]: FUNDRAISING EXPENSE		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. BLT PRIME BY DAVID BURKE		Date of Disbursement MM / DD / YYYY 01 / 10 / 2018
Mailing Address 1100 PENNSYLVANIA AVE NW		FEC Identification Number C [REDACTED] Transaction ID : SB21B.15978 Amount of Each Disbursement this Period [REDACTED] 398.66
City WASHINGTON	State DC	Zip Code 20004
Purpose of Disbursement AHEARN REIMBURSEMENT [SB21B.15935]: FUNDRAISING EXPENSE		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. BULLDOG COMPLIANCE		Date of Disbursement MM / DD / YYYY 03 / 07 / 2018
Mailing Address 138 CONANT ST 2ND FLOOR		FEC Identification Number C [REDACTED] Transaction ID : SB21B.16679 Amount of Each Disbursement this Period [REDACTED] 6000.00
City BEVERLY	State MA	Zip Code 01915
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. CAPITAL RESEARCH GROUP, LLC		Date of Disbursement MM / DD / YYYY 03 / 13 / 2018
Mailing Address 1101 K STREET, NW SUITE 800		FEC Identification Number C [REDACTED] Transaction ID : SB21B.1668t Amount of Each Disbursement this Period [REDACTED] 7500.00
City WASHINGTON	State DC	Zip Code 20005
Purpose of Disbursement RESEARCH CONSULTING		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

[REDACTED] 13500.00

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

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. CASPERMOVERS

Mailing Address 4540 BENNING RD SE

City WASHINGTON State DC Zip Code 20019

Purpose of Disbursement WALSH REIMBURSEMENT [SB21B.15515]: OFFICE FURNITURE DELIVERY/ASSEMBLY
Candidate Name

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

Date of Disbursement

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

FEC Identification Number

C
Transaction ID : SB21B.15604
Amount of Each Disbursement this Period
626.00

Memo Item

Full Name (Last, First, Middle Initial)

B. DAC ENTERPRISES LLC

Mailing Address 10319 WESTLAKE DR, #186

City BETHESDA State MD Zip Code 20817

Purpose of Disbursement COMMUNICATIONS CONSULTING
Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y
01 / 02 / 2018

FEC Identification Number

C
Transaction ID : SB21B.15519
Amount of Each Disbursement this Period
7500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. DAC ENTERPRISES LLC

Mailing Address 10319 WESTLAKE DR, #186

City BETHESDA State MD Zip Code 20817

Purpose of Disbursement COMMUNICATIONS CONSULTING
Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y
01 / 29 / 2018

FEC Identification Number

C
Transaction ID : SB21B.1552t
Amount of Each Disbursement this Period
7500.00

Memo Item

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

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

15000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. DAC ENTERPRISES LLC		Date of Disbursement MM / DD / YYYY 02 / 26 / 2018
Mailing Address 10319 WESTLAKE DR, #186		FEC Identification Number C [] Transaction ID : SB21B.15930 Amount of Each Disbursement this Period 7500.00
City BETHESDA	State MD	Zip Code 20817
Purpose of Disbursement COMMUNICATIONS CONSULTING		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. DELTA AIRLINES		Date of Disbursement MM / DD / YYYY 02 / 12 / 2018
Mailing Address 1030 DELTA BLVD		FEC Identification Number C [] Transaction ID : SB21B.16730 Amount of Each Disbursement this Period 229.00
City ATLANTA	State GA	Zip Code 30354
Purpose of Disbursement MASON REIMBURSEMENT [SB21B.16681]: TRAVEL: AIR		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. DELTA AIRLINES		Date of Disbursement MM / DD / YYYY 02 / 12 / 2018
Mailing Address 1030 DELTA BLVD		FEC Identification Number C [] Transaction ID : SB21B.16731 Amount of Each Disbursement this Period 261.00
City ATLANTA	State GA	Zip Code 30354
Purpose of Disbursement MASON REIMBURSEMENT [SB21B.16681]: TRAVEL: AIR		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	7500.00
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)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. DELTA AIRLINES		Date of Disbursement MM / DD / YYYY 03 / 20 / 2018
Mailing Address 1030 DELTA BLVD		FEC Identification Number C [] Transaction ID : SB21B.16762
City ATLANTA	State GA	Zip Code 30354
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.16676]: TRAVEL: AIR		Amount of Each Disbursement this Period [] 1197.00
Candidate Name		Category/Type []
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. DELTA AIRLINES		Date of Disbursement MM / DD / YYYY 03 / 20 / 2018
Mailing Address 1030 DELTA BLVD		FEC Identification Number C [] Transaction ID : SB21B.16763
City ATLANTA	State GA	Zip Code 30354
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.16676]: TRAVEL: AIR		Amount of Each Disbursement this Period [] 38.00
Candidate Name		Category/Type []
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. FEDERAL EXPRESS		Date of Disbursement MM / DD / YYYY 12 / 23 / 2017
Mailing Address 461 WINCHESTER RD		FEC Identification Number C [] Transaction ID : SB21B.15564
City MEMPHIS	State TN	Zip Code 38109
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.15510]: DELIVERY EXPENSE		Amount of Each Disbursement this Period [] 2659.67
Candidate Name		Category/Type []
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		<input checked="" type="checkbox"/> Memo Item

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. FEDERAL EXPRESS

Mailing Address 461 WINCHESTER RD

City MEMPHIS State TN Zip Code 38109

Purpose of Disbursement
1ST BANKCARD PMT [SB21B.15510]: DELIVERY EXPENSE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y
12 / 26 / 2017

FEC Identification Number

C
Transaction ID : SB21B.15565
Amount of Each Disbursement this Period
170.66

Memo Item

Full Name (Last, First, Middle Initial)

B. FEDERAL EXPRESS

Mailing Address 461 WINCHESTER RD

City MEMPHIS State TN Zip Code 38109

Purpose of Disbursement
1ST BANKCARD PMT [SB21B.15510]: DELIVERY EXPENSE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

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

FEC Identification Number

C
Transaction ID : SB21B.15566
Amount of Each Disbursement this Period
800.61

Memo Item

Full Name (Last, First, Middle Initial)

C. FEDERAL EXPRESS

Mailing Address 461 WINCHESTER RD

City MEMPHIS State TN Zip Code 38109

Purpose of Disbursement
1ST BANKCARD PMT [SB21B.15510]: DELIVERY EXPENSE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y
12 / 28 / 2017

FEC Identification Number

C
Transaction ID : SB21B.15567
Amount of Each Disbursement this Period
471.25

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. FEDERAL EXPRESS		Date of Disbursement MM / DD / YYYY 12 / 30 / 2017
Mailing Address 461 WINCHESTER RD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.15568 Amount of Each Disbursement this Period [REDACTED] 60.75
City MEMPHIS	State TN	Zip Code 38109
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.15510]: DELIVERY EXPENSE		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. FEDERAL EXPRESS		Date of Disbursement MM / DD / YYYY 01 / 03 / 2018
Mailing Address 461 WINCHESTER RD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.15569 Amount of Each Disbursement this Period [REDACTED] 41.09
City MEMPHIS	State TN	Zip Code 38109
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.15511]: DELIVERY EXPENSE		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. FEDERAL EXPRESS		Date of Disbursement MM / DD / YYYY 01 / 04 / 2018
Mailing Address 461 WINCHESTER RD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.15571 Amount of Each Disbursement this Period [REDACTED] 28.50
City MEMPHIS	State TN	Zip Code 38109
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.15511]: DELIVERY EXPENSE		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. FEDERAL EXPRESS		Date of Disbursement MM / DD / YYYY 01 / 06 / 2018
Mailing Address 461 WINCHESTER RD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.15571 Amount of Each Disbursement this Period [REDACTED] 83.45
City MEMPHIS	State TN	Zip Code 38109
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.15511]: DELIVERY EXPENSE		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. FEDERAL EXPRESS		Date of Disbursement MM / DD / YYYY 01 / 09 / 2018
Mailing Address 461 WINCHESTER RD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.15572 Amount of Each Disbursement this Period [REDACTED] 84.10
City MEMPHIS	State TN	Zip Code 38109
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.15511]: DELIVERY EXPENSE		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. FEDERAL EXPRESS		Date of Disbursement MM / DD / YYYY 01 / 10 / 2018
Mailing Address 461 WINCHESTER RD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.15573 Amount of Each Disbursement this Period [REDACTED] 247.40
City MEMPHIS	State TN	Zip Code 38109
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.15511]: DELIVERY EXPENSE		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

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

[REDACTED] 0.00

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

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. FEDERAL EXPRESS		Date of Disbursement MM / DD / YYYY 01 / 11 / 2018
Mailing Address 461 WINCHESTER RD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.15574
City MEMPHIS	State TN	Zip Code 38109
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.15511]: DELIVERY EXPENSE		Amount of Each Disbursement this Period [REDACTED] 25.30
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. FEDERAL EXPRESS		Date of Disbursement MM / DD / YYYY 01 / 13 / 2018
Mailing Address 461 WINCHESTER RD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.15576
City MEMPHIS	State TN	Zip Code 38109
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.15511]: DELIVERY EXPENSE		Amount of Each Disbursement this Period [REDACTED] 336.51
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. FEDERAL EXPRESS		Date of Disbursement MM / DD / YYYY 01 / 16 / 2018
Mailing Address 461 WINCHESTER RD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.15577
City MEMPHIS	State TN	Zip Code 38109
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.15513]: DELIVERY EXPENSE		Amount of Each Disbursement this Period [REDACTED] 151.10
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		<input checked="" type="checkbox"/> Memo Item

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. FEDERAL EXPRESS		Date of Disbursement MM / DD / YYYY 01 / 17 / 2018
Mailing Address 461 WINCHESTER RD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.15578 Amount of Each Disbursement this Period [REDACTED] 1094.56
City MEMPHIS	State TN	Zip Code 38109
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.15513]: DELIVERY EXPENSE		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. FEDERAL EXPRESS		Date of Disbursement MM / DD / YYYY 01 / 18 / 2018
Mailing Address 461 WINCHESTER RD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.15579 Amount of Each Disbursement this Period [REDACTED] 373.25
City MEMPHIS	State TN	Zip Code 38109
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.15514]: DELIVERY EXPENSE		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. FEDERAL EXPRESS		Date of Disbursement MM / DD / YYYY 01 / 22 / 2018
Mailing Address 461 WINCHESTER RD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.15588 Amount of Each Disbursement this Period [REDACTED] 46.03
City MEMPHIS	State TN	Zip Code 38109
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.15514]: DELIVERY EXPENSE		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. FEDERAL EXPRESS

Full Name (Last, First, Middle Initial)

Mailing Address 942 SOUTH SHADY GROVE ROAD

City MEMPHIS State TN Zip Code 38120

Purpose of Disbursement WALSH REIMBURSEMENT [SB21B.15929]: DELIVERY SERVICES

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
01 / 23 / 2018

FEC Identification Number

C
Transaction ID : SB21B.15980
 Amount of Each Disbursement this Period
 454.33

Memo Item

B. FEDERAL EXPRESS

Full Name (Last, First, Middle Initial)

Mailing Address 461 WINCHESTER RD

City MEMPHIS State TN Zip Code 38109

Purpose of Disbursement 1ST BANKCARD PMT [SB21B.15514]: DELIVERY EXPENSE

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
01 / 24 / 2018

FEC Identification Number

C
Transaction ID : SB21B.15587
 Amount of Each Disbursement this Period
 60.34

Memo Item

C. FEDERAL EXPRESS

Full Name (Last, First, Middle Initial)

Mailing Address 461 WINCHESTER RD

City MEMPHIS State TN Zip Code 38109

Purpose of Disbursement 1ST BANKCARD PMT [SB21B.15514]: DELIVERY EXPENSE

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
01 / 24 / 2018

FEC Identification Number

C
Transaction ID : SB21B.15588
 Amount of Each Disbursement this Period
 135.00

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. FEDERAL EXPRESS		Date of Disbursement MM / DD / YYYY 01 / 27 / 2018
Mailing Address 461 WINCHESTER RD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.15589 Amount of Each Disbursement this Period [REDACTED] 93.74
City MEMPHIS	State TN	Zip Code 38109
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.15514]: DELIVERY EXPENSE		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. FEDERAL EXPRESS		Date of Disbursement MM / DD / YYYY 01 / 30 / 2018
Mailing Address 461 WINCHESTER RD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.15961 Amount of Each Disbursement this Period [REDACTED] 22.54
City MEMPHIS	State TN	Zip Code 38109
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.15922]: DELIVERY EXPENSE		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. FEDERAL EXPRESS		Date of Disbursement MM / DD / YYYY 01 / 31 / 2018
Mailing Address 461 WINCHESTER RD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.15962 Amount of Each Disbursement this Period [REDACTED] 228.66
City MEMPHIS	State TN	Zip Code 38109
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.15922]: DELIVERY EXPENSE		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. FEDERAL EXPRESS		Date of Disbursement MM / DD / YYYY 02 / 01 / 2018
Mailing Address 461 WINCHESTER RD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.15963 Amount of Each Disbursement this Period [REDACTED] 8.65
City MEMPHIS	State TN	Zip Code 38109
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.15922]: DELIVERY EXPENSE		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. FEDERAL EXPRESS		Date of Disbursement MM / DD / YYYY 02 / 03 / 2018
Mailing Address 461 WINCHESTER RD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.15969 Amount of Each Disbursement this Period [REDACTED] 44.48
City MEMPHIS	State TN	Zip Code 38109
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.15923]: DELIVERY EXPENSE		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. FEDERAL EXPRESS		Date of Disbursement MM / DD / YYYY 02 / 06 / 2018
Mailing Address 461 WINCHESTER RD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.15971 Amount of Each Disbursement this Period [REDACTED] 126.06
City MEMPHIS	State TN	Zip Code 38109
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.15923]: DELIVERY EXPENSE		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

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

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

[REDACTED] 0.00
[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. FEDERAL EXPRESS		Date of Disbursement MM / DD / YYYY 02 / 10 / 2018
Mailing Address 461 WINCHESTER RD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.15972 Amount of Each Disbursement this Period [REDACTED] 57.81
City MEMPHIS	State TN	Zip Code 38109
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.15924]: DELIVERY EXPENSE		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. FEDERAL EXPRESS		Date of Disbursement MM / DD / YYYY 02 / 17 / 2018
Mailing Address 461 WINCHESTER RD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.15973 Amount of Each Disbursement this Period [REDACTED] 310.13
City MEMPHIS	State TN	Zip Code 38109
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.15924]: DELIVERY EXPENSE		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. FEDERAL EXPRESS		Date of Disbursement MM / DD / YYYY 02 / 25 / 2018
Mailing Address 461 WINCHESTER RD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.16764 Amount of Each Disbursement this Period [REDACTED] 40.80
City MEMPHIS	State TN	Zip Code 38109
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.16670]: DELIVERY EXPENSE		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. FEDERAL EXPRESS

Full Name (Last, First, Middle Initial)

Mailing Address 461 WINCHESTER RD

City MEMPHIS State TN Zip Code 38109

Purpose of Disbursement
1ST BANKCARD PMT [SB21B.16671]: DELIVERY EXPENSE

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2018

FEC Identification Number

C
Transaction ID : SB21B.16765
Amount of Each Disbursement this Period
13.73

Memo Item

B. FEDERAL EXPRESS

Full Name (Last, First, Middle Initial)

Mailing Address 461 WINCHESTER RD

City MEMPHIS State TN Zip Code 38109

Purpose of Disbursement
1ST BANKCARD PMT [SB21B.16671]: DELIVERY EXPENSE

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2018

FEC Identification Number

C
Transaction ID : SB21B.16766
Amount of Each Disbursement this Period
81.18

Memo Item

C. FEDERAL EXPRESS

Full Name (Last, First, Middle Initial)

Mailing Address 461 WINCHESTER RD

City MEMPHIS State TN Zip Code 38109

Purpose of Disbursement
1ST BANKCARD PMT [SB21B.16676]: DELIVERY EXPENSE

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
03 / 14 / 2018

FEC Identification Number

C
Transaction ID : SB21B.16767
Amount of Each Disbursement this Period
13.75

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. FEDERAL EXPRESS		Date of Disbursement MM / DD / YYYY 03 / 17 / 2018
Mailing Address 461 WINCHESTER RD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.16768 Amount of Each Disbursement this Period [REDACTED] 38.50
City MEMPHIS	State TN	Zip Code 38109
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.16676]: DELIVERY EXPENSE		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. FEDERAL EXPRESS		Date of Disbursement MM / DD / YYYY 03 / 20 / 2018
Mailing Address 461 WINCHESTER RD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.16769 Amount of Each Disbursement this Period [REDACTED] 16.51
City MEMPHIS	State TN	Zip Code 38109
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.16676]: DELIVERY EXPENSE		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. FOUR SEASONS HOUSTON		Date of Disbursement MM / DD / YYYY 03 / 10 / 2018
Mailing Address 1300LAMAR STREET		FEC Identification Number C [REDACTED] Transaction ID : SB21B.16771 Amount of Each Disbursement this Period [REDACTED] 1795.16
City HOUSTON	State TX	Zip Code 77010
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.16674]: EVENT EXPENSES: FACILITY RENTAL /CATERING SERVICES		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. GREEN MONSTER CONSULTING, LLC		Date of Disbursement MM / DD / YYYY 01 / 29 / 2018
Mailing Address PO BOX 1492		FEC Identification Number C [] Transaction ID : SB21B.15523 Amount of Each Disbursement this Period 10000.00
City SALEM	State NH	Zip Code 03079
Purpose of Disbursement STRATEGY CONSULTING		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. GREEN MONSTER CONSULTING, LLC		Date of Disbursement MM / DD / YYYY 02 / 26 / 2018
Mailing Address PO BOX 1492		FEC Identification Number C [] Transaction ID : SB21B.15931 Amount of Each Disbursement this Period 10000.00
City SALEM	State NH	Zip Code 03079
Purpose of Disbursement STRATEGY CONSULTING		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. HARPER POLLING, LLC		Date of Disbursement MM / DD / YYYY 02 / 21 / 2018
Mailing Address 121 STATE STREET		FEC Identification Number C [] Transaction ID : SB21B.15933 Amount of Each Disbursement this Period 25069.00
City HARRISBURG	State PA	Zip Code 17101
Purpose of Disbursement POLLING EXPENSE		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	45069.00
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)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. HARPER POLLING, LLC		Date of Disbursement MM / DD / YYYY 03 / 06 / 2018	
Mailing Address 121 STATE STREET		FEC Identification Number C [] Transaction ID : SB21B.16689 Amount of Each Disbursement this Period [] 25652.00	
City HARRISBURG	State PA	Zip Code 17101	Category/ Type []
Purpose of Disbursement POLLING EXPENSE			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. JONES DAY		Date of Disbursement MM / DD / YYYY 03 / 07 / 2018	
Mailing Address PO BOX 7805 BEN FRANKLIN STATION		FEC Identification Number C [] Transaction ID : SB21B.16691 Amount of Each Disbursement this Period [] 12617.50	
City WASHINGTON	State DC	Zip Code 20044	Category/ Type []
Purpose of Disbursement LEGAL CONSULTING			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. LAZ PARKING		Date of Disbursement MM / DD / YYYY 01 / 30 / 2018	
Mailing Address 1700 PENNSYLVANIA AVE NW		FEC Identification Number C [] Transaction ID : SB21B.15967 Amount of Each Disbursement this Period [] 35.00	
City WASHINGTON	State DC	Zip Code 20006	Category/ Type []
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.15922]: MEETING EXPENSE: PARKING			
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

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

[] 38269.50

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

[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. LAZ PARKING

Mailing Address 1700 PENNSYLVANIA AVE NW

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement 1ST BANKCARD PMT [SB21B.15922]: MEETING EXPENSE: PARKING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
01 / 30 / 2018

FEC Identification Number

C
Transaction ID : SB21B.15968
Amount of Each Disbursement this Period
35.49

Memo Item

Full Name (Last, First, Middle Initial)

B. LAZ PARKING

Mailing Address 1700 PENNSYLVANIA AVE NW

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement 1ST BANKCARD PMT [SB21B.16671]: MEETING EXPENSE: PARKING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2018

FEC Identification Number

C
Transaction ID : SB21B.16772
Amount of Each Disbursement this Period
35.00

Memo Item

Full Name (Last, First, Middle Initial)

C. LL BEAN

Mailing Address 95 MAIN ST

City FREEPORT State ME Zip Code 04032

Purpose of Disbursement 1ST BANKCARD PMT [SB21B.15512]: DONOR COLLATERAL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
01 / 08 / 2018

FEC Identification Number

C
Transaction ID : SB21B.1556:
Amount of Each Disbursement this Period
7617.37

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. LL BEAN

Mailing Address 95 MAIN ST

City
FREEPORT

State
ME

Zip Code
04032

Purpose of Disbursement
1ST BANKCARD PMT [SB21B.15511]: DONOR COLLATERAL

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.15575

Amount of Each Disbursement this Period

[REDACTED] 156.51

Memo Item

Full Name (Last, First, Middle Initial)

B. LL BEAN

Mailing Address 95 MAIN ST

City
FREEPORT

State
ME

Zip Code
04032

Purpose of Disbursement
1ST BANKCARD PMT [SB21B.15923]: DONOR COLLATERAL

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	6			2	0	1	8		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.15971

Amount of Each Disbursement this Period

[REDACTED] 603.09

Memo Item

Full Name (Last, First, Middle Initial)

C. LL BEAN

Mailing Address 95 MAIN ST

City
FREEPORT

State
ME

Zip Code
04032

Purpose of Disbursement
1ST BANKCARD PMT [SB21B.15924]: DONOR COLLATERAL

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	3			2	0	1	8		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.15974

Amount of Each Disbursement this Period

[REDACTED] 66.62

Memo Item

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

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

[REDACTED] 0.00

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. MANDARIN ORIENTAL		Date of Disbursement MM / DD / YYYY 03 / 01 / 2018	
Mailing Address 80 COLUMBUS CIRCLE		FEC Identification Number C [REDACTED] Transaction ID : SB21B.16774	
City NEW YORK	State NY	Zip Code 10023	Amount of Each Disbursement this Period 5000.00
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.16672]: EVENT EXPENSE: FACILITY RENTAL / CATERING SERVICES		Category/Type	Memo Item <input checked="" type="checkbox"/>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. MANDARIN ORIENTAL		Date of Disbursement MM / DD / YYYY 03 / 09 / 2018	
Mailing Address 80 COLUMBUS CIRCLE		FEC Identification Number C [REDACTED] Transaction ID : SB21B.16775	
City NEW YORK	State NY	Zip Code 10023	Amount of Each Disbursement this Period 5000.00
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.16675]: EVENT EXPENSE: FACILITY RENTAL / CATERING SERVICES		Category/Type	Memo Item <input checked="" type="checkbox"/>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. MASON, CARA, , ,		Date of Disbursement MM / DD / YYYY 01 / 10 / 2018	
Mailing Address 611 PENNSYLVANIA AVE SE #385		FEC Identification Number C [REDACTED] Transaction ID : SB21B.15511	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 1548.92
Purpose of Disbursement REIMBURSEMENT: SEE MEMO ENTRIES IF REQUIRED		Category/Type	Memo Item <input type="checkbox"/>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Disbursements This Page (optional).....▶	1548.92
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. MASON, CARA, , ,		Date of Disbursement MM / DD / YYYY 01 / 26 / 2018
Mailing Address 611 PENNSYLVANIA AVE SE #385		FEC Identification Number C [REDACTED] Transaction ID : SB21B.15517 Amount of Each Disbursement this Period 418.01
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement REIMBURSEMENT: SEE MEMO ENTRIES IF REQUIRED		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. MASON, CARA, , ,		Date of Disbursement MM / DD / YYYY 03 / 08 / 2018
Mailing Address 611 PENNSYLVANIA AVE SE #385		FEC Identification Number C [REDACTED] Transaction ID : SB21B.16681 Amount of Each Disbursement this Period 647.00
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement REIMBURSEMENT: SEE MEMO ENTRIES IF REQUIRED		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. MASON STRATEGIES LLC		Date of Disbursement MM / DD / YYYY 01 / 29 / 2018
Mailing Address 611 PENNSYLVANIA AVE SE # 385		FEC Identification Number C [REDACTED] Transaction ID : SB21B.15527 Amount of Each Disbursement this Period 10000.00
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	11065.01
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. MASON STRATEGIES LLC

Mailing Address 611 PENNSYLVANIA AVE SE # 385

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2018

FEC Identification Number

C
Transaction ID : SB21B.15936
Amount of Each Disbursement this Period
10000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. METROPOLITAN CLUB

Mailing Address 1 E 60TH ST

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement
AHEARN REIMBURSEMENT [SB21B.16692]: FUNDRAISING EXPENSE

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
03 / 13 / 2018

FEC Identification Number

C
Transaction ID : SB21B.16733
Amount of Each Disbursement this Period
379.13

Memo Item

Full Name (Last, First, Middle Initial)

C. MO STRATEGIES INC

Mailing Address P.O. BOX 4

City WESTFIELD State IN Zip Code 46074

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
01 / 29 / 2018

FEC Identification Number

C
Transaction ID : SB21B.15528
Amount of Each Disbursement this Period
10000.00

Memo Item

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

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

20000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. MO STRATEGIES INC		Date of Disbursement MM / DD / YYYY 02 / 26 / 2018	
Mailing Address P.O. BOX 4			
City WESTFIELD	State IN	Zip Code 46074	FEC Identification Number C
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type	Transaction ID : SB21B.15937 Amount of Each Disbursement this Period 10000.00
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. ONMESSAGE INC.		Date of Disbursement MM / DD / YYYY 01 / 25 / 2018	
Mailing Address 705 MELVIN AVE # 105			
City ANNAPOLIS	State MD	Zip Code 21401	FEC Identification Number C
Purpose of Disbursement STRATEGY CONSULTING		Category/ Type	Transaction ID : SB21B.15532 Amount of Each Disbursement this Period 10000.00
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. PARSCALE STRATEGY, LLC		Date of Disbursement MM / DD / YYYY 01 / 04 / 2018	
Mailing Address 2637 E ATLANTIC BLVD# 42471			
City POMPANO BEACH	State FL	Zip Code 33062	FEC Identification Number C
Purpose of Disbursement DIGITAL FUNDRAISING CONSULTING		Category/ Type	Transaction ID : SB21B.15533 Amount of Each Disbursement this Period 10000.00
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

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

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

30000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. PARSCALE STRATEGY, LLC		Date of Disbursement MM / DD / YYYY 01 / 08 / 2018
Mailing Address 2637 E ATLANTIC BLVD# 42471		FEC Identification Number C [] Transaction ID : SB21B.15534 Amount of Each Disbursement this Period [] 13478.00
City POMPANO BEACH	State FL	Zip Code 33062
Purpose of Disbursement DIGITAL FUNDRAISING CONSULTING		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. PARSCALE STRATEGY, LLC		Date of Disbursement MM / DD / YYYY 02 / 01 / 2018
Mailing Address 2637 E ATLANTIC BLVD# 42471		FEC Identification Number C [] Transaction ID : SB21B.15938 Amount of Each Disbursement this Period [] 10000.00
City POMPANO BEACH	State FL	Zip Code 33062
Purpose of Disbursement DIGITAL FUNDRAISING CONSULTING		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. PARSCALE STRATEGY, LLC		Date of Disbursement MM / DD / YYYY 03 / 05 / 2018
Mailing Address 2637 E ATLANTIC BLVD# 42471		FEC Identification Number C [] Transaction ID : SB21B.16695 Amount of Each Disbursement this Period [] 10000.00
City POMPANO BEACH	State FL	Zip Code 33062
Purpose of Disbursement DIGITAL FUNDRAISING CONSULTING		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 33478.00
TOTAL This Period (last page this line number only).....▶	[]

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB21B

Transaction ID : SB21B.16695

The disbursement made to Parscale Strategy LLC on March 5, 2018 was for services performed prior to February 27, 2018.

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. PARSCALE STRATEGY, LLC		Date of Disbursement MM / DD / YYYY 03 / 13 / 2018
Mailing Address 2637 E ATLANTIC BLVD# 42471		FEC Identification Number C [] Transaction ID : SB21B.16696 Amount of Each Disbursement this Period [] 3330.00
City POMPANO BEACH	State FL	Zip Code 33062
Purpose of Disbursement WEBSITE DEVELOPMENT AND DESIGN		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. PETALS & STEMS FLORIST		Date of Disbursement MM / DD / YYYY 02 / 22 / 2018
Mailing Address 13319 MONTFORT ST		FEC Identification Number C [] Transaction ID : SB21B.16777 Amount of Each Disbursement this Period [] 145.60
City DALLAS	State TX	Zip Code 75240
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.16670]: EVENT STAGING EXPENSE		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. PETALS & STEMS FLORIST		Date of Disbursement MM / DD / YYYY 02 / 22 / 2018
Mailing Address 13319 MONTFORT ST		FEC Identification Number C [] Transaction ID : SB21B.16777 Amount of Each Disbursement this Period [] 145.60
City DALLAS	State TX	Zip Code 75240
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.16670]: EVENT STAGING EXPENSE		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 3330.00
TOTAL This Period (last page this line number only).....▶	[]

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB21B

Transaction ID : SB21B.16696

The disbursement made to Parscale Strategy LLC on March 13, 2018 was for services performed prior to February 27, 2018.

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. PETRA RMS

Mailing Address PO BOX 43709

City
BIRMINGHAM

State
AL

Zip Code
35243

Purpose of Disbursement
INSURANCE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	5			2	0	1	8		

FEC Identification Number

C []
Transaction ID : SB21B.15535
Amount of Each Disbursement this Period
[] 7571.00

Memo Item

Full Name (Last, First, Middle Initial)

B. PIERSON CONSULTING GROUP

Mailing Address 3409 QUEENSWOOD LN

City
GARLAND

State
TX

Zip Code
75040

Purpose of Disbursement
COMMUNICATIONS CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	9			2	0	1	8		

FEC Identification Number

C []
Transaction ID : SB21B.15536
Amount of Each Disbursement this Period
[] 10000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. PIERSON CONSULTING GROUP

Mailing Address 3409 QUEENSWOOD LN

City
GARLAND

State
TX

Zip Code
75040

Purpose of Disbursement
COMMUNICATIONS CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	6			2	0	1	8		

FEC Identification Number

C []
Transaction ID : SB21B.15935
Amount of Each Disbursement this Period
[] 10000.00

Memo Item

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

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

2	7	5	7	1	.	0	0
---	---	---	---	---	---	---	---

--	--	--	--	--	--	--	--

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. RARE STEAK AND SEAFOOD		Date of Disbursement MM / DD / YYYY 02 / 08 / 2018
Mailing Address 1595 I (EYE) STREET NW		FEC Identification Number C [] Transaction ID : SB21B.17082 Amount of Each Disbursement this Period [] 189.50
City WASHINGTON	State DC	Zip Code 20005
Purpose of Disbursement WALSH REIMBURSEMENT [SB21B.17077]: FUNDRAISING EXPENSE		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. RED STATE DATA AND DIGITAL		Date of Disbursement MM / DD / YYYY 03 / 21 / 2018
Mailing Address 611 PENNSYLVANIA AVE SE #454		FEC Identification Number C [] Transaction ID : SB21B.16698 Amount of Each Disbursement this Period [] 10000.00
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. STRIPE		Date of Disbursement MM / DD / YYYY 01 / 03 / 2018
Mailing Address 3180 18TH STREET		FEC Identification Number C [] Transaction ID : SB21B.1553t Amount of Each Disbursement this Period [] 250.15
City SAN FRANCISCO	State CA	Zip Code 94110
Purpose of Disbursement MERCHANT FEES		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 10250.15
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 04 / 2018

FEC Identification Number

C
Transaction ID : SB21B.15539
Amount of Each Disbursement this Period
340.10

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 05 / 2018

FEC Identification Number

C
Transaction ID : SB21B.15540
Amount of Each Disbursement this Period
7.74

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 08 / 2018

FEC Identification Number

C
Transaction ID : SB21B.15541
Amount of Each Disbursement this Period
30.00

Memo Item

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

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

377.84

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 09 / 2018

FEC Identification Number

C
Transaction ID : SB21B.15542
Amount of Each Disbursement this Period
12.59

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 10 / 2018

FEC Identification Number

C
Transaction ID : SB21B.15543
Amount of Each Disbursement this Period
47.59

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 11 / 2018

FEC Identification Number

C
Transaction ID : SB21B.15544
Amount of Each Disbursement this Period
4.61

Memo Item

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

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

64.79

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 12 / 2018

FEC Identification Number

C
Transaction ID : SB21B.15545
Amount of Each Disbursement this Period
1.09

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 16 / 2018

FEC Identification Number

C
Transaction ID : SB21B.15546
Amount of Each Disbursement this Period
1.75

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2018

FEC Identification Number

C
Transaction ID : SB21B.15547
Amount of Each Disbursement this Period
123.52

Memo Item

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

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

126.36

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 18 / 2018

FEC Identification Number

C
Transaction ID : SB21B.15548
Amount of Each Disbursement this Period
191.56

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 19 / 2018

FEC Identification Number

C
Transaction ID : SB21B.15549
Amount of Each Disbursement this Period
2.92

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 22 / 2018

FEC Identification Number

C
Transaction ID : SB21B.1555t
Amount of Each Disbursement this Period
5.56

Memo Item

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

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

200.04

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 22 / 2018

FEC Identification Number

C
Transaction ID : SB21B.15551
Amount of Each Disbursement this Period
15.00

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 23 / 2018

FEC Identification Number

C
Transaction ID : SB21B.15552
Amount of Each Disbursement this Period
97.07

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 24 / 2018

FEC Identification Number

C
Transaction ID : SB21B.15553
Amount of Each Disbursement this Period
252.15

Memo Item

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

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

364.22

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
01 / 25 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.15554

Amount of Each Disbursement this Period

[REDACTED] 3.17

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
01 / 26 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.15555

Amount of Each Disbursement this Period

[REDACTED] 3.20

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
01 / 29 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.15556

Amount of Each Disbursement this Period

[REDACTED] 30.18

Memo Item

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

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

[REDACTED] 36.55

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 30 / 2018

FEC Identification Number

C []

Transaction ID : SB21B.15557

Amount of Each Disbursement this Period

[] 1.03

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2018

FEC Identification Number

C []

Transaction ID : SB21B.15558

Amount of Each Disbursement this Period

[] 6.90

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2018

FEC Identification Number

C []

Transaction ID : SB21B.15942

Amount of Each Disbursement this Period

[] 33.87

Memo Item

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

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

[] 41.80

[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.15943
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.15944
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.15945
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 07 / 2018

FEC Identification Number

C
Transaction ID : SB21B.15946
Amount of Each Disbursement this Period
10.52

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 08 / 2018

FEC Identification Number

C
Transaction ID : SB21B.15947
Amount of Each Disbursement this Period
2.20

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 09 / 2018

FEC Identification Number

C
Transaction ID : SB21B.15948
Amount of Each Disbursement this Period
8.34

Memo Item

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

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

21.06

**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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AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 12 / 2018

FEC Identification Number

C
Transaction ID : SB21B.15949
Amount of Each Disbursement this Period
23.42

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 13 / 2018

FEC Identification Number

C
Transaction ID : SB21B.15950
Amount of Each Disbursement this Period
47.01

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2018

FEC Identification Number

C
Transaction ID : SB21B.15951
Amount of Each Disbursement this Period
11.02

Memo Item

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

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

81.45

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.15952
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.15953
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.15954
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 21 / 2018

FEC Identification Number

C
Transaction ID : SB21B.15955
Amount of Each Disbursement this Period
5.86

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 22 / 2018

FEC Identification Number

C
Transaction ID : SB21B.15956
Amount of Each Disbursement this Period
38.91

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 23 / 2018

FEC Identification Number

C
Transaction ID : SB21B.15957
Amount of Each Disbursement this Period
7.36

Memo Item

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

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

52.13

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2018

FEC Identification Number

C
Transaction ID : SB21B.15958
Amount of Each Disbursement this Period
5.98

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2018

FEC Identification Number

C
Transaction ID : SB21B.15959
Amount of Each Disbursement this Period
0.59

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2018

FEC Identification Number

C
Transaction ID : SB21B.1596t
Amount of Each Disbursement this Period
1.75

Memo Item

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

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

8.32

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 02 / 2018

FEC Identification Number

C

Transaction ID : SB21B.16700
Amount of Each Disbursement this Period

20.67

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 05 / 2018

FEC Identification Number

C

Transaction ID : SB21B.16701
Amount of Each Disbursement this Period

28.72

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 06 / 2018

FEC Identification Number

C

Transaction ID : SB21B.16702
Amount of Each Disbursement this Period

1.78

Memo Item

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

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

51.17

**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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AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 07 / 2018

FEC Identification Number

C
Transaction ID : SB21B.16703
Amount of Each Disbursement this Period
8.61

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 08 / 2018

FEC Identification Number

C
Transaction ID : SB21B.16704
Amount of Each Disbursement this Period
2.20

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 09 / 2018

FEC Identification Number

C
Transaction ID : SB21B.16705
Amount of Each Disbursement this Period
7.15

Memo Item

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

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

17.96

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 12 / 2018

FEC Identification Number

C

Transaction ID : SB21B.16706
Amount of Each Disbursement this Period

6.03

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 13 / 2018

FEC Identification Number

C

Transaction ID : SB21B.16707
Amount of Each Disbursement this Period

6.68

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 14 / 2018

FEC Identification Number

C

Transaction ID : SB21B.16708
Amount of Each Disbursement this Period

3.83

Memo Item

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

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

16.54

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 15 / 2018

FEC Identification Number

C
Transaction ID : SB21B.16709
Amount of Each Disbursement this Period
10.52

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 16 / 2018

FEC Identification Number

C
Transaction ID : SB21B.16710
Amount of Each Disbursement this Period
0.73

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 19 / 2018

FEC Identification Number

C
Transaction ID : SB21B.16711
Amount of Each Disbursement this Period
20.74

Memo Item

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

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

31.99

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement
MM / DD / YYYY
03 / 20 / 2018

FEC Identification Number

C
Transaction ID : SB21B.16712
Amount of Each Disbursement this Period
4.55

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement
MM / DD / YYYY
03 / 21 / 2018

FEC Identification Number

C
Transaction ID : SB21B.16713
Amount of Each Disbursement this Period
13.28

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement
MM / DD / YYYY
03 / 22 / 2018

FEC Identification Number

C
Transaction ID : SB21B.16714
Amount of Each Disbursement this Period
6.60

Memo Item

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

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

24.43

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 23 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.16715
Amount of Each Disbursement this Period

[REDACTED] 5.61

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 26 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.16716
Amount of Each Disbursement this Period

[REDACTED] 6.39

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 27 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.16717
Amount of Each Disbursement this Period

[REDACTED] 158.19

Memo Item

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

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

[REDACTED] 170.19

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 28 / 2018

FEC Identification Number

C
Transaction ID : SB21B.16718
Amount of Each Disbursement this Period
71.95

Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 29 / 2018

FEC Identification Number

C
Transaction ID : SB21B.16719
Amount of Each Disbursement this Period
8.58

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 30 / 2018

FEC Identification Number

C
Transaction ID : SB21B.16721
Amount of Each Disbursement this Period
19.95

Memo Item

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

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

100.48

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
MERCHANT FEES

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
04 / 02 / 2018

FEC Identification Number

C
Transaction ID : SB21B.17068
Amount of Each Disbursement this Period
7.44

Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETPOINT CONSULTING, INC.

Mailing Address 66 CANAL CENTER PLAZA NO 555

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
POLLING EXPENSE

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
03 / 07 / 2018

FEC Identification Number

C
Transaction ID : SB21B.16722
Amount of Each Disbursement this Period
4500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. TRUMP INTERNATIONAL HOTEL LAS VEGAS

Mailing Address 2000 FASHION SHOW DR.

City LAS VEGAS State NV Zip Code 89109

Purpose of Disbursement
WALSH REIMBURSEMENT [SB21B.15929]: TRAVEL: LODGING

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
01 / 27 / 2018

FEC Identification Number

C
Transaction ID : SB21B.1598:
Amount of Each Disbursement this Period
940.24

Memo Item

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

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

4507.44

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. TRUMP INTERNATIONAL HOTEL WASHINGTON, D.C.		Date of Disbursement MM / DD / YYYY 01 / 16 / 2018
Mailing Address 1100 PENNSYLVANIA AVE. NW		FEC Identification Number C [] Transaction ID : SB21B.15560 Amount of Each Disbursement this Period [] 57201.28
City WASHINGTON	State DC	Zip Code 20004
Purpose of Disbursement EVENT EXPENSE: FACILITY RENTAL AND CATERING		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. TRUMP INTERNATIONAL HOTEL WASHINGTON, D.C.		Date of Disbursement MM / DD / YYYY 01 / 29 / 2018
Mailing Address 1100 PENNSYLVANIA AVE. NW		FEC Identification Number C [] Transaction ID : SB21B.15964 Amount of Each Disbursement this Period [] 1850.00
City WASHINGTON	State DC	Zip Code 20004
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.15922]: EVENT EXPENSE: FACILITY RENTAL/CATERING SERVICES		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. TRUMP INTERNATIONAL HOTEL WASHINGTON, D.C.		Date of Disbursement MM / DD / YYYY 01 / 29 / 2018
Mailing Address 1100 PENNSYLVANIA AVE. NW		FEC Identification Number C [] Transaction ID : SB21B.15964 Amount of Each Disbursement this Period [] 400.40
City WASHINGTON	State DC	Zip Code 20004
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.15922]: EVENT EXPENSE: FACILITY RENTAL/CATERING SERVICES		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 57201.28
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
MASON REIMBURSEMENT [SB21B.15516]: TRAVEL: GROUND
TRANSPORTATION
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 12 / 2017

FEC Identification Number

C

Transaction ID : SB21B.15617

Amount of Each Disbursement this Period

64.14

Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
MASON REIMBURSEMENT [SB21B.15516]: TRAVEL: GROUND
TRANSPORTATION
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 02 / 2017

FEC Identification Number

C

Transaction ID : SB21B.15615

Amount of Each Disbursement this Period

13.69

Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
MASON REIMBURSEMENT [SB21B.15516]: TRAVEL: GROUND
TRANSPORTATION
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 02 / 2017

FEC Identification Number

C

Transaction ID : SB21B.15616

Amount of Each Disbursement this Period

60.00

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement WALSH REIMBURSEMENT [SB21B.15515]: TRAVEL: GROUND TRANSPORTATION
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 02 / 2017

FEC Identification Number

C
Transaction ID : SB21B.15632
Amount of Each Disbursement this Period
45.65

Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement WALSH REIMBURSEMENT [SB21B.15515]: TRAVEL: GROUND TRANSPORTATION
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 02 / 2017

FEC Identification Number

C
Transaction ID : SB21B.15633
Amount of Each Disbursement this Period
3.00

Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement WALSH REIMBURSEMENT [SB21B.15515]: TRAVEL: GROUND TRANSPORTATION
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 02 / 2017

FEC Identification Number

C
Transaction ID : SB21B.15634
Amount of Each Disbursement this Period
5.00

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement WALSH REIMBURSEMENT [SB21B.15515]: TRAVEL: GROUND TRANSPORTATION
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 05 / 2017

FEC Identification Number

C
Transaction ID : SB21B.15622
Amount of Each Disbursement this Period
23.86

Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement WALSH REIMBURSEMENT [SB21B.15515]: TRAVEL: GROUND TRANSPORTATION
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 05 / 2017

FEC Identification Number

C
Transaction ID : SB21B.15623
Amount of Each Disbursement this Period
38.54

Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement WALSH REIMBURSEMENT [SB21B.15515]: TRAVEL: GROUND TRANSPORTATION
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 05 / 2017

FEC Identification Number

C
Transaction ID : SB21B.15624
Amount of Each Disbursement this Period
24.85

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement WALSH REIMBURSEMENT [SB21B.15515]: TRAVEL: GROUND TRANSPORTATION
Candidate Name

Category/Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 05 / 2017

FEC Identification Number

C
Transaction ID : SB21B.15625
Amount of Each Disbursement this Period
20.23

Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement WALSH REIMBURSEMENT [SB21B.15515]: TRAVEL: GROUND TRANSPORTATION
Candidate Name

Category/Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 05 / 2017

FEC Identification Number

C
Transaction ID : SB21B.15626
Amount of Each Disbursement this Period
25.06

Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement WALSH REIMBURSEMENT [SB21B.15515]: TRAVEL: GROUND TRANSPORTATION
Candidate Name

Category/Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 06 / 2017

FEC Identification Number

C
Transaction ID : SB21B.15631
Amount of Each Disbursement this Period
53.43

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement WALSH REIMBURSEMENT [SB21B.15515]: TRAVEL: GROUND TRANSPORTATION
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 07 / 2017

FEC Identification Number

C
Transaction ID : SB21B.15628
Amount of Each Disbursement this Period
62.83

Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement WALSH REIMBURSEMENT [SB21B.15515]: TRAVEL: GROUND TRANSPORTATION
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 07 / 2017

FEC Identification Number

C
Transaction ID : SB21B.15629
Amount of Each Disbursement this Period
29.23

Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement WALSH REIMBURSEMENT [SB21B.15515]: TRAVEL: GROUND TRANSPORTATION
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 07 / 2017

FEC Identification Number

C
Transaction ID : SB21B.1563t
Amount of Each Disbursement this Period
31.46

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement WALSH REIMBURSEMENT [SB21B.15515]: TRAVEL: GROUND TRANSPORTATION
Candidate Name

Category/Type

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 08 / 2017

FEC Identification Number

C
Transaction ID : SB21B.15621
Amount of Each Disbursement this Period
38.06

Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement MASON REIMBURSEMENT [SB21B.15517]: TRAVEL: GROUND TRANSPORTATION
Candidate Name

Category/Type

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

Date of Disbursement

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

FEC Identification Number

C
Transaction ID : SB21B.15618
Amount of Each Disbursement this Period
15.92

Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement WALSH REIMBURSEMENT [SB21B.15515]: TRAVEL: GROUND TRANSPORTATION
Candidate Name

Category/Type

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

Date of Disbursement

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

FEC Identification Number

C
Transaction ID : SB21B.15627
Amount of Each Disbursement this Period
25.53

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement MASON REIMBURSEMENT [SB21B.15517]: TRAVEL: GROUND TRANSPORTATION
Candidate Name

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

Date of Disbursement
M M / D D / Y Y Y Y Y Y
12 / 13 / 2017

FEC Identification Number
C
Transaction ID : SB21B.15619
Amount of Each Disbursement this Period
36.51

Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement MASON REIMBURSEMENT [SB21B.15517]: TRAVEL: GROUND TRANSPORTATION
Candidate Name

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

Date of Disbursement
M M / D D / Y Y Y Y Y Y
12 / 15 / 2017

FEC Identification Number
C
Transaction ID : SB21B.15620
Amount of Each Disbursement this Period
16.64

Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement AHEARN REIMBURSEMENT [SB21B.15935]: TRAVEL: GROUND TRANSPORTATION
Candidate Name

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

Date of Disbursement
M M / D D / Y Y Y Y Y Y
01 / 10 / 2018

FEC Identification Number
C
Transaction ID : SB21B.15984
Amount of Each Disbursement this Period
8.42

Memo Item

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

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

0.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
AHEARN REIMBURSEMENT [SB21B.15935]: TRAVEL: GROUND
TRANSPORTATION
Candidate Name

Category/
Type

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

Date of Disbursement

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

FEC Identification Number

C []
Transaction ID : SB21B.15987
 Amount of Each Disbursement this Period
 [] 11.87 []

Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
AHEARN REIMBURSEMENT [SB21B.15935]: TRAVEL: GROUND
TRANSPORTATION
Candidate Name

Category/
Type

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

Date of Disbursement

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

FEC Identification Number

C []
Transaction ID : SB21B.15985
 Amount of Each Disbursement this Period
 [] 7.68 []

Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
AHEARN REIMBURSEMENT [SB21B.15935]: TRAVEL: GROUND
TRANSPORTATION
Candidate Name

Category/
Type

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

Date of Disbursement

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

FEC Identification Number

C []
Transaction ID : SB21B.15986
 Amount of Each Disbursement this Period
 [] 7.68 []

Memo Item

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

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

[]	0.00	[]
[]		[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
AHEARN REIMBURSEMENT [SB21B.15935]: TRAVEL: GROUND
TRANSPORTATION
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.15988

Amount of Each Disbursement this Period

11.89

Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
AHEARN REIMBURSEMENT [SB21B.15935]: TRAVEL: GROUND
TRANSPORTATION
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.15989

Amount of Each Disbursement this Period

8.12

Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
WALSH REIMBURSEMENT [SB21B.17077]: TRAVEL: GROUND
TRANSPORTATION
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 22 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.17080

Amount of Each Disbursement this Period

52.37

Memo Item

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

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

0.00

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
AHEARN REIMBURSEMENT [SB21B.16692]: TRAVEL: GROUND
TRANSPORTATION
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 06 / 2018

FEC Identification Number

C
Transaction ID : SB21B.16734
Amount of Each Disbursement this Period
65.24

Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
AHEARN REIMBURSEMENT [SB21B. 16692]: TRAVEL: GROUND
TRANSPORTATION
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 07 / 2018

FEC Identification Number

C
Transaction ID : SB21B.16735
Amount of Each Disbursement this Period
24.75

Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
AHEARN REIMBURSEMENT [SB21B.16692]: TRAVEL: GROUND
TRANSPORTATION
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 07 / 2018

FEC Identification Number

C
Transaction ID : SB21B.16736
Amount of Each Disbursement this Period
10.64

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
AHEARN REIMBURSEMENT [SB21B.16692]: TRAVEL: GROUND
TRANSPORTATION
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 07 / 2018

FEC Identification Number

C
Transaction ID : SB21B.16737
Amount of Each Disbursement this Period
5.97

Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
AHEARN REIMBURSEMENT [SB21B.16692]: TRAVEL: GROUND
TRANSPORTATION
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 09 / 2018

FEC Identification Number

C
Transaction ID : SB21B.16738
Amount of Each Disbursement this Period
13.61

Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
AHEARN REIMBURSEMENT [SB21B.16692]: TRAVEL: GROUND
TRANSPORTATION
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 09 / 2018

FEC Identification Number

C
Transaction ID : SB21B.16738
Amount of Each Disbursement this Period
14.11

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
AHEARN REIMBURSEMENT [SB21B.16692]: TRAVEL: GROUND
TRANSPORTATION
Candidate Name

Category/
Type

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 11 / 2018

FEC Identification Number

C
Transaction ID : SB21B.16742
Amount of Each Disbursement this Period
18.86

Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
AHEARN REIMBURSEMENT [SB21B.16692]: TRAVEL: GROUND
TRANSPORTATION
Candidate Name

Category/
Type

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 13 / 2018

FEC Identification Number

C
Transaction ID : SB21B.16743
Amount of Each Disbursement this Period
12.04

Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
AHEARN REIMBURSEMENT [SB21B.16692]: TRAVEL: GROUND
TRANSPORTATION
Candidate Name

Category/
Type

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 15 / 2018

FEC Identification Number

C
Transaction ID : SB21B.16744
Amount of Each Disbursement this Period
23.57

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
AHEARN REIMBURSEMENT [SB21B.16692]: TRAVEL: GROUND
TRANSPORTATION
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 15 / 2018

FEC Identification Number

C
Transaction ID : SB21B.16745
Amount of Each Disbursement this Period
7.85

Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
AHEARN REIMBURSEMENT [SB21B.16692]: TRAVEL: GROUND
TRANSPORTATION
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 15 / 2018

FEC Identification Number

C
Transaction ID : SB21B.16746
Amount of Each Disbursement this Period
14.45

Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
AHEARN REIMBURSEMENT [SB21B.16692]: TRAVEL: GROUND
TRANSPORTATION
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 16 / 2018

FEC Identification Number

C
Transaction ID : SB21B.16747
Amount of Each Disbursement this Period
11.96

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
AHEARN REIMBURSEMENT [SB21B.16692]: TRAVEL: GROUND
TRANSPORTATION
Candidate Name

Category/
Type

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 16 / 2018

FEC Identification Number

C []
Transaction ID : SB21B.16748

Amount of Each Disbursement this Period

[] 11.44

Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
AHEARN REIMBURSEMENT [SB21B.16692]: TRAVEL: GROUND
TRANSPORTATION
Candidate Name

Category/
Type

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 16 / 2018

FEC Identification Number

C []
Transaction ID : SB21B.16749

Amount of Each Disbursement this Period

[] 13.02

Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
AHEARN REIMBURSEMENT [SB21B.16692]: TRAVEL: GROUND
TRANSPORTATION
Candidate Name

Category/
Type

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 16 / 2018

FEC Identification Number

C []
Transaction ID : SB21B.16750

Amount of Each Disbursement this Period

[] 11.89

Memo Item

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

[] 0.00

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

[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
AHEARN REIMBURSEMENT [SB21B.16692]: TRAVEL: GROUND
TRANSPORTATION
Candidate Name

Category/
Type

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 19 / 2018

FEC Identification Number

C
Transaction ID : SB21B.16751
Amount of Each Disbursement this Period
7.10

Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
AHEARN REIMBURSEMENT [SB21B.16692]: TRAVEL: GROUND
TRANSPORTATION
Candidate Name

Category/
Type

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 19 / 2018

FEC Identification Number

C
Transaction ID : SB21B.16752
Amount of Each Disbursement this Period
14.17

Memo Item

Full Name (Last, First, Middle Initial)

C. UNITED AIRLINES

Mailing Address 900 GRAND PLAZA DR
SUITE 430

City HOUSTON State TX Zip Code 77067

Purpose of Disbursement
AHEARN REIMBURSEMENT [SB21B.16692]: TRAVEL: AIR
Candidate Name

Category/
Type

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 05 / 2018

FEC Identification Number

C
Transaction ID : SB21B.16741
Amount of Each Disbursement this Period
1363.60

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. UNITED AIRLINES		Date of Disbursement MM / DD / YYYY 03 / 05 / 2018
Mailing Address 900 GRAND PLAZA DR SUITE 430		FEC Identification Number C [REDACTED] Transaction ID : SB21B.16779 Amount of Each Disbursement this Period 1198.60
City HOUSTON	State TX	Zip Code 77067
Purpose of Disbursement 1ST BANKCARD PMT [SB21B. 16673]: TRAVEL: AIR		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. UNITED AIRLINES		Date of Disbursement MM / DD / YYYY 03 / 05 / 2018
Mailing Address 900 GRAND PLAZA DR SUITE 430		FEC Identification Number C [REDACTED] Transaction ID : SB21B.16780 Amount of Each Disbursement this Period 82.00
City HOUSTON	State TX	Zip Code 77067
Purpose of Disbursement 1ST BANKCARD PMT [SB21B.16673]: TRAVEL: AIR		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. WALSH, BRIAN, , ,		Date of Disbursement MM / DD / YYYY 01 / 30 / 2018
Mailing Address C/O AMERICA FIRST ACTION INC 1400 CRYSTAL DRIVE STE 850		FEC Identification Number C [REDACTED] Transaction ID : SB21B.15511 Amount of Each Disbursement this Period 2961.03
City ARLINGTON	State VA	Zip Code 22202
Purpose of Disbursement REIMBURSEMENT: SEE MEMO ENTRIES IF REQUIRED		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	2961.03
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial) A. WALSH, BRIAN, , ,		Date of Disbursement MM / DD / YYYY 02 / 27 / 2018
Mailing Address C/O AMERICA FIRST ACTION INC 1400 CRYSTAL DRIVE STE 850		FEC Identification Number C [] Transaction ID : SB21B.15929 Amount of Each Disbursement this Period 2057.58
City ARLINGTON	State VA	Zip Code 22202
Purpose of Disbursement REIMBURSEMENT: SEE MEMO ENTRIES IF REQUIRED		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. WALSH, BRIAN, , ,		Date of Disbursement MM / DD / YYYY 03 / 26 / 2018
Mailing Address C/O AMERICA FIRST ACTION INC 1400 CRYSTAL DRIVE STE 850		FEC Identification Number C [] Transaction ID : SB21B.17077 Amount of Each Disbursement this Period 1305.32
City ARLINGTON	State VA	Zip Code 22202
Purpose of Disbursement REIMBURSEMENT: SEE MEMO ENTRIES IF REQUIRED		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY [] / [] / []
Mailing Address		FEC Identification Number C [] Amount of Each Disbursement this Period []
City	State	Zip Code
Purpose of Disbursement		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	3362.90
TOTAL This Period (last page this line number only).....▶	450527.73

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

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NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.

A. TALCOTT, MARIA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 186 ANTLER LANE

City GOLDEN State CO Zip Code 80403

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 16 / 2018

FEC Identification Number: C

Transaction ID : SB28A.16693

Amount of Each Disbursement this Period: 500.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	500.00

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

NAME OF COMMITTEE (In Full) AMERICA FIRST ACTION, INC.	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00637512 </div>
--	--

Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item ALCOM PRINTING GROUP, INC		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 02 / 28 / 2018	
Mailing Address 140 CHRISTOPHER LANE		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">11470.71</div>	
City HARLEYSVILLE	State PA	Zip Code 19438	
Purpose of Expenditure DIRECT MAIL: POSTAGE		Category/Type 	
Name of Federal Candidate: LAMB, CONOR, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>18</u> State: <u>PA</u>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ <u>Special-General</u>	
<div style="border: 1px solid black; padding: 2px; text-align: right;">1057764.61</div>		M M / D D / Y Y Y Y Y Y 02 / 28 / 2018	

Full Name of Payee <input type="checkbox"/> Memo Item ALCOM PRINTING GROUP, INC		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 05 / 2018	
Mailing Address 140 CHRISTOPHER LANE		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">11470.71</div>	
City HARLEYSVILLE	State PA	Zip Code 19438	
Purpose of Expenditure DIRECT MAIL: POSTAGE		Category/Type 	
Name of Federal Candidate: LAMB, CONOR, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>18</u> State: <u>PA</u>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ <u>Special-General</u>	
<div style="border: 1px solid black; padding: 2px; text-align: right;">1069235.32</div>		M M / D D / Y Y Y Y Y Y 03 / 05 / 2018	

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">22941.42</div>
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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.

PROCH, JON, , , *[Electronically Filed]* Date M M / D D / Y Y Y Y Y Y
04 / 12 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.
FEC IDENTIFICATION NUMBER
C C00637512

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

Full Name of Payee
ALCOM PRINTING GROUP, INC
Mailing Address
140 CHRISTOPHER LANE
City
HARLEYSVILLE State
PA Zip Code
19438
Purpose of Expenditure
DIRECT MAIL POSTAGE
Category/Type
Name of Federal Candidate:
LAMB, CONOR, , ,
Office Sought:
House District: 18
State: PA
Calendar Year-To-Date
Per Election for Office Sought
1097251.53
Disbursement For:
Other (specify)
Special-General

Full Name of Payee
AMERICAN MEDIA & ADVOCACY GROUP
Mailing Address
815 SLATERS LANE
City
ALEXANDRIA State
VA Zip Code
22314
Purpose of Expenditure
TV PLACED MEDIA
Category/Type
Name of Federal Candidate:
LAMB, CONOR, , ,
Office Sought:
House District: 18
State: PA
Calendar Year-To-Date
Per Election for Office Sought
1029695.40
Disbursement For:
Other (specify)
Special-General

(a) SUBTOTAL of Itemized Independent Expenditures
841166.11
(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.

PROCH, JON, , ,

[Electronically Filed]

Date 04 / 12 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.
FEC IDENTIFICATION NUMBER
C C00637512

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

Full Name of Payee CHECKMATE STRATEGIES, LLC
Mailing Address 5 BANYAN COURT
City JACKSON State NJ Zip Code 08527
Purpose of Expenditure DIRECT MAIL: POSTAGE AND PRINTING
Category/Type
Date of Public Distribution/Dissemination 02 / 28 / 2018
Amount 6598.50
Transaction ID : SE.14201
Date of Disbursement or Obligation 02 / 28 / 2018

Name of Federal Candidate: LAMB, CONOR, ,
Support Oppose
Office Sought: House District: 18
President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 1046293.90
Disbursement For: Primary General
Other (specify) Special-General

Full Name of Payee CHECKMATE STRATEGIES, LLC
Mailing Address 5 BANYAN COURT
City JACKSON State NJ Zip Code 08527
Purpose of Expenditure DIRECT MAIL: PRINTING
Category/Type
Date of Public Distribution/Dissemination 03 / 05 / 2018
Amount 6545.50
Transaction ID : SE.14215
Date of Disbursement or Obligation 03 / 05 / 2018

Name of Federal Candidate: LAMB, CONOR, ,
Support Oppose
Office Sought: House District: 18
President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 1075780.82
Disbursement For: Primary General
Other (specify) Special-General

(a) SUBTOTAL of Itemized Independent Expenditures 13144.00
(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.

PROCH, JON, ,

[Electronically Filed]

Date

04 / 12 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.
FEC IDENTIFICATION NUMBER
C C00637512

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

Full Name of Payee CHECKMATE STRATEGIES, LLC
Mailing Address 5 BANYAN COURT
City JACKSON State NJ Zip Code 08527
Purpose of Expenditure DIRECT MAIL PRINTING
Name of Federal Candidate: LAMB, CONOR, , ,
Office Sought: House District: 18 State: PA
Calendar Year-To-Date Per Election for Office Sought 1103797.03
Disbursement For: Other (specify) Special-General

Full Name of Payee PARSCALE STRATEGY, LLC
Mailing Address 2637 E ATLANTIC BLVD# 42471
City POMPANO BEACH State FL Zip Code 33062
Purpose of Expenditure DIGITAL ADVERTISING
Name of Federal Candidate: LAMB, CONOR, , ,
Office Sought: House District: 18 State: PA
Calendar Year-To-Date Per Election for Office Sought 200000.00
Disbursement For: Other (specify) Special-General

(a) SUBTOTAL of Itemized Independent Expenditures 206545.50
(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.

Signature: PROCH, JON, , , [Electronically Filed] Date: 04 / 12 / 2018

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
AMERICA FIRST ACTION, INC.
FEC IDENTIFICATION NUMBER
C C00637512

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

Full Name of Payee: REDPRINT STRATEGY
Mailing Address: PO BOX 710993
City: HERNDON, State: VA, Zip Code: 20171
Purpose of Expenditure: PRODUCTION COST
Date of Public Distribution/Dissemination: 02/27/2018
Amount: 10000.00
Transaction ID: SE.14197
Date of Disbursement or Obligation: 02/27/2018
Name of Federal Candidate: LAMB, CONOR, , ,
Office Sought: House, District: 18, State: PA
Disbursement For: Other (specify) Special-General

Full Name of Payee: REDPRINT STRATEGY
Mailing Address: PO BOX 710993
City: HERNDON, State: VA, Zip Code: 20171
Purpose of Expenditure: PRODUCTION COST
Date of Public Distribution/Dissemination: 03/06/2018
Amount: 10000.00
Transaction ID: SE.14218
Date of Disbursement or Obligation: 03/06/2018
Name of Federal Candidate: LAMB, CONOR, , ,
Office Sought: House, District: 18, State: PA
Disbursement For: Other (specify) Special-General

Table with 2 columns: Description and Amount.
(a) SUBTOTAL of Itemized Independent Expenditures: 20000.00
(b) SUBTOTAL of Unitemized Independent Expenditures:
(c) TOTAL Independent Expenditures: 1103797.03

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.

Signature: PROCH, JON, , , [Electronically Filed] Date: 04/12/2018