

# 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**  
**Senate Leadership Fund**

ADDRESS (number and street) **45 North Hill Drive**  
**Ste 100**  
 Check if different than previously reported. (ACC) **Warrenton VA 20186**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00571703** 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  /  /  in the State of

5. Covering Period   /   /    through   /   /

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

Signature of Treasurer *Crosby, Caleb, , ,* [Electronically Filed] Date   /   /

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**

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Page 2

Write or Type Committee Name

**Senate Leadership Fund**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>		30841150.22
(b) Cash on Hand at Beginning of Reporting Period.....	117505102.12	
(c) Total Receipts (from Line 19) .....	37434712.14	138261724.33
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	154939814.26	169102874.55
7. Total Disbursements (from Line 31).....	28791848.48	42954908.77
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	126147965.78	126147965.78
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> 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

**Senate Leadership Fund**

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).....	37382975.00	138202025.00
(ii) Unitemized .....	2937.14	9277.98
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	37385912.14	138211302.98
(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) .....	37385912.14	138211302.98
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).....	48800.00	50421.35
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)).....▶	37434712.14	138261724.33
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	37434712.14	138261724.33

**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 .....	7458429.96	12039608.68
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	7458429.96	12039608.68
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3500000.00	9855556.82
24. Independent Expenditures (use Schedule E) .....	17833418.52	21059743.27
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	28791848.48	42954908.77
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	28791848.48	42954908.77

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	37385912.14	138211302.98
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	37385912.14	138211302.98
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	7458429.96	12039608.68
37. Offsets to Operating Expenditures (from Line 15, page 3).....	48800.00	50421.35
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	7409629.96	11989187.33

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

Form/Schedule: F3XA  
Transaction ID :

1. Unless otherwise noted, none of the expenditures reported are allocable to a candidate. 2. For all Ultimate Vendor Payee disbursements, any transaction below the itemization threshold in the aggregate will not appear as a memo entry.

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 119
	<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)  
**Senate Leadership Fund**

**A. QUINN, DON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 715 AUBURN  
 City PONTIAC State MI Zip Code 48342-3306  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NCE Occupation (for Individual) MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 08 / 02 / 2020  
**Transaction ID : SA11A.15570**  
 Amount of Each Receipt this Period 10000.00  
 Memo Item CONTRIBUTION

**B. CLEAVER, LAIRD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 730 REEF RD  
 City VERO BEACH State FL Zip Code 32963-2919  
 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 ▼ 90000.00

Date of Receipt 08 / 03 / 2020  
**Transaction ID : SA11A.15571**  
 Amount of Each Receipt this Period 90000.00  
 Memo Item CONTRIBUTION

**C. DREEBEN, ALAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6511 TRI COUNTY PARKWAY  
 City SCHERTZ State TX Zip Code 78154-3219  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) REPUBLICN NATIONAL DISTRIBUTING COMPAN Occupation (for Individual) OWNER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 08 / 03 / 2020  
**Transaction ID : SA11A.15517**  
 Amount of Each Receipt this Period 50000.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	150000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 119
<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)  
**Senate Leadership Fund**

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

Mailing Address 3778 TIMBERLAKE

City RICHFIELD	State OH	Zip Code 44286-9187
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HERSCHAL PRODUCTS	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
08 / 04 / 2020

**Transaction ID : SA11A.15584**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

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

Mailing Address 8 EXECUTIVE CIRCLE

City IRVINE	State CA	Zip Code 92614-6746
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WESTERN NATIONAL GROUP	Occupation (for Individual) CEO
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250000.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
08 / 04 / 2020

**Transaction ID : SA11A.15566**

Amount of Each Receipt this Period  
250000.00

Memo Item  
CONTRIBUTION

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

Mailing Address P.O. BOX 2638

City KETCHUM	State ID	Zip Code 83340-2601
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TBM LLC	Occupation (for Individual) CURATOR
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2800.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
08 / 04 / 2020

**Transaction ID : SA11A.15586**

Amount of Each Receipt this Period  
2800.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	253050.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 119
<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)  
**Senate Leadership Fund**

**A. DIRECT SUPPLY**

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

Mailing Address 6767 NORTH INDUSTRIAL ROAD

City MILWAUKEE	State WI	Zip Code 53223-5815
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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 ▼  
20000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2020

**Transaction ID : SA11A.15567**

Amount of Each Receipt this Period  
20000.00

Memo Item  
CONTRIBUTION

**B. FERTITTA, FRANK, J., , III**

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

Mailing Address P.O. BOX 379045

City LAS VEGAS	State NV	Zip Code 89137-9045
-------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		05		2020

**Transaction ID : SA11A.15573**

Amount of Each Receipt this Period  
750000.00

Memo Item  
CONTRIBUTION

**C. FERTITTA, LORENZO, J., ,**

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

Mailing Address 1801 W. CHARLESTON BLVD  
SUITE 600

City LAS VEGAS	State NV	Zip Code 89102-2328
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ZUFFA	Occupation (for Individual) CHAIRMAN & CEO
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
750000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		05		2020

**Transaction ID : SA11A.15574**

Amount of Each Receipt this Period  
750000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1520000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 119
<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)  
**Senate Leadership Fund**

**A. GLENN, E. VERNON, F., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1000 JOHNNIE DODDS BLVD.  
 SUITE 103/BOX 319  
 City MOUNT PLEASANT State SC Zip Code 29464-3135  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) LAWYER/WRITER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 08 / 05 / 2020  
**Transaction ID : SA11A.15578**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item CONTRIBUTION

**B. CLEMENTS MIDWAY PARTNERS**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6372 BRAXTON COURT  
 City MURRAY State UT Zip Code 84121-2199  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 08 / 05 / 2020  
**Transaction ID : SA11A.15577**  
 Amount of Each Receipt this Period 25000.00  
 Memo Item CONTRIBUTION

**C. MARATHON PETROLEUM COMPANY, LP**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 539 SOUTH MAIN STREET  
 City FINDLAY State OH Zip Code 45840-3229  
 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 ▼ 500000.00

Date of Receipt 08 / 05 / 2020  
**Transaction ID : SA11A.15576**  
 Amount of Each Receipt this Period 500000.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	527500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 119
<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)  
**Senate Leadership Fund**

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

Mailing Address 11450 TURTLE BEACH ROAD

City NORTH PALM BEACH	State FL	Zip Code 33408-3343
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BUCKLEY MUETHING CAPITAL MANAGEMENT	Occupation (for Individual) PRESIDENT
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		06		2020

**Transaction ID : SA11A.15581**

Amount of Each Receipt this Period  
400000.00

Memo Item  
CONTRIBUTION

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

Mailing Address P.O. BOX 29600

City ROANOKE	State VA	Zip Code 24018-0796
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MEDICAL FACILITIES OF AMERICA	Occupation (for Individual) CHAIRMAN
--	---

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
08		06		2020

**Transaction ID : SA11A.15582**

Amount of Each Receipt this Period  
50000.00

Memo Item  
CONTRIBUTION

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

Mailing Address 328 RILEYVILLE RD

City EAST AMWELL TOWNSH	State NJ	Zip Code 08551-1501
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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
08		06		2020

**Transaction ID : SA11A.16586**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	451000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 119
<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)  
**Senate Leadership Fund**

**A. PINNACLE WEST CAPITAL CORPORATION**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX53940  
 City PHOENIX State AZ Zip Code 85072-3940  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 08 / 06 / 2020  
**Transaction ID : SA11A.15583**  
 Amount of Each Receipt this Period 50000.00  
 Memo Item  
**CONTRIBUTION**

**B. OBERNDORF, WILLIAM, E., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 615 FRONT STREET  
 City SAN FRANCISCO State CA Zip Code 94111-1913  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 OBERNDORF ENTERPRISES, LLC EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000000.00

Date of Receipt 08 / 07 / 2020  
**Transaction ID : SA11A.16588**  
 Amount of Each Receipt this Period 1000000.00  
 Memo Item  
**CONTRIBUTION**

**C. KING, JIM, D., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1033 SKOKIE BLVD SUITE 660  
 City NORTHBROOK State IL Zip Code 60062-4107  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 RETIRED RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 08 / 2020  
**Transaction ID : SA11A.16595**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1055000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 119
	<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)  
**Senate Leadership Fund**

**A. WOLF, ALEXANDER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 297 OSPREY LANE  
 City ASHLAND State NE Zip Code 68003-7431  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) KOLEY JESSEN Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 08 / 2020  
**Transaction ID : SA11A.16596**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

**B. BOUSKY, TIM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9016 N ALLEN RD, STE 1A  
 City PEORIA State IL Zip Code 61615-1513  
 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 08 / 09 / 2020  
**Transaction ID : SA11A.16597**  
 Amount of Each Receipt this Period 500.00  
 Memo Item CONTRIBUTION

**C. LAPWORTH, CHARLES, , , III**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 411 WALNUT ST #7991  
 City GREEN COVE SPRINGS State FL Zip Code 32043-3443  
 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 ▼ 8000.00

Date of Receipt 08 / 09 / 2020  
**Transaction ID : SA11A.16598**  
 Amount of Each Receipt this Period 8000.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	8750.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 14 OF 119
	(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)  
**Senate Leadership Fund**

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

Mailing Address 1 UNION SQUARE SOUTH  
 APARTMENT 23A

City NEW YORK State NY Zip Code 10003-4194

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

Name of Employer (for Individual) JANE STREET Occupation (for Individual) DIRECTOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 08 / 11 / 2020  
**Transaction ID : SA11A.16591**

Amount of Each Receipt this Period 50000.00

Memo Item CONTRIBUTION

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

Mailing Address 8601 FOUNTAIN BLUE CT

City VALLEJO State CA Zip Code 94591-8568

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

Name of Employer (for Individual) KAISER PERMANENTE Occupation (for Individual) REGISTERED NURSE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 11 / 2020  
**Transaction ID : SA11A.16604**

Amount of Each Receipt this Period 500.00

Memo Item CONTRIBUTION

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

Mailing Address 8601 FOUNTAIN BLUE CT

City VALLEJO State CA Zip Code 94591-8568

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

Name of Employer (for Individual) U.S. GOVERNMENT Occupation (for Individual) MEDICAL PHYSICIST

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 11 / 2020  
**Transaction ID : SA11A.16603**

Amount of Each Receipt this Period 500.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 51000.00

**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 15 OF 119
	(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)  
**Senate Leadership Fund**

**A. SATIANI, PUJA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1928 FLOWERING TREE TERRACE  
 City SILVER SPRING State MD Zip Code 20902-5816  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) ENTREPRENEUR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **08 / 12 / 2020**  
**Transaction ID : SA11A.16606**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 CONTRIBUTION

**B. CAVANAUGH, JEFF, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 505  
 City OSHTEMO State MI Zip Code 49077-0505  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SPARTAN PAPERBOARD Occupation (for Individual) OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **08 / 13 / 2020**  
**Transaction ID : SA11A.16629**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 CONTRIBUTION

**C. WRH INCOME PROPERTIES**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 100 3RD STREET SOUTH SUITE 300  
 City ST. PETERSBURG State FL Zip Code 33701-4250  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt **08 / 13 / 2020**  
**Transaction ID : SA11A.16602**  
 Amount of Each Receipt this Period 50000.00  
 Memo Item  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	51500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 119
	<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)  
**Senate Leadership Fund**

**A. CAMERON, RONALD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 21440  
 City NORTH LITTLE ROCK State AR Zip Code 72119-  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MOUNTAIRE CORP Occupation (for Individual) CHAIRMAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1250000.00

Date of Receipt 08 / 14 / 2020  
**Transaction ID : SA11A.16616**  
 Amount of Each Receipt this Period 1000000.00  
 Memo Item CONTRIBUTION

**B. CHAZEN, STEPHEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 1229  
 City BELLAIRE State TX Zip Code 77402-1229  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MAGNOLIA OIL & GAS Occupation (for Individual) CORPORATE OFFICER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350000.00

Date of Receipt 08 / 16 / 2020  
**Transaction ID : SA11A.16628**  
 Amount of Each Receipt this Period 150000.00  
 Memo Item CONTRIBUTION

**C. COLBURN, RICHARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 555 SKOKIE BOULEVARD SUITE 555  
 City NORTHBROOK State IL Zip Code 60062-2854  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PAYROLL & INSURANCE GROUP, INC. Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250000.00

Date of Receipt 08 / 17 / 2020  
**Transaction ID : SA11A.16631**  
 Amount of Each Receipt this Period 250000.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1400000.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 119
	<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)  
**Senate Leadership Fund**

**A. ROSENTHAL, JONATHAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 210 WOODS END DR.  
 City BASKING RIDGE State NJ Zip Code 07920-2132  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BRIGHOUSE FINANCIAL Occupation (for Individual) CIO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 17 / 2020  
**Transaction ID : SA11A.16633**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item CONTRIBUTION

**B. STEIGERWALT, ERIC, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8716 CHEWTON GLEN DRIVE  
 City WAXHAW State NC Zip Code 28173-6871  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BRIGHOUSE FINANCIAL Occupation (for Individual) INSURANCE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 17 / 2020  
**Transaction ID : SA11A.16632**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item CONTRIBUTION

**C. ANDERSON, FREDRICK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 100 PERQUIMANS DRIVE  
 City RALEIGH State NC Zip Code 27609-6938  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ANDERSON AUTOMOTIVE GROUP Occupation (for Individual) EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 08 / 18 / 2020  
**Transaction ID : SA11A.16654**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	15000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 119
	<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)  
**Senate Leadership Fund**

**A. BOWLES, DAVID, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1435 WYNNEMOOR WAY  
 City FORT WASHINGTON State PA Zip Code 19034-2826  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PTI Occupation (for Individual) MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 18 / 2020  
**Transaction ID : SA11A.16663**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
**CONTRIBUTION**

**B. KEVLIN, JAMES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address BOX 270874  
 City FLOWER MOUND State TX Zip Code 75027-0874  
 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 ▼ 2800.00

Date of Receipt 08 / 18 / 2020  
**Transaction ID : SA11A.16655**  
 Amount of Each Receipt this Period 2800.00  
 Memo Item  
**CONTRIBUTION**

**C. PENDRI, KIRAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 303 THIRD STREET, UNIT 603  
 City CAMBRIDGE State MA Zip Code 02142-1167  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ESCIENTIA LIFE SCIENCES, LLC Occupation (for Individual) DIRECTOR  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 18 / 2020  
**Transaction ID : SA11A.16664**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3300.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 119
<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)  
**Senate Leadership Fund**

**A. STERN, MARC, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 23700 MALIBU COLONY ROAD  
 City MALIBU State CA Zip Code 90265-6629  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) THE TCW GROUP, INC Occupation (for Individual) EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 150000.00

Date of Receipt 08 / 18 / 2020  
**Transaction ID : SA11A.16638**  
 Amount of Each Receipt this Period 80000.00  
 Memo Item CONTRIBUTION

**B. BEAL, D. ANDREW, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6000 LEGACY DRIVE  
 City PLANO State TX Zip Code 75024-3601  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BEAL BANK Occupation (for Individual) CHAIRMAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000000.00

Date of Receipt 08 / 19 / 2020  
**Transaction ID : SA11A.16644**  
 Amount of Each Receipt this Period 1000000.00  
 Memo Item CONTRIBUTION

**C. MATTHEWS, EDWARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 45 MONTADALE CIR.  
 City PRINCETON State NJ Zip Code 08540-7619  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) C.V. STARR & CO. INC Occupation (for Individual) PRESIDENT AND DIRECTOR  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 08 / 19 / 2020  
**Transaction ID : SA11A.16643**  
 Amount of Each Receipt this Period 10000.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1090000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 119
	<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)  
**Senate Leadership Fund**

**A. BARNETT, HOYT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5815 LIVE OAK ROAD  
 City LAKELAND State FL Zip Code 33813-3082  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PUBLIX Occupation (for Individual) BOARD MEMBER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 08 / 20 / 2020  
**Transaction ID : SA11A.16648**  
 Amount of Each Receipt this Period 50000.00  
 Memo Item CONTRIBUTION

**B. DARKEN, LAWRENCE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10452 RATHER RD  
 City KNOXVILLE State TN Zip Code 37931-2125  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MIRION Occupation (for Individual) PHYSICIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 20 / 2020  
**Transaction ID : SA11A.16678**  
 Amount of Each Receipt this Period 500.00  
 Memo Item CONTRIBUTION

**C. GUMPRECHT, TOM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4714 NORTHEAST 36TH STREET  
 City SEATTLE State WA Zip Code 98105-5348  
 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 08 / 20 / 2020  
**Transaction ID : SA11A.16672**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	50750.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 119
	<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)  
**Senate Leadership Fund**

**A. KEPLEY, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 8512  
 City ROANOKE State VA Zip Code 24014-0512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) REAL ESTATE Occupation (for Individual) SELF-EMPLOYED  
 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  
 08 / 20 / 2020  
**Transaction ID : SA11A.16649**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
**CONTRIBUTION**

**B. KEPLEY, MARY ELIZABETH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 8512  
 City ROANOKE State VA Zip Code 24014-0512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) REAL ESTATE Occupation (for Individual) SELF-EMPLOYED  
 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  
 08 / 20 / 2020  
**Transaction ID : SA11A.16650**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
**CONTRIBUTION**

**C. MAYER, HENRY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3025 BUTLERS BLUFF DR.  
 City CAPE CHARLES State VA Zip Code 23310-1437  
 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  
 08 / 20 / 2020  
**Transaction ID : SA11A.16675**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 119
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Senate Leadership Fund**

**A. MCINERNEY, THOMAS, E., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2 MANITOU COURT  
 City WESTPORT State CT Zip Code 06880-6006  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BLUFF POINT ASSOCIATES Occupation (for Individual) V.C. INVESTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300000.00

Date of Receipt 08 / 20 / 2020  
**Transaction ID : SA11A.16651**  
 Amount of Each Receipt this Period 200000.00  
 Memo Item CONTRIBUTION

**B. PRATT, WALLACE, , , JR.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 700 ROLLING MEADOW  
 City PFLUGERVILLE State TX Zip Code 78660-2727  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FIELDCOMM GROUP Occupation (for Individual) ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 20 / 2020  
**Transaction ID : SA11A.16671**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

**C. SCHWEICKHARDT, REYNOLD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1918 SHIVER DRIVE  
 City ALEXANDRIA State VA Zip Code 22307-1628  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) US GSA Occupation (for Individual) SENIOR ADVISOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 20 / 2020  
**Transaction ID : SA11A.16679**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	200500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 119
	<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)  
**Senate Leadership Fund**

**A. STERN, MARC, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 23700 MALIBU COLONY ROAD  
 City MALIBU State CA Zip Code 90265-6629  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) THE TCW GROUP, INC Occupation (for Individual) EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 150000.00

Date of Receipt 08 / 20 / 2020  
**Transaction ID : SA11A.16653**  
 Amount of Each Receipt this Period 70000.00  
 Memo Item CONTRIBUTION

**B. WYNN, STEPHEN, A., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2449 N. TENAYA WAY #35290  
 City LAS VEGAS State NV Zip Code 89133-8093  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) VALMORE GP Occupation (for Individual) RETIRED/ENTREPRENEUR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4000000.00

Date of Receipt 08 / 20 / 2020  
**Transaction ID : SA11A.16658**  
 Amount of Each Receipt this Period 4000000.00  
 Memo Item CONTRIBUTION

**C. HECLA MINING COMPANY**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6500 MINERAL DRIVE  
 City COEUR D ALENE State ID Zip Code 83815-9861  
 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 ▼ 60000.00

Date of Receipt 08 / 20 / 2020  
**Transaction ID : SA11A.16652**  
 Amount of Each Receipt this Period 60000.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4130000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 24 OF 119
<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)  
**Senate Leadership Fund**

**A. ADLER, JOSHUA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 23 RUNNING CEDAR ROAD  
 City PRINCETON State NJ Zip Code 08540-7561  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BA CONSTRUCTION Occupation (for Individual) PROPERTY MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 08 / 21 / 2020  
**Transaction ID : SA11A.16685**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item CONTRIBUTION

**B. KEYES, GEOFFREY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 169 STACEY HOLLOW LN  
 City LAFAYETTE State IN Zip Code 47905-7598  
 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 08 / 21 / 2020  
**Transaction ID : SA11A.16686**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

**C. LAMB, ERIC, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 645 EVERGREEN ST  
 City MENLO PARK State CA Zip Code 94025-5718  
 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 08 / 21 / 2020  
**Transaction ID : SA11A.16687**  
 Amount of Each Receipt this Period 500.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1750.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 119
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Senate Leadership Fund**

**A. MORGAN, ARTHUR, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3607 MURILLO CIRCLE  
 City AUSTIN State TX Zip Code 78703-1547  
 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 08 / 21 / 2020  
**Transaction ID : SA11A.16684**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

**B. BARKER, THOMAS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 342 11TH STREET SE  
 City WASHINGTON State DC Zip Code 20003-2106  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FOLEY HOAG LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 08 / 22 / 2020  
**Transaction ID : SA11A.16708**  
 Amount of Each Receipt this Period 750.00  
 Memo Item CONTRIBUTION

**C. LEE, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5594 TORTUGA COURT  
 City SAN DIEGO State CA Zip Code 92124-1302  
 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 ▼ 2000.00

Date of Receipt 08 / 22 / 2020  
**Transaction ID : SA11A.16712**  
 Amount of Each Receipt this Period 2000.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 119
	<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)  
**Senate Leadership Fund**

**A. MENG, KENNETH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 527 CHINOE ROAD  
 City LEXINGTON State KY Zip Code 40502-2401  
 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 08 / 22 / 2020  
**Transaction ID : SA11A.16709**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

**B. O'DONNELL, CARY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 16127 IVY LAKE DR  
 City ODESSA State FL Zip Code 33556-6045  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) PRESCHOOL MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 22 / 2020  
**Transaction ID : SA11A.16711**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

**C. ADELSON, MIRIAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 410 SOUTH RAMPART BLVD SUITE 440  
 City LAS VEGAS State NV Zip Code 89145-5749  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ADELSON DRUG CLINIC Occupation (for Individual) PHYSICIAN  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2500000.00

Date of Receipt 08 / 25 / 2020  
**Transaction ID : SA11A.16698**  
 Amount of Each Receipt this Period 1250000.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	12500500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 119
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Senate Leadership Fund**

**A. ADELSON, SHELDON, G., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 410 SOUTH RAMPART BLVD  
 STE 440  
 City LAS VEGAS State NV Zip Code 89145-5749  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) LAS VEGAS SANDS CORPORATION Occupation (for Individual) CHAIRMAN AND CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 25000000.00

Date of Receipt 08 / 25 / 2020  
**Transaction ID : SA11A.16697**  
 Amount of Each Receipt this Period 12500000.00  
 Memo Item CONTRIBUTION

**B. GONTOWNIK, JOSEPH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9801 COLLINS AVENUE, 19C  
 City MIAMI BEACH State FL Zip Code 33154-1824  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NJ MANAGEMENT CORP Occupation (for Individual) REAL ESTATE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 08 / 25 / 2020  
**Transaction ID : SA11A.16727**  
 Amount of Each Receipt this Period 10000.00  
 Memo Item CONTRIBUTION

**C. PALMER, DAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1112 MONTANA AVENUE  
 City SANTA MONICA State CA Zip Code 90403-1652  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) REAL ESTATE DEVELOPER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 08 / 25 / 2020  
**Transaction ID : SA11A.16729**  
 Amount of Each Receipt this Period 10000.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	12520000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 119
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**Senate Leadership Fund**

**A. PRP IV CORP.**

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

Mailing Address 150 GREAT NECK ROAD  
SUITE 402

City GREAT NECK State NY Zip Code 11021-3309

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 ▼  
20000.00

Date of Receipt  
08 / 25 / 2020

**Transaction ID : SA11A.16699**

Amount of Each Receipt this Period  
20000.00

Memo Item  
CONTRIBUTION

**B. RAI SERVICES COMPANY**

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

Mailing Address 401 N MAIN STREET

City WINSTON SALEM State NC Zip Code 27101-3804

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 ▼  
500000.00

Date of Receipt  
08 / 25 / 2020

**Transaction ID : SA11A.16692**

Amount of Each Receipt this Period  
500000.00

Memo Item  
CONTRIBUTION

**C. STANDARD HOLDING CORPORATION**

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

Mailing Address P.O. BOX 430

City CONLEY State GA Zip Code 30288-0430

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 ▼  
45000.00

Date of Receipt  
08 / 25 / 2020

**Transaction ID : SA11A.16696**

Amount of Each Receipt this Period  
20000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	540000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 119
	<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)  
**Senate Leadership Fund**

**A. WINRED**

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219-1891
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1982.14

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	25	/	2020

**Transaction ID : SA11C.1670285**

Amount of Each Receipt this Period  
50.00

Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**B. DA COSTA, STACY, , ,**

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

Mailing Address 14650 SOUTHWEST 93RD LANE

City MIAMI	State FL	Zip Code 33186-1051
---------------	-------------	------------------------

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

Name of Employer (for Individual) APEX SYSTEMS	Occupation (for Individual) IT CONSULTANT
---	--

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
08	/	21	/	2020

**Transaction ID : SA11A.16703**

Amount of Each Receipt this Period  
50.00

Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**C. DOAK, DANIEL, , ,**

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

Mailing Address 412 ARELIA DR

City WARNER ROBINS	State GA	Zip Code 31088-1113
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) USAF	Occupation (for Individual) ENGINEER
---	---

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
08	/	26	/	2020

**Transaction ID : SA11A.16732**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	550.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 119
	<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)  
**Senate Leadership Fund**

**A. ADLER, JOSHUA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 23 RUNNING CEDAR ROAD  
 City PRINCETON State NJ Zip Code 08540-7561  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BA CONSTRUCTION Occupation (for Individual) PROPERTY MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 08 / 27 / 2020  
**Transaction ID : SA11A.16737**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item CONTRIBUTION

**B. BLAKEY, STEVE, G., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 399 PARK AVENUE FLOOR 2  
 City NEW YORK State NY Zip Code 10022-5294  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) STARR COMPANIES Occupation (for Individual) INSURANCE EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 20000.00

Date of Receipt 08 / 27 / 2020  
**Transaction ID : SA11A.16723**  
 Amount of Each Receipt this Period 20000.00  
 Memo Item CONTRIBUTION

**C. FISHER, KENNETH, L., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5700 NW FISHER CREEK ROAD SUITE 100  
 City CAMAS State WA Zip Code 98607-9534  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FISHER INVESTMENTS Occupation (for Individual) EXECUTIVE CHAIRMAN  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 68425.00

Date of Receipt 08 / 27 / 2020  
**Transaction ID : SA11A.16726**  
 Amount of Each Receipt this Period 9775.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	30775.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 119
	<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)  
**Senate Leadership Fund**

**A. GREENBERG, JEFFREY, W., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 950 PARK AVENUE  
 City NEW YORK State NY Zip Code 10028-0320  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AQUILINE CAPITAL PARTNERS LLC Occupation (for Individual) INVESTMENT PROFESSIONAL  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 08 / 27 / 2020  
**Transaction ID : SA11A.16721**  
 Amount of Each Receipt this Period 15000.00  
 Memo Item  
 CONTRIBUTION

**B. GREENBERG, MAURICE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 399 PARK AVENUE FLOOR 17  
 City NEW YORK State NY Zip Code 10022-4877  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) C.V. STARR & CO. INC Occupation (for Individual) CHAIRMAN & CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500000.00

Date of Receipt 08 / 27 / 2020  
**Transaction ID : SA11A.16720**  
 Amount of Each Receipt this Period 500000.00  
 Memo Item  
 CONTRIBUTION

**C. KAMIN, EDWARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 211 2ND ST NW, APT 1405  
 City ROCHESTER State MN Zip Code 55901-2895  
 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 ▼ 2000.00

Date of Receipt 08 / 27 / 2020  
**Transaction ID : SA11A.16738**  
 Amount of Each Receipt this Period 2000.00  
 Memo Item  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	517000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 119
	<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)  
**Senate Leadership Fund**

**A. LUNDQVIST, BERTIL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 46 EAST 91ST STREET  
 City NEW YORK State NY Zip Code 10128-1350  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) C.V. STARR & CO. INC. Occupation (for Individual) GENERAL COUNSEL  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 08 / 27 / 2020  
**Transaction ID : SA11A.16719**  
 Amount of Each Receipt this Period 10000.00  
 Memo Item CONTRIBUTION

**B. O'NEILL, EDMUND, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1180 OLD TOPANGA CANYON ROAD  
 City TOPANGA State CA Zip Code 90290-3824  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ED O'NEILL CONSTRUCTION Occupation (for Individual) ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 27 / 2020  
**Transaction ID : SA11A.16740**  
 Amount of Each Receipt this Period 500.00  
 Memo Item CONTRIBUTION

**C. PERL, SANFORD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 570 LONGWOOD AVENUE  
 City GLENCOE State IL Zip Code 60022-1737  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) KIRKLAND ELLIS LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 08 / 27 / 2020  
**Transaction ID : SA11A.16739**  
 Amount of Each Receipt this Period 10000.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	20500.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 119
	<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)  
**Senate Leadership Fund**

**A. RITCHIE, STEPHEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 884 BLUFF STREET  
 City GLENCOE State IL Zip Code 60022-1573  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) KIRKLAND ELLIS LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 08 / 27 / 2020  
**Transaction ID : SA11A.16736**  
 Amount of Each Receipt this Period 10000.00  
 Memo Item CONTRIBUTION

**B. SHAAK, RICHARD, N., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 399 PARK AVENUE FLOOR 2  
 City NEW YORK State NY Zip Code 10022-5294  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) STARR COMPANIES Occupation (for Individual) INSURANCE EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 08 / 27 / 2020  
**Transaction ID : SA11A.16724**  
 Amount of Each Receipt this Period 10000.00  
 Memo Item CONTRIBUTION

**C. SMITH, HOWARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 300 EAST 55TH STREET  
 City NEW YORK State NY Zip Code 10022-4247  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) C.V. STARR & CO. INC. Occupation (for Individual) DIRECTOR AND VICE CHAIRMAN, FIN  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 08 / 27 / 2020  
**Transaction ID : SA11A.16722**  
 Amount of Each Receipt this Period 10000.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	30000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 34 OF 119
	(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)  
**Senate Leadership Fund**

**A. WENDT, GREGORY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1 MUIR LOOP  
 STEWART TOWER SUITE 2000  
 City SAN FRANCISCO State CA Zip Code 94129-1123  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CAPITAL GROUP Occupation (for Individual) FINANCE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 27 / 2020  
**Transaction ID : SA11A.16725**  
 Amount of Each Receipt this Period  
 100000.00  
 Memo Item  
 CONTRIBUTION

**B. ANDERSON, FREDRICK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 100 PERQUIMANS DRIVE  
 City RALEIGH State NC Zip Code 27609-6938  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ANDERSON AUTOMOTIVE GROUP Occupation (for Individual) EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 28 / 2020  
**Transaction ID : SA11A.16745**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item  
 CONTRIBUTION

**C. BINGHAM, GLENN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1690 N CAMBRIDGE AVE  
 City WASHINGTON State UT Zip Code 84780-2762  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2800.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 28 / 2020  
**Transaction ID : SA11A.16747**  
 Amount of Each Receipt this Period  
 2800.00  
 Memo Item  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	107800.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 35 OF 119
	(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)  
**Senate Leadership Fund**

**A. KVAM, DAVID, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11 COLONY ROAD  
 City WEST HARTFORD State CT Zip Code 06117-2215  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) NEUROSURGEON  
 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  
 08 / 28 / 2020  
**Transaction ID : SA11A.16742**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
 CONTRIBUTION

**B. SCHWARTZ, DON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 29 SHORT BEACH RD  
 City EAST HAVEN State CT Zip Code 06512-3520  
 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  
 08 / 28 / 2020  
**Transaction ID : SA11A.16746**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
 CONTRIBUTION

**C. WILLIAMS, GRANT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 100 N. LINBERGH BLVD  
 City ST. LOUIS State MO Zip Code 63132-  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 28 / 2020  
**Transaction ID : SA11A.16730**  
 Amount of Each Receipt this Period  
 15000.00  
 Memo Item  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	15500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 36 OF 119  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Senate Leadership Fund**

**A. HOLTZ, ROBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1300 ROCKRIMMON ROAD  
 City STAMFORD State CT Zip Code 06903-1104  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) INVESTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 29 / 2020  
**Transaction ID : SA11A.16764**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item CONTRIBUTION

**B. SNAVELY, DAVID, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4908 COURVILLE AVE  
 City TOLEDO State OH Zip Code 43623-2921  
 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 ▼ 1500.00

Date of Receipt 08 / 29 / 2020  
**Transaction ID : SA11A.16760**  
 Amount of Each Receipt this Period 500.00  
 Memo Item CONTRIBUTION

**C. DAVIS, MICHELE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2750 MARSHALL LAKE DR  
 City OAKTON State VA Zip Code 22124-1156  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SARD VERBINNEN Occupation (for Individual) COUNSELOR  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 30 / 2020  
**Transaction ID : SA11A.16765**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2500.00  
**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 37 OF 119
<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)  
**Senate Leadership Fund**

**A. SEAVER, CHRISTOPHER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2200 WILLOWICK ROAD  
 City HOUSTON State TX Zip Code 77027-3950  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 08 / 30 / 2020  
**Transaction ID : SA11A.16768**  
 Amount of Each Receipt this Period 10000.00  
 Memo Item CONTRIBUTION

**B. COTNER, JEFF, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3511 MARONEAL  
 City HOUSTON State TX Zip Code 77025-1322  
 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 08 / 31 / 2020  
**Transaction ID : SA11A.16769**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item CONTRIBUTION

**C. FLEISHMAN, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7910 WOLF PEN BRANCH ROAD  
 City PROSPECT State KY Zip Code 40059-9172  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DENTONS BINGHAM GREENEBAUM Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 31 / 2020  
**Transaction ID : SA11A.16771**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	12000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 38 OF 119
	(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)  
**Senate Leadership Fund**

**A. HOLLAND, LAWIS STAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2421 INDIAN HILL RD  
 City VIRGINIA BEACH State VA Zip Code 23455-1513  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AB Occupation (for Individual) EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 08 / 31 / 2020  
**Transaction ID : SA11A.16770**  
 Amount of Each Receipt this Period 3000.00  
 Memo Item  
**CONTRIBUTION**

**B. SERVICE TIRE TRUCK CENTERS**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2255 AVENUE A  
 City BETHLEHEM State PA Zip Code 18017-2107  
 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 ▼ 100000.00

Date of Receipt 08 / 31 / 2020  
**Transaction ID : SA11A.16733**  
 Amount of Each Receipt this Period 100000.00  
 Memo Item  
**CONTRIBUTION**

**C. RJC VICTORY FUND**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 228 S WASHINGTON ST SUITE 115  
 City ALEXANDRIA State VA Zip Code 22314-5404  
 FEC ID number of contributing federal political committee. **C** C00528554  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 20000.00

Date of Receipt 08 / 31 / 2020  
**Transaction ID : SA11C.16803**  
 Amount of Each Receipt this Period 20000.00  
 Memo Item  
**CONTRIBUTION**  
 SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

<b>SUBTOTAL</b> of Receipts This Page (optional).....	103000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 119
	<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)  
**Senate Leadership Fund**

**A. BLOOM, RONALD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 433 N CAMDEN DR  
 SUITE 888  
 City BEVERLY HILLS State CA Zip Code 90210-4412  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CROWN ASSOCIATES REALTY INC Occupation (for Individual) OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 08 / 27 / 2020  
**Transaction ID : SA11A.16805**  
 Amount of Each Receipt this Period 15000.00  
 Memo Item  
 CONTRIBUTION  
 EARMARKED FROM RJC VICTORY FUND

**B. PROBITY INTERNATIONAL CORP**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 421 N BEVERLY DRIVE  
 SUITE 350  
 City BEVERLY HILLS State CA Zip Code 90210-4640  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 27 / 2020  
**Transaction ID : SA11A.16804**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 CONTRIBUTION  
 EARMARKED FROM RJC VICTORY FUND

**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  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	20000.00
<b>TOTAL</b> This Period (last page this line number only).....	37382975.00

**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 40 OF 119
<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 checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Senate Leadership Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. MENTZER MEDIA SERVICES**

Mailing Address 210 W. PENNSYLVANIA AVE. SUITE 250

City TOWSON	State MD	Zip Code 21204
----------------	-------------	-------------------

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 ▼  
48800.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	27	/	2020

**Transaction ID : SA15.16370**

Amount of Each Receipt this Period  
32200.00

Memo Item  
MEDIA REFUND

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

Mailing Address 210 W. PENNSYLVANIA AVE. SUITE 250

City TOWSON	State MD	Zip Code 21204
----------------	-------------	-------------------

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 ▼  
48800.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	27	/	2020

**Transaction ID : SA15.16371**

Amount of Each Receipt this Period  
16600.00

Memo Item  
MEDIA REFUND

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

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
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Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	48800.00
<b>TOTAL</b> This Period (last page this line number only).....	48800.00



**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)  
**Senate Leadership Fund**

Full Name (Last, First, Middle Initial) <b>A. CONNECTION STRATEGY, LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 01 / 2020
Mailing Address P.O. BOX 1636		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I1654'</b> Amount of Each Disbursement this Period [REDACTED] - 13921.18
City DRIPPING SPRINGS	State TX	Zip Code 78620
Purpose of Disbursement SEE SCHEDULE E		Category/Type [REDACTED]
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>B. REVV</b>		Date of Disbursement MM / DD / YYYY 08 / 02 / 2020
Mailing Address 1776 WILSON BLVD., SUITE 530		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I1649'</b> Amount of Each Disbursement this Period [REDACTED] 65.30
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement CREDIT CARD PROCESSING FEES		Category/Type [REDACTED]
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>C. STRIPE INC</b>		Date of Disbursement MM / DD / YYYY 08 / 02 / 2020
Mailing Address 3180 18TH ST		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I1653</b> Amount of Each Disbursement this Period [REDACTED] 1750.00
City SAN FRANCISCO	State CA	Zip Code 94110
Purpose of Disbursement CREDIT CARD PROCESSING FEES		Category/Type [REDACTED]
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] - 12105.88
<b>TOTAL</b> 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)  
**Senate Leadership Fund**

**A. REVV**

Full Name (Last, First, Middle Initial)

Mailing Address 1776 WILSON BLVD., SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 03 / 2020

FEC Identification Number: C

Transaction ID : SB21B.I16501

Amount of Each Disbursement this Period: 585.75

Memo Item

**B. REVV**

Full Name (Last, First, Middle Initial)

Mailing Address 1776 WILSON BLVD., SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 04 / 2020

FEC Identification Number: C

Transaction ID : SB21B.I16501

Amount of Each Disbursement this Period: 4.96

Memo Item

**C. REVV**

Full Name (Last, First, Middle Initial)

Mailing Address 1776 WILSON BLVD., SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 04 / 2020

FEC Identification Number: C

Transaction ID : SB21B.I16501

Amount of Each Disbursement this Period: 50.40

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 641.11

**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)  
**Senate Leadership Fund**

**A. AMERICAN EXPRESS - FEES**

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 36001

City FORT LAUDERDALE State FL Zip Code 33336

Purpose of Disbursement CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 05 / 2020

FEC Identification Number: C

Transaction ID : SB21B.I1646

Amount of Each Disbursement this Period: 20.00

Memo Item

**B. ADDETIA, KARIM, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 34413

City WASHINGTON State DC Zip Code 20043

Purpose of Disbursement CONSULTING, RESEARCH

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 06 / 2020

FEC Identification Number: C

Transaction ID : SB21B.I1646

Amount of Each Disbursement this Period: 3750.00

Memo Item

**C. AMERICAN VIEWPOINT, INC.**

Full Name (Last, First, Middle Initial)

Mailing Address 1199 N FAIRFAX STREET, STE 808

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement POLLING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 06 / 2020

FEC Identification Number: C

Transaction ID : SB21B.I1646

Amount of Each Disbursement this Period: 46574.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 50344.00

**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)  
**Senate Leadership Fund**

Full Name (Last, First, Middle Initial)  
**A. BLACK ROCK GROUP LLC**

Mailing Address **66 CANAL CENTER PLAZA, STE 555**

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

Purpose of Disbursement **POLITICAL STRATEGY CONSULTING**

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: **08 / 06 / 2020**

FEC Identification Number: **C**

**Transaction ID : SB21B.I1646!**

Amount of Each Disbursement this Period: **16500.00**

Memo Item

Full Name (Last, First, Middle Initial)  
**B. CAVALRY LLC**

Mailing Address **1634 EYE STREET NW, STE 800**

City **WASHINGTON** State **DC** Zip Code **20006**

Purpose of Disbursement **POLITICAL STRATEGY CONSULTING**

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: **08 / 06 / 2020**

FEC Identification Number: **C**

**Transaction ID : SB21B.I1647!**

Amount of Each Disbursement this Period: **7500.00**

Memo Item

Full Name (Last, First, Middle Initial)  
**C. CFC CONSULTING INC**

Mailing Address **4100 OLD FLORIDA SHORT ROUTE**

City **MOUNTAIN BROOK** State **AL** Zip Code **35243**

Purpose of Disbursement **BOOKKEEPING / CONSULTING**

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: **08 / 06 / 2020**

FEC Identification Number: **C**

**Transaction ID : SB21B.I1647!**

Amount of Each Disbursement this Period: **6000.00**

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ **30000.00**

**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)  
**Senate Leadership Fund**

**A. CROSBY OTTENHOFF GROUP, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 611 PENNSYLVANIA AVE SE #267

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement BOOKKEEPING / CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 08 / 06 / 2020

FEC Identification Number: C

Transaction ID : SB21B.I1648

Amount of Each Disbursement this Period: 3650.00

Memo Item

**B. DEEP ROOT ANALYTICS LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 1600 WILSON BLVD, SUITE 330

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 08 / 06 / 2020

FEC Identification Number: C

Transaction ID : SB21B.I1648

Amount of Each Disbursement this Period: 302850.00

Memo Item

**C. DRIVER EIGHT MEDIA LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 1875 CONNECTICUT AVE NW, 10TH FLOO

City WASHINGTON State DC Zip Code 20009

Purpose of Disbursement CONSULTING, COMMUNICATIONS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 08 / 06 / 2020

FEC Identification Number: C

Transaction ID : SB21B.I1648

Amount of Each Disbursement this Period: 1250.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 307750.00

**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)  
**Senate Leadership Fund**

**A. INTEGRATED CAMPAIGN SOLUTIONS**

Full Name (Last, First, Middle Initial)

Mailing Address 526 DAROCO AVE

City CORAL GABLES State FL Zip Code 33146

Purpose of Disbursement DONOR DEVELOPMENT

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY  
08 / 06 / 2020

FEC Identification Number: C

Transaction ID : SB21B.I1649

Amount of Each Disbursement this Period: 5000.00

Memo Item

**B. RED OAK STRATEGIC LLC**

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 2561

City ALEXANDRIA State VA Zip Code 22301

Purpose of Disbursement POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY  
08 / 06 / 2020

FEC Identification Number: C

Transaction ID : SB21B.I1649

Amount of Each Disbursement this Period: 3802.50

Memo Item

**C. REVV**

Full Name (Last, First, Middle Initial)

Mailing Address 1776 WILSON BLVD., SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY  
08 / 06 / 2020

FEC Identification Number: C

Transaction ID : SB21B.I1650

Amount of Each Disbursement this Period: 18.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 8820.50

**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)

**Senate Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. THE TARRANCE GROUP INC**

Mailing Address 201 N UNION ST, STE 410

City  
ALEXANDRIA

State  
VA

Zip Code  
22314

Purpose of Disbursement  
POLLING

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
0	8		0	6		2	0	2	0

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I1653I**

Amount of Each Disbursement this Period

[REDACTED] 36573.76

Memo Item

Full Name (Last, First, Middle Initial)

**B. CHAIN BRIDGE BANK**

Mailing Address 1445-A LAUGHLIN AVE

City  
MCLEAN

State  
VA

Zip Code  
22101

Purpose of Disbursement  
BANK FEE

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
0	8		0	7		2	0	2	0

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I1647I**

Amount of Each Disbursement this Period

[REDACTED] 20.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. REVV**

Mailing Address 1776 WILSON BLVD., SUITE 530

City  
ARLINGTON

State  
VA

Zip Code  
22209

Purpose of Disbursement  
CREDIT CARD PROCESSING FEES

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
0	8		0	7		2	0	2	0

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I1650I**

Amount of Each Disbursement this Period

[REDACTED] 3.24

Memo Item

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

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

[REDACTED] 36597.00

[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)

**Senate Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. REVV**

Mailing Address 1776 WILSON BLVD., SUITE 530

City  
ARLINGTON

State  
VA

Zip Code  
22209

Purpose of Disbursement  
CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

FEC Identification Number

C

**Transaction ID : SB21B.I1650!**

Amount of Each Disbursement this Period

37.39

Memo Item

Full Name (Last, First, Middle Initial)

**B. REVV**

Mailing Address 1776 WILSON BLVD., SUITE 530

City  
ARLINGTON

State  
VA

Zip Code  
22209

Purpose of Disbursement  
CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
08 / 09 / 2020

FEC Identification Number

C

**Transaction ID : SB21B.I1650!**

Amount of Each Disbursement this Period

153.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. REVV**

Mailing Address 1776 WILSON BLVD., SUITE 530

City  
ARLINGTON

State  
VA

Zip Code  
22209

Purpose of Disbursement  
CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
08 / 11 / 2020

FEC Identification Number

C

**Transaction ID : SB21B.I1650!**

Amount of Each Disbursement this Period

18.00

Memo Item

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

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

208.39



**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)  
**Senate Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. AMERICAN EXPRESS**

Mailing Address P.O. BOX 1270

City NEWARK State NJ Zip Code 07101

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  
08 / 12 / 2020

FEC Identification Number

C  
Transaction ID : SB21B.I1646I  
Amount of Each Disbursement this Period  
3413.86

Memo Item

Full Name (Last, First, Middle Initial)

**B. ALLIED TELECOM**

Mailing Address 1400 CRYSTAL DRIVE

City ARLINGTON State VA Zip Code 22202

Purpose of Disbursement  
INTERNET AND PHONE

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  
08 / 12 / 2020

FEC Identification Number

C  
Transaction ID : SB21B.I1655I  
Amount of Each Disbursement this Period  
232.20

Memo Item

Full Name (Last, First, Middle Initial)

**C. ATLANTIC SERVICES GROUP, INC.**

Mailing Address 4200 WISCONSIN AVE NW, SUITE 550

City WASHINGTON State DC Zip Code 20016

Purpose of Disbursement  
PARKING

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  
08 / 12 / 2020

FEC Identification Number

C  
Transaction ID : SB21B.I1655I  
Amount of Each Disbursement this Period  
350.00

Memo Item

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

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

3413.86

**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)  
**Senate Leadership Fund**

Full Name (Last, First, Middle Initial) <b>A. CAMPAIGNMONITOR.COM</b>		Date of Disbursement MM / DD / YYYY 08 / 12 / 2020
Mailing Address 404/3-5 STAPLETON AVE		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I1655i</b> Amount of Each Disbursement this Period [ ] 37.25
City SUTHERLAND	State AU	Zip Code 02232
Purpose of Disbursement SUBSCRIPTION		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. CAPITOL COMPUTER EXCHANGE INC</b>		Date of Disbursement MM / DD / YYYY 08 / 12 / 2020
Mailing Address 4487 FORBES BLVD		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I1655i</b> Amount of Each Disbursement this Period [ ] 147.48
City LANHAM	State MD	Zip Code 20706
Purpose of Disbursement COMPUTER TECHNICAL SUPPORT		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>C. CMDI</b>		Date of Disbursement MM / DD / YYYY 08 / 12 / 2020
Mailing Address 1593 SPRING HILL ROAD, STE 400		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I1656</b> Amount of Each Disbursement this Period [ ] 375.00
City TYSONS CORNER	State VA	Zip Code 22182
Purpose of Disbursement DATABASE MANAGEMENT		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)  
**Senate Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. COMCAST**

Mailing Address 900 MICHIGAN AVE NW

City WASHINGTON State DC Zip Code 20017

Purpose of Disbursement  
UTILITIES - INTERNET

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
08 / 12 / 2020

FEC Identification Number  
C  
Transaction ID : SB21B.I1656  
Amount of Each Disbursement this Period  
293.06

Memo Item

Full Name (Last, First, Middle Initial)

**B. CONFERENCE AMERICA INC**

Mailing Address 7079 UNIVERSITY CT

City MONTGOMERY State AL Zip Code 36117

Purpose of Disbursement  
CONFERENCE CALLS

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
08 / 12 / 2020

FEC Identification Number  
C  
Transaction ID : SB21B.I1656  
Amount of Each Disbursement this Period  
213.36

Memo Item

Full Name (Last, First, Middle Initial)

**C. DATAWATCH SYSTEMS INC**

Mailing Address 4401 EAST WEST HWY

City BETHESDA State MD Zip Code 20814

Purpose of Disbursement  
SUBSCRIPTION

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
08 / 12 / 2020

FEC Identification Number  
C  
Transaction ID : SB21B.I1656  
Amount of Each Disbursement this Period  
28.11

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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NAME OF COMMITTEE (In Full)  
**Senate Leadership Fund**

Full Name (Last, First, Middle Initial)  
**A. FEDEX**

Date of Disbursement: MM / DD / YYYY  
08 / 12 / 2020

Mailing Address: 3965 AIRWAYS

City: MEMPHIS      State: TN      Zip Code: 38116

Purpose of Disbursement: SHIPPING

Candidate Name: \_\_\_\_\_

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

State: \_\_\_\_\_ District: \_\_\_\_\_

FEC Identification Number: C \_\_\_\_\_  
Transaction ID : SB21B.I1656!  
Amount of Each Disbursement this Period: 14.57

Memo Item

Full Name (Last, First, Middle Initial)  
**B. GODADDY.COM**

Date of Disbursement: MM / DD / YYYY  
08 / 12 / 2020

Mailing Address: 14455 N. HAYDEN ROAD

City: SCOTTSDALE      State: AZ      Zip Code: 85260

Purpose of Disbursement: INTERNET EXPENSE

Candidate Name: \_\_\_\_\_

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

State: \_\_\_\_\_ District: \_\_\_\_\_

FEC Identification Number: C \_\_\_\_\_  
Transaction ID : SB21B.I1656!  
Amount of Each Disbursement this Period: 28.16

Memo Item

Full Name (Last, First, Middle Initial)  
**C. INTRADO CORPORATION**

Date of Disbursement: MM / DD / YYYY  
08 / 12 / 2020

Mailing Address: 11808 MIRACLE HILLS DR.

City: OMAHA      State: NE      Zip Code: 68154

Purpose of Disbursement: SUBSCRIPTION

Candidate Name: \_\_\_\_\_

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

State: \_\_\_\_\_ District: \_\_\_\_\_

FEC Identification Number: C \_\_\_\_\_  
Transaction ID : SB21B.I1656!  
Amount of Each Disbursement this Period: 304.75

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)  
**Senate Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. LEXIS-NEXIS**

Mailing Address 9393 SPRINGBORO PIKE

City MIAMISBURG State OH Zip Code 45342

Purpose of Disbursement  
SUBSCRIPTION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement  
MM / DD / YYYY  
08 / 12 / 2020

FEC Identification Number

C  
Transaction ID : SB21B.I1656!  
Amount of Each Disbursement this Period  
1135.63

Memo Item

Full Name (Last, First, Middle Initial)

**B. VERIZON WIRELESS**

Mailing Address TWO VERIZON PLACE

City ALPHARETTA State GA Zip Code 30004

Purpose of Disbursement  
CELL PHONES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement  
MM / DD / YYYY  
08 / 12 / 2020

FEC Identification Number

C  
Transaction ID : SB21B.I16572  
Amount of Each Disbursement this Period  
127.49

Memo Item

Full Name (Last, First, Middle Initial)

**C. CHAIN BRIDGE BANK**

Mailing Address 1445-A LAUGHLIN AVE

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement  
MM / DD / YYYY  
08 / 12 / 2020

FEC Identification Number

C  
Transaction ID : SB21B.I1647  
Amount of Each Disbursement this Period  
20.00

Memo Item

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

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

20.00

**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)

**Senate Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. CHAIN BRIDGE BANK**

Mailing Address 1445-A LAUGHLIN AVE

City  
MCLEAN

State  
VA

Zip Code  
22101

Purpose of Disbursement  
BANK FEE

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
0	8		1	2		2	0	2	0

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I1647!**

Amount of Each Disbursement this Period

[REDACTED] 20.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. REVV**

Mailing Address 1776 WILSON BLVD., SUITE 530

City  
ARLINGTON

State  
VA

Zip Code  
22209

Purpose of Disbursement  
CREDIT CARD PROCESSING FEES

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
0	8		1	2		2	0	2	0

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I1650!**

Amount of Each Disbursement this Period

[REDACTED] 9.45

Memo Item

Full Name (Last, First, Middle Initial)

**C. HOLTZMAN VOGEL JOSEFIK TORCHINSKY PLLC**

Mailing Address 45 NORTH HILL DRIVE, STE 100

City  
WARRENTON

State  
VA

Zip Code  
20186

Purpose of Disbursement  
LEGAL SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I1648**

Amount of Each Disbursement this Period

[REDACTED] 3918.75

Memo Item

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

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

[REDACTED] 3948.20

[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)

**Senate Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. PUBLIC OPINION STRATEGIES LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		13		2020

Mailing Address 214 NORTH FAYETTE STREET

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.I1649!**  
 Amount of Each Disbursement this Period  
 [ ] 42120.00

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
POLLING

[ ]  
Category/  
Type

Candidate Name

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

Memo Item

Full Name (Last, First, Middle Initial)

**B. REVV**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		13		2020

Mailing Address 1776 WILSON BLVD., SUITE 530

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.I1650!**  
 Amount of Each Disbursement this Period  
 [ ] 6.80

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement  
CREDIT CARD PROCESSING FEES

[ ]  
Category/  
Type

Candidate Name

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

Memo Item

Full Name (Last, First, Middle Initial)

**C. SOCKO STRATEGIES, LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		13		2020

Mailing Address 4323 CATHEDRAL AVE. NW

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.I1652**  
 Amount of Each Disbursement this Period  
 [ ] 4950.00

City WASHINGTON State DC Zip Code 20016

Purpose of Disbursement  
DONOR DEVELOPMENT

[ ]  
Category/  
Type

Candidate Name

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

Memo Item

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

[ ] 47076.80

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

[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Senate Leadership Fund**

Full Name (Last, First, Middle Initial) <b>A. CHAIN BRIDGE BANK</b>		Date of Disbursement MM / DD / YYYY 08 / 14 / 2020
Mailing Address 1445-A LAUGHLIN AVE		FEC Identification Number C <b>Transaction ID : SB21B.I1647I</b> Amount of Each Disbursement this Period 20.00
City MCLEAN	State VA	
Zip Code 22101	Purpose of Disbursement BANK FEE	Memo Item <input type="checkbox"/>
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:		

Full Name (Last, First, Middle Initial) <b>B. REVV</b>		Date of Disbursement MM / DD / YYYY 08 / 16 / 2020
Mailing Address 1776 WILSON BLVD., SUITE 530		FEC Identification Number C <b>Transaction ID : SB21B.I1651I</b> Amount of Each Disbursement this Period 3.24
City ARLINGTON	State VA	
Zip Code 22209	Purpose of Disbursement CREDIT CARD PROCESSING FEES	Memo Item <input type="checkbox"/>
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:		

Full Name (Last, First, Middle Initial) <b>C. REVV</b>		Date of Disbursement MM / DD / YYYY 08 / 17 / 2020
Mailing Address 1776 WILSON BLVD., SUITE 530		FEC Identification Number C <b>Transaction ID : SB21B.I1651I</b> Amount of Each Disbursement this Period 1.98
City ARLINGTON	State VA	
Zip Code 22209	Purpose of Disbursement CREDIT CARD PROCESSING FEES	Memo Item <input type="checkbox"/>
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	25.22
<b>TOTAL</b> 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)  
**Senate Leadership Fund**

Full Name (Last, First, Middle Initial) <b>A. CHAIN BRIDGE BANK</b>		Date of Disbursement MM / DD / YYYY 08 / 18 / 2020
Mailing Address 1445-A LAUGHLIN AVE		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I1647</b> Amount of Each Disbursement this Period [ ] 20.00
City MCLEAN	State VA	Zip Code 22101
Purpose of Disbursement BANK FEE		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. REVV</b>		Date of Disbursement MM / DD / YYYY 08 / 18 / 2020
Mailing Address 1776 WILSON BLVD., SUITE 530		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I16512</b> Amount of Each Disbursement this Period [ ] 141.12
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement CREDIT CARD PROCESSING FEES		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. REVV</b>		Date of Disbursement MM / DD / YYYY 08 / 18 / 2020
Mailing Address 1776 WILSON BLVD., SUITE 530		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I1651</b> Amount of Each Disbursement this Period [ ] 9.00
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement CREDIT CARD PROCESSING FEES		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

[ ] 170.12

**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)  
**Senate Leadership Fund**

Full Name (Last, First, Middle Initial)  
**A. STRIPE INC**

Date of Disbursement: MM / DD / YYYY  
08 / 18 / 2020

Mailing Address 3180 18TH ST

City: SAN FRANCISCO State: CA Zip Code: 94110

Purpose of Disbursement: CREDIT CARD PROCESSING FEES

Candidate Name: [ ] Category/Type: [ ]

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

State: District: [ ]

FEC Identification Number: [ ]  
**Transaction ID : SB21B.I1653'**  
Amount of Each Disbursement this Period: [ ] 1760.30

Memo Item

Full Name (Last, First, Middle Initial)  
**B. BEYERSDORFER, ANNE, , ,**

Date of Disbursement: MM / DD / YYYY  
08 / 19 / 2020

Mailing Address 2315 CHAIN BRIDGE ROAD NW

City: WASHINGTON State: DC Zip Code: 20016

Purpose of Disbursement: CONSULTING, MEDIA

Candidate Name: [ ] Category/Type: [ ]

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

State: District: [ ]

FEC Identification Number: [ ]  
**Transaction ID : SB21B.I16464**  
Amount of Each Disbursement this Period: [ ] 5940.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. CSTRAIGHT MEDIA**

Date of Disbursement: MM / DD / YYYY  
08 / 19 / 2020

Mailing Address 1897 PRESTON WHITE DR, STE 310

City: RESTON State: VA Zip Code: 20191

Purpose of Disbursement: WEBSITE HOSTING / DEVELOPMENT

Candidate Name: [ ] Category/Type: [ ]

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

State: District: [ ]

FEC Identification Number: [ ]  
**Transaction ID : SB21B.I1648**  
Amount of Each Disbursement this Period: [ ] 317.50

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ [ ] 8017.80

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Senate Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. THE TARRANCE GROUP INC**

Mailing Address 201 N UNION ST, STE 410

City  
ALEXANDRIA

State  
VA

Zip Code  
22314

Purpose of Disbursement  
POLLING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 19 / 2020

FEC Identification Number

C

Transaction ID : SB21B.I1653  
Amount of Each Disbursement this Period

38056.48

Memo Item

Full Name (Last, First, Middle Initial)

**B. CFC CONSULTING INC**

Mailing Address 4100 OLD FLORIDA SHORT ROUTE

City  
MOUNTAIN BROOK

State  
AL

Zip Code  
35243

Purpose of Disbursement  
BOOKKEEPING / CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 20 / 2020

FEC Identification Number

C

Transaction ID : SB21B.I1647  
Amount of Each Disbursement this Period

1131.56

Memo Item

Full Name (Last, First, Middle Initial)

**C. CHAIN BRIDGE BANK**

Mailing Address 1445-A LAUGHLIN AVE

City  
MCLEAN

State  
VA

Zip Code  
22101

Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 20 / 2020

FEC Identification Number

C

Transaction ID : SB21B.I1647  
Amount of Each Disbursement this Period

40.00

Memo Item

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

39228.04

**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)  
**Senate Leadership Fund**

**A. HOLTZMAN VOGEL JOSEFIK TORCHINSKY PLLC**

Full Name (Last, First, Middle Initial)  
Mailing Address 45 NORTH HILL DRIVE, STE 100

City WARRENTON State VA Zip Code 20186

Purpose of Disbursement LEGAL SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
08 / 20 / 2020

FEC Identification Number: C

Transaction ID : SB21B.I1648!

Amount of Each Disbursement this Period: 37500.00

Memo Item

**B. NMB RESEARCH LLC**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 1692

City ALEXANDRIA State VA Zip Code 22313

Purpose of Disbursement POLLING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
08 / 20 / 2020

FEC Identification Number: C

Transaction ID : SB21B.I1649!

Amount of Each Disbursement this Period: 36360.00

Memo Item

**C. PUBLIC OPINION STRATEGIES LLC**

Full Name (Last, First, Middle Initial)  
Mailing Address 214 NORTH FAYETTE STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement POLLING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
08 / 20 / 2020

FEC Identification Number: C

Transaction ID : SB21B.I1649

Amount of Each Disbursement this Period: 39900.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 113760.00

**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)  
**Senate Leadership Fund**

**A. REVV**

Full Name (Last, First, Middle Initial)

Mailing Address 1776 WILSON BLVD., SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 20 / 2020

FEC Identification Number: C

Transaction ID : SB21B.I16514

Amount of Each Disbursement this Period: 30.28

Memo Item

**B. REVV**

Full Name (Last, First, Middle Initial)

Mailing Address 1776 WILSON BLVD., SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 20 / 2020

FEC Identification Number: C

Transaction ID : SB21B.I16515

Amount of Each Disbursement this Period: 2.21

Memo Item

**C. STRIPE INC**

Full Name (Last, First, Middle Initial)

Mailing Address 3180 18TH ST

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 20 / 2020

FEC Identification Number: C

Transaction ID : SB21B.I1653

Amount of Each Disbursement this Period: 1540.30

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1572.79

**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)  
**Senate Leadership Fund**

**A. REVV**

Full Name (Last, First, Middle Initial)

Mailing Address 1776 WILSON BLVD., SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 21 / 2020

FEC Identification Number: C

Transaction ID : SB21B.I16511

Amount of Each Disbursement this Period: 17.68

Memo Item

**B. REVV**

Full Name (Last, First, Middle Initial)

Mailing Address 1776 WILSON BLVD., SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 21 / 2020

FEC Identification Number: C

Transaction ID : SB21B.I16511

Amount of Each Disbursement this Period: 1.80

Memo Item

**C. REVV**

Full Name (Last, First, Middle Initial)

Mailing Address 1776 WILSON BLVD., SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 22 / 2020

FEC Identification Number: C

Transaction ID : SB21B.I16511

Amount of Each Disbursement this Period: 62.03

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 81.51

**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)  
**Senate Leadership Fund**

**A. REVV**

Full Name (Last, First, Middle Initial)

Mailing Address 1776 WILSON BLVD., SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 23 / 2020

FEC Identification Number: C

Transaction ID : SB21B.I1651!

Amount of Each Disbursement this Period: 1.80

Memo Item

**B. REVV**

Full Name (Last, First, Middle Initial)

Mailing Address 1776 WILSON BLVD., SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 24 / 2020

FEC Identification Number: C

Transaction ID : SB21B.I1652!

Amount of Each Disbursement this Period: 1.80

Memo Item

**C. REVV**

Full Name (Last, First, Middle Initial)

Mailing Address 1776 WILSON BLVD., SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 25 / 2020

FEC Identification Number: C

Transaction ID : SB21B.I1652!

Amount of Each Disbursement this Period: 361.80

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 365.40

**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)  
**Senate Leadership Fund**

**A. STRIPE INC**

Full Name (Last, First, Middle Initial)

Mailing Address 3180 18TH ST

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
08 / 25 / 2020

FEC Identification Number: C

Transaction ID : SB21B.I1653

Amount of Each Disbursement this Period: 700.00

Memo Item

**B. CHAIN BRIDGE BANK**

Full Name (Last, First, Middle Initial)

Mailing Address 1445-A LAUGHLIN AVE

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement BANK FEE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
08 / 26 / 2020

FEC Identification Number: C

Transaction ID : SB21B.I16479

Amount of Each Disbursement this Period: 20.00

Memo Item

**C. REVV**

Full Name (Last, First, Middle Initial)

Mailing Address 1776 WILSON BLVD., SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
08 / 26 / 2020

FEC Identification Number: C

Transaction ID : SB21B.I1652

Amount of Each Disbursement this Period: 10.80

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 730.80

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Senate Leadership Fund**

Full Name (Last, First, Middle Initial) <b>A. CHAIN BRIDGE BANK</b>		Date of Disbursement MM / DD / YYYY 08 / 27 / 2020
Mailing Address 1445-A LAUGHLIN AVE		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I1648I</b> Amount of Each Disbursement this Period [ ] 20.00
City MCLEAN	State VA	Zip Code 22101
Purpose of Disbursement BANK FEE		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. GUIDANT POLLING AND STRATEGY, LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 27 / 2020
Mailing Address 4327 N NINES RIDGE LN		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I1648I</b> Amount of Each Disbursement this Period [ ] 30690.00
City BOISE	State ID	Zip Code 83702
Purpose of Disbursement POLLING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. HOLTZMAN VOGEL JOSEFIK TORCHINSKY PLLC</b>		Date of Disbursement MM / DD / YYYY 08 / 27 / 2020
Mailing Address 45 NORTH HILL DRIVE, STE 100		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I1649I</b> Amount of Each Disbursement this Period [ ] 3093.75
City WARRENTON	State VA	Zip Code 20186
Purpose of Disbursement LEGAL 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 type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 33803.75
<b>TOTAL</b> 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)

**Senate Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. HOLTZMAN VOGEL JOSEFIK TORCHINSKY PLLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		27		2020

Mailing Address 45 NORTH HILL DRIVE, STE 100

FEC Identification Number

C
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**Transaction ID : SB21B.I1649'**  
Amount of Each Disbursement this Period

825.00
--------

Memo Item

City  
WARRENTON

State  
VA

Zip Code  
20186

Purpose of Disbursement  
LEGAL SERVICES

--

Candidate Name

Category/  
Type

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. MENTZER MEDIA SERVICES**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		27		2020

Mailing Address 210 W. PENNSYLVANIA AVE. SUITE 250

FEC Identification Number

C
---

**Transaction ID : SB21B.I1654#**  
Amount of Each Disbursement this Period

1315208.41
------------

Memo Item

City  
TOWSON

State  
MD

Zip Code  
21204

Purpose of Disbursement  
DEPOSIT - TV/MEDIA PLACEMENT

--

Candidate Name

Category/  
Type

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. MENTZER MEDIA SERVICES**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		27		2020

Mailing Address 210 W. PENNSYLVANIA AVE. SUITE 250

FEC Identification Number

C
---

**Transaction ID : SB21B.I1654**  
Amount of Each Disbursement this Period

232989.41
-----------

Memo Item

City  
TOWSON

State  
MD

Zip Code  
21204

Purpose of Disbursement  
DEPOSIT - RADIO PLACEMENT

--

Candidate Name

Category/  
Type

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

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

1549022.82
------------

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Senate Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. MENTZER MEDIA SERVICES**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		27		2020

Mailing Address 210 W. PENNSYLVANIA AVE. SUITE 250

FEC Identification Number

**C** [REDACTED]

**Transaction ID : SB21B.I16551**  
Amount of Each Disbursement this Period

[REDACTED] 1394540.55

Memo Item

City TOWSON State MD Zip Code 21204

Purpose of Disbursement  
DEPOSIT - TV/MEDIA PLACEMENT

[REDACTED]

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. MENTZER MEDIA SERVICES**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		27		2020

Mailing Address 210 W. PENNSYLVANIA AVE. SUITE 250

FEC Identification Number

**C** [REDACTED]

**Transaction ID : SB21B.I16551**  
Amount of Each Disbursement this Period

[REDACTED] 96638.20

Memo Item

City TOWSON State MD Zip Code 21204

Purpose of Disbursement  
DEPOSIT - RADIO PLACEMENT

[REDACTED]

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. PUBLIC OPINION STRATEGIES LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		27		2020

Mailing Address 214 NORTH FAYETTE STREET

FEC Identification Number

**C** [REDACTED]

**Transaction ID : SB21B.I1649**  
Amount of Each Disbursement this Period

[REDACTED] 44240.00

Memo Item

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
POLLING

[REDACTED]

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

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

[REDACTED] 1535418.75

**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)  
**Senate Leadership Fund**

**A. REVV**

Full Name (Last, First, Middle Initial)

Mailing Address 1776 WILSON BLVD., SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 27 / 2020

FEC Identification Number: C

Transaction ID : SB21B.I1652

Amount of Each Disbursement this Period: 415.80

Memo Item

**B. REVV**

Full Name (Last, First, Middle Initial)

Mailing Address 1776 WILSON BLVD., SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 27 / 2020

FEC Identification Number: C

Transaction ID : SB21B.I1652

Amount of Each Disbursement this Period: 9.45

Memo Item

**C. STRIPE INC**

Full Name (Last, First, Middle Initial)

Mailing Address 3180 18TH ST

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 27 / 2020

FEC Identification Number: C

Transaction ID : SB21B.I1653

Amount of Each Disbursement this Period: 215.35

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 640.60

**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)  
**Senate Leadership Fund**

Full Name (Last, First, Middle Initial) <b>A. CHAIN BRIDGE BANK</b>		Date of Disbursement MM / DD / YYYY 08 / 28 / 2020
Mailing Address 1445-A LAUGHLIN AVE		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I1648'</b> Amount of Each Disbursement this Period [ ] 20.00
City MCLEAN	State VA	Zip Code 22101
Purpose of Disbursement BANK FEE		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. MAIN STREET MEDIA GROUP</b>		Date of Disbursement MM / DD / YYYY 08 / 28 / 2020
Mailing Address P.O. BOX 25093		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I16542</b> Amount of Each Disbursement this Period [ ] 824944.82
City ALEXANDRIA	State VA	Zip Code 22313-5093
Purpose of Disbursement DEPOSIT - TV/MEDIA PLACEMENT		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. MAIN STREET MEDIA GROUP</b>		Date of Disbursement MM / DD / YYYY 08 / 28 / 2020
Mailing Address P.O. BOX 25093		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I1654</b> Amount of Each Disbursement this Period [ ] 137707.70
City ALEXANDRIA	State VA	Zip Code 22313-5093
Purpose of Disbursement DEPOSIT - RADIO PLACEMENT		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	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 962672.52
<b>TOTAL</b> 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)

**Senate Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. MAIN STREET MEDIA GROUP**

Mailing Address P.O. BOX 25093

City  
ALEXANDRIA

State  
VA

Zip Code  
22313-5093

Purpose of Disbursement  
DEPOSIT - TV/MEDIA PLACEMENT

Candidate Name

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	8		2	8		2	0	2	0

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.I1654**  
 Amount of Each Disbursement this Period  
 [ ] 515770.70

Memo Item

Full Name (Last, First, Middle Initial)

**B. MAIN STREET MEDIA GROUP**

Mailing Address P.O. BOX 25093

City  
ALEXANDRIA

State  
VA

Zip Code  
22313-5093

Purpose of Disbursement  
DEPOSIT - RADIO PLACEMENT

Candidate Name

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	8		2	8		2	0	2	0

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.I1654**  
 Amount of Each Disbursement this Period  
 [ ] 46235.91

Memo Item

Full Name (Last, First, Middle Initial)

**C. REVV**

Mailing Address 1776 WILSON BLVD., SUITE 530

City  
ARLINGTON

State  
VA

Zip Code  
22209

Purpose of Disbursement  
CREDIT CARD PROCESSING FEES

Candidate Name

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	8		2	8		2	0	2	0

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.I1652**  
 Amount of Each Disbursement this Period  
 [ ] 150.48

Memo Item

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

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

[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
						5	6	2	1

[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
-----	-----	-----	-----	-----	-----	-----	-----	-----	-----

**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)  
**Senate Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. STRIPE INC**

Mailing Address 3180 18TH ST

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement  
CREDIT CARD PROCESSING FEES

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
08 / 28 / 2020

FEC Identification Number

C  
Transaction ID : SB21B.I1653!  
Amount of Each Disbursement this Period  
525.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. REVV**

Mailing Address 1776 WILSON BLVD., SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement  
CREDIT CARD PROCESSING FEES

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
08 / 29 / 2020

FEC Identification Number

C  
Transaction ID : SB21B.I1652€  
Amount of Each Disbursement this Period  
16.50

Memo Item

Full Name (Last, First, Middle Initial)

**C. REVV**

Mailing Address 1776 WILSON BLVD., SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement  
CREDIT CARD PROCESSING FEES

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
08 / 30 / 2020

FEC Identification Number

C  
Transaction ID : SB21B.I1652  
Amount of Each Disbursement this Period  
199.26

Memo Item

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

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

740.76

**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)

**Senate Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. CHAIN BRIDGE BANK**

Mailing Address 1445-A LAUGHLIN AVE

City  
MCLEAN

State  
VA

Zip Code  
22101

Purpose of Disbursement  
BANK FEE

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
0	8		3	1		2	0	2	0

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB21B.I1648**  
Amount of Each Disbursement this Period

[Redacted] 20.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. MAIN STREET MEDIA GROUP**

Mailing Address P.O. BOX 25093

City  
ALEXANDRIA

State  
VA

Zip Code  
22313-5093

Purpose of Disbursement  
DEPOSIT - TV/MEDIA PLACEMENT

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
0	8		3	1		2	0	2	0

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB21B.I1654**  
Amount of Each Disbursement this Period

[Redacted] 705562.39

Memo Item

Full Name (Last, First, Middle Initial)

**C. MAIN STREET MEDIA GROUP**

Mailing Address P.O. BOX 25093

City  
ALEXANDRIA

State  
VA

Zip Code  
22313-5093

Purpose of Disbursement  
DEPOSIT - TV/MEDIA PLACEMENT

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
0	8		3	1		2	0	2	0

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB21B.I1654**  
Amount of Each Disbursement this Period

[Redacted] 1388896.21

Memo Item

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

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

[Redacted] 2094478.60

[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)  
**Senate Leadership Fund**

**A. ONE NATION**

Full Name (Last, First, Middle Initial)

Mailing Address 45 N HILL DR, STE 100

City WARRENTON State VA Zip Code 20186

Purpose of Disbursement RENT AND SALARIES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 31 / 2020

FEC Identification Number: C

Transaction ID : SB21B.I1649

Amount of Each Disbursement this Period: 78706.14

Memo Item

**B. REVV**

Full Name (Last, First, Middle Initial)

Mailing Address 1776 WILSON BLVD., SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 31 / 2020

FEC Identification Number: C

Transaction ID : SB21B.I1652

Amount of Each Disbursement this Period: 90.00

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)..... ▶ 78796.14

**TOTAL** This Period (last page this line number only)..... ▶ 7458396.69

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

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NAME OF COMMITTEE (In Full)  
**Senate Leadership Fund**

Full Name (Last, First, Middle Initial) <b>A. DEFENDARIZONA</b>		Date of Disbursement MM / DD / YYYY 08 / 13 / 2020	
Mailing Address 6635 W. HAPPY VALLEY RD, STE A104,			
City GLENDALE	State AZ	Zip Code 85310	
Purpose of Disbursement CONTRIBUTION		FEC Identification Number C 00668301	
Candidate Name		Transaction ID : SB23.I16372 Amount of Each Disbursement this Period 3500000.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement MM / DD / YYYY	
Mailing Address			
City	State	Zip Code	
Purpose of Disbursement		FEC Identification Number C	
Candidate Name		Amount of Each Disbursement this Period	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY	
Mailing Address			
City	State	Zip Code	
Purpose of Disbursement		FEC Identification Number C	
Candidate Name		Amount of Each Disbursement this Period	
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		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3500000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	3500000.00

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Senate Leadership Fund
FEC IDENTIFICATION NUMBER
C C00571703

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

Full Name of Payee GRAND, STEVEN, L.,
Mailing Address 2337 DERBY STREET
City BERKELEY State CA Zip Code 94705
Purpose of Expenditure TV/MEDIA PRODUCTION - FILED ON 08/12/2020
Category/Type
Date of Public Distribution/Dissemination 08/12/2020
Amount 12695.00
Transaction ID : SE24.16394
Date of Disbursement or Obligation 08/12/2020

Name of Federal Candidate: GREENFIELD, THERESA, ,
Support Oppose
Office Sought: House Senate State: IA
Disbursement For: Primary General 2020 Other (specify)

Full Name of Payee GRAND, STEVEN, L.,
Mailing Address 2337 DERBY STREET
City BERKELEY State CA Zip Code 94705
Purpose of Expenditure RADIO PRODUCTION - FILED ON 08/12/2020
Category/Type
Date of Public Distribution/Dissemination 08/12/2020
Amount 2940.00
Transaction ID : SE24.16395
Date of Disbursement or Obligation 08/12/2020

Name of Federal Candidate: GREENFIELD, THERESA, ,
Support Oppose
Office Sought: House Senate State: IA
Disbursement For: Primary General 2020 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 15635.00
(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.

CROSBY, CALEB, ,

[Electronically Filed]

Date 09/20/2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Senate Leadership Fund
FEC IDENTIFICATION NUMBER
C C00571703

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

Full Name of Payee GRAND, STEVEN, L.,
Mailing Address 2337 DERBY STREET
City BERKELEY State CA Zip Code 94705
Purpose of Expenditure TV/MEDIA PRODUCTION - FILED ON 08/19/2020
Category/Type
Date of Public Distribution/Dissemination 08/19/2020
Amount 12775.00
Transaction ID : SE24.16400
Date of Disbursement or Obligation 08/19/2020

Name of Federal Candidate: GREENFIELD, THERESA,
Support Oppose
Office Sought: House Senate State: IA
Disbursement For: Primary General 2020
Other (specify)

Full Name of Payee GRAND, STEVEN, L.,
Mailing Address 2337 DERBY STREET
City BERKELEY State CA Zip Code 94705
Purpose of Expenditure RADIO PRODUCTION - FILED ON 08/19/2020
Category/Type
Date of Public Distribution/Dissemination 08/19/2020
Amount 2960.00
Transaction ID : SE24.16401
Date of Disbursement or Obligation 08/19/2020

Name of Federal Candidate: GREENFIELD, THERESA,
Support Oppose
Office Sought: House Senate State: IA
Disbursement For: Primary General 2020
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 15735.00
(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.

CROSBY, CALEB, ,

[Electronically Filed]

Date 09/20/2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Senate Leadership Fund
FEC IDENTIFICATION NUMBER
C C00571703

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

Full Name of Payee GRAND, STEVEN, L.,
Mailing Address 2337 DERBY STREET
City BERKELEY State CA Zip Code 94705
Purpose of Expenditure TV/MEDIA PRODUCTION - FILED ON 08/19/2020
Category/Type
Date of Public Distribution/Dissemination 08/19/2020
Amount 12245.00
Transaction ID : SE24.16415
Date of Disbursement or Obligation 08/19/2020

Name of Federal Candidate: GIDEON, SARA,
Support Oppose
Office Sought: House Senate State: ME
Disbursement For: Primary General 2020 Other (specify)

Full Name of Payee GRAND, STEVEN, L.,
Mailing Address 2337 DERBY STREET
City BERKELEY State CA Zip Code 94705
Purpose of Expenditure RADIO PRODUCTION - FILED ON 08/19/2020
Category/Type
Date of Public Distribution/Dissemination 08/19/2020
Amount 2940.00
Transaction ID : SE24.16416
Date of Disbursement or Obligation 08/19/2020

Name of Federal Candidate: GIDEON, SARA,
Support Oppose
Office Sought: House Senate State: ME
Disbursement For: Primary General 2020 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 15185.00
(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.

CROSBY, CALEB, ,

[Electronically Filed]

Date 09/20/2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Senate Leadership Fund
FEC IDENTIFICATION NUMBER
C C00571703

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

Full Name of Payee GRAND, STEVEN, L.,
Mailing Address 2337 DERBY STREET
City BERKELEY State CA Zip Code 94705
Purpose of Expenditure TV/MEDIA PRODUCTION - FILED ON 08/26/2020
Category/Type
Date of Public Distribution/Dissemination 08/26/2020
Amount 12090.00
Transaction ID : SE24.16421
Date of Disbursement or Obligation 08/26/2020

Name of Federal Candidate: GIDEON, SARA, ,
Support Oppose
Office Sought: House Senate State: ME
Disbursement For: Primary General 2020 Other (specify)

Full Name of Payee GRAND, STEVEN, L.,
Mailing Address 2337 DERBY STREET
City BERKELEY State CA Zip Code 94705
Purpose of Expenditure RADIO PRODUCTION - FILED ON 08/26/2020
Category/Type
Date of Public Distribution/Dissemination 08/26/2020
Amount 2950.00
Transaction ID : SE24.16422
Date of Disbursement or Obligation 08/26/2020

Name of Federal Candidate: GIDEON, SARA, ,
Support Oppose
Office Sought: House Senate State: ME
Disbursement For: Primary General 2020 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 15040.00
(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.

CROSBY, CALEB, , [Electronically Filed]
Signature

Date 09/20/2020

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Senate Leadership Fund
FEC IDENTIFICATION NUMBER
C C00571703

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

Full Name of Payee GRAND, STEVEN, L.,
Mailing Address 2337 DERBY STREET
City BERKELEY State CA Zip Code 94705
Purpose of Expenditure TV/MEDIA PRODUCTION - FILED ON 08/26/2020
Category/Type
Date of Public Distribution/Dissemination 08/26/2020
Amount 12820.00
Transaction ID : SE24.16406
Date of Disbursement or Obligation 08/26/2020

Name of Federal Candidate: GREENFIELD, THERESA,
Support Oppose
Office Sought: House Senate State: IA
Disbursement For: Primary General 2020
Other (specify)

Full Name of Payee GRAND, STEVEN, L.,
Mailing Address 2337 DERBY STREET
City BERKELEY State CA Zip Code 94705
Purpose of Expenditure RADIO PRODUCTION - FILED ON 08/26/2020
Category/Type
Date of Public Distribution/Dissemination 08/26/2020
Amount 2960.00
Transaction ID : SE24.16407
Date of Disbursement or Obligation 08/26/2020

Name of Federal Candidate: GREENFIELD, THERESA,
Support Oppose
Office Sought: House Senate State: IA
Disbursement For: Primary General 2020
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 15780.00
(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.

CROSBY, CALEB, ,

[Electronically Filed]

Date

09 / 20 / 2020

Signature

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

NAME OF COMMITTEE (In Full) <b>Senate Leadership Fund</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; margin-right: 5px;">C</span> C00571703                 </div>
--	--

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

Full Name of Payee <input type="checkbox"/> Memo Item <b>ARENA LLC</b>	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.2em;">08</span> / <span style="font-size: 1.2em;">12</span> / <span style="font-size: 1.2em;">2020</span> </div>
Mailing Address <b>1260 STRINGHAM AVE #530</b>	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">96170.65</div>
City <b>SALT LAKE CITY</b> State <b>UT</b> Zip Code <b>84106</b>	
Purpose of Expenditure <b>ONLINE ADVERTISING - FILED ON 08/12/2020</b> Category/Type <span style="border: 1px solid black; padding: 2px;">  /  /  </span>	
Name of Federal Candidate: <b>BULLOCK, STEVE, , ,</b>	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>MT</b>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; text-align: right;">5179443.22</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item <b>ARENA LLC</b>	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.2em;">08</span> / <span style="font-size: 1.2em;">12</span> / <span style="font-size: 1.2em;">2020</span> </div>
Mailing Address <b>1260 STRINGHAM AVE #530</b>	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">71373.60</div>
City <b>SALT LAKE CITY</b> State <b>UT</b> Zip Code <b>84106</b>	
Purpose of Expenditure <b>ONLINE ADVERTISING - FILED ON 08/12/2020</b> Category/Type <span style="border: 1px solid black; padding: 2px;">  /  /  </span>	
Name of Federal Candidate: <b>CUNNINGHAM, CAL, , ,</b>	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <b>NC</b>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; text-align: right;">1992832.95</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">167544.25</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
<b>(c) TOTAL</b> 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.

CROSBY, CALEB, , ,

*[Electronically Filed]*

Date

  /  /    
09 / 20 / 2020

Signature



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Senate Leadership Fund
FEC IDENTIFICATION NUMBER
C C00571703

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

Full Name of Payee ARENA LLC
Mailing Address 1260 STRINGHAM AVE #530
City SALT LAKE CITY State UT Zip Code 84106
Purpose of Expenditure ONLINE ADVERTISING - FILED ON 08/19/2020
Name of Federal Candidate: CUNNINGHAM, CAL, , ,
Amount 71373.60
Transaction ID : SE24.16455
Date of Disbursement or Obligation 08/19/2020

Full Name of Payee ARENA LLC
Mailing Address 1260 STRINGHAM AVE #530
City SALT LAKE CITY State UT Zip Code 84106
Purpose of Expenditure ONLINE ADVERTISING - FILED ON 08/19/2020
Name of Federal Candidate: BULLOCK, STEVE, , ,
Amount 96170.65
Transaction ID : SE24.16437
Date of Disbursement or Obligation 08/19/2020

(a) SUBTOTAL of Itemized Independent Expenditures 167544.25
(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.

CROSBY, CALEB, , ,

[Electronically Filed]

Date 09/20/2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Senate Leadership Fund
FEC IDENTIFICATION NUMBER
C C00571703

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

Full Name of Payee ARENA LLC
Mailing Address 1260 STRINGHAM AVE #530
City SALT LAKE CITY State UT Zip Code 84106
Purpose of Expenditure ONLINE ADVERTISING - FILED ON 08/26/2020
Date of Public Distribution/Dissemination 08/26/2020
Amount 96170.65
Transaction ID : SE24.16443
Date of Disbursement or Obligation 08/26/2020

Name of Federal Candidate: BULLOCK, STEVE, ,
Support Oppose
Office Sought: House Senate State: MT
Disbursement For: Primary General 2020 Other (specify)

Full Name of Payee ARENA LLC
Mailing Address 1260 STRINGHAM AVE #530
City SALT LAKE CITY State UT Zip Code 84106
Purpose of Expenditure ONLINE ADVERTISING - FILED ON 08/26/2020
Date of Public Distribution/Dissemination 08/26/2020
Amount 71373.60
Transaction ID : SE24.16461
Date of Disbursement or Obligation 08/26/2020

Name of Federal Candidate: CUNNINGHAM, CAL, ,
Support Oppose
Office Sought: House Senate State: NC
Disbursement For: Primary General 2020 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 167544.25
(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.

CROSBY, CALEB, , [Electronically Filed] Date 09/20/2020
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Senate Leadership Fund
FEC IDENTIFICATION NUMBER
C C00571703

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

Full Name of Payee
CONNECTION STRATEGY, LLC
Mailing Address
P.O. BOX 1636
City
DRIPPING SPRINGS
State
TX
Zip Code
78620
Purpose of Expenditure
TEXT MESSAGING - FILED ON 08/01/2020
Category/Type
Amount
13921.18
Transaction ID : SE24.16410
Date of Disbursement or Obligation
08 / 01 / 2020

Name of Federal Candidate:
MARSHALL, ROGER, ,
Support
Oppose
Office Sought:
House
Senate
District:
State: KS
Calendar Year-To-Date
Per Election for Office Sought
1973148.88
Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
CONNECTION STRATEGY, LLC
Mailing Address
P.O. BOX 1636
City
DRIPPING SPRINGS
State
TX
Zip Code
78620
Purpose of Expenditure
TEXT MESSAGING - FILED ON 08/04/2020
Category/Type
Amount
13300.00
Transaction ID : SE24.16411
Date of Disbursement or Obligation
08 / 03 / 2020

Name of Federal Candidate:
MARSHALL, ROGER, ,
Support
Oppose
Office Sought:
House
Senate
District:
State: KS
Calendar Year-To-Date
Per Election for Office Sought
1973148.88
Disbursement For:
Primary
General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures ..... 27221.18
(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.

CROSBY, CALEB, ,

[Electronically Filed]

Date 09 / 20 / 2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Senate Leadership Fund
FEC IDENTIFICATION NUMBER
C C00571703

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

Full Name of Payee
DMM MEDIA
Mailing Address
1911 N. FORT MYER DRIVE, SUITE 400
City
ARLINGTON State
VA Zip Code
22209
Purpose of Expenditure
TV/MEDIA PRODUCTION - FILED ON 08/12/2020
Category/Type
Name of Federal Candidate:
OSSOFF, JONATHAN, ,
Support Oppose
Office Sought:
House Senate State: GA
Disbursement For:
Primary General 2020
Other (specify)

Full Name of Payee
DMM MEDIA
Mailing Address
1911 N. FORT MYER DRIVE, SUITE 400
City
ARLINGTON State
VA Zip Code
22209
Purpose of Expenditure
RADIO PRODUCTION - FILED ON 08/12/2020
Category/Type
Name of Federal Candidate:
OSSOFF, JONATHAN, ,
Support Oppose
Office Sought:
House Senate State: GA
Disbursement For:
Primary General 2020
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures
15518.38
(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.

CROSBY, CALEB, ,

[Electronically Filed]

Date 09 / 20 / 2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Senate Leadership Fund
FEC IDENTIFICATION NUMBER
C C00571703

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

Full Name of Payee: DMM MEDIA
Mailing Address: 1911 N. FORT MYER DRIVE, SUITE 400
City: ARLINGTON, State: VA, Zip Code: 22209
Purpose of Expenditure: TV/MEDIA PRODUCTION - FILED ON 08/12/2020
Category/Type:
Name of Federal Candidate: CUNNINGHAM, CAL, , ,
Support: [ ], Oppose: [x]
Office Sought: [ ] House, [x] Senate, District: , State: NC
Calendar Year-To-Date Per Election for Office Sought: 1992832.95
Disbursement For: [ ] Primary, [x] General 2020, [ ] Other (specify)

Full Name of Payee: DMM MEDIA
Mailing Address: 1911 N. FORT MYER DRIVE, SUITE 400
City: ARLINGTON, State: VA, Zip Code: 22209
Purpose of Expenditure: RADIO PRODUCTION - FILED ON 08/12/2020
Category/Type:
Name of Federal Candidate: CUNNINGHAM, CAL, , ,
Support: [ ], Oppose: [x]
Office Sought: [ ] House, [x] Senate, District: , State: NC
Calendar Year-To-Date Per Election for Office Sought: 1992832.95
Disbursement For: [ ] Primary, [x] General 2020, [ ] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures ..... 14773.70
(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.

CROSBY, CALEB, , ,

[Electronically Filed]

Date 09 / 20 / 2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Senate Leadership Fund
FEC IDENTIFICATION NUMBER
C C00571703

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

Full Name of Payee: DMM MEDIA
Mailing Address: 1911 N. FORT MYER DRIVE, SUITE 400
City: ARLINGTON, State: VA, Zip Code: 22209
Purpose of Expenditure: TV/MEDIA PRODUCTION - FILED ON 08/19/2020
Category/Type:
Name of Federal Candidate: CUNNINGHAM, CAL, , ,
Calendar Year-To-Date Per Election for Office Sought: 1992832.95
Disbursement For: General 2020

Full Name of Payee: DMM MEDIA
Mailing Address: 1911 N. FORT MYER DRIVE, SUITE 400
City: ARLINGTON, State: VA, Zip Code: 22209
Purpose of Expenditure: RADIO PRODUCTION - FILED ON 08/19/2020
Category/Type:
Name of Federal Candidate: CUNNINGHAM, CAL, , ,
Calendar Year-To-Date Per Election for Office Sought: 1992832.95
Disbursement For: General 2020

(a) SUBTOTAL of Itemized Independent Expenditures: 14963.93
(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.

CROSBY, CALEB, , ,

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Date: 09 / 20 / 2020

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Senate Leadership Fund
FEC IDENTIFICATION NUMBER
C C00571703

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

Full Name of Payee: DMM MEDIA
Mailing Address: 1911 N. FRONT MYER DRIVE, SUITE 40
City: ARLINGTON, State: VA, Zip Code: 22209
Purpose of Expenditure: TV/MEDIA PRODUCTION - FILED ON 08/19/2020
Amount: 12494.76
Transaction ID: SE24.16381
Date of Disbursement or Obligation: 08/19/2020
Name of Federal Candidate: OSSOFF, JONATHAN, , ,
Disbursement For: General 2020

Full Name of Payee: DMM MEDIA
Mailing Address: 1911 N. FRONT MYER DRIVE, SUITE 40
City: ARLINGTON, State: VA, Zip Code: 22209
Purpose of Expenditure: RADIO PRODUCTION - FILED ON 08/19/2020
Amount: 2795.18
Transaction ID: SE24.16382
Date of Disbursement or Obligation: 08/19/2020
Name of Federal Candidate: OSSOFF, JONATHAN, , ,
Disbursement For: General 2020

(a) SUBTOTAL of Itemized Independent Expenditures: 15289.94
(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.

CROSBY, CALEB, ,

[Electronically Filed]

Date 09/20/2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Senate Leadership Fund
FEC IDENTIFICATION NUMBER
C C00571703

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

Full Name of Payee: DMM MEDIA
Mailing Address: 1911 N. FORT MYER DRIVE, SUITE 400
City: ARLINGTON, State: VA, Zip Code: 22209
Purpose of Expenditure: TV/MEDIA PRODUCTION - FILED ON 08/26/2020
Category/Type:
Name of Federal Candidate: OSSOFF, JONATHAN, , ,
Office Sought: Senate, State: GA
Amount: 12575.09
Transaction ID: SE24.16387
Date of Disbursement or Obligation: 08/26/2020
Disbursement For: General 2020

Full Name of Payee: DMM MEDIA
Mailing Address: 1911 N. FORT MYER DRIVE, SUITE 400
City: ARLINGTON, State: VA, Zip Code: 22209
Purpose of Expenditure: RADIO PRODUCTION - FILED ON 08/26/2020
Category/Type:
Name of Federal Candidate: OSSOFF, JONATHAN, , ,
Office Sought: Senate, State: GA
Amount: 2830.00
Transaction ID: SE24.16388
Date of Disbursement or Obligation: 08/26/2020
Disbursement For: General 2020

(a) SUBTOTAL of Itemized Independent Expenditures: 15405.09
(b) SUBTOTAL of Unitemized Independent Expenditures:
(c) TOTAL Independent Expenditures:

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CROSBY, CALEB, , ,

[Electronically Filed]

Date

09 / 20 / 2020

Signature



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Senate Leadership Fund
FEC IDENTIFICATION NUMBER
C C00571703

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

Full Name of Payee: DMM MEDIA
Mailing Address: 1911 N. FORT MYER DRIVE, SUITE 400
City: ARLINGTON, State: VA, Zip Code: 22209
Purpose of Expenditure: TV/MEDIA PRODUCTION - FILED ON 08/26/2020
Category/Type:
Name of Federal Candidate: CUNNINGHAM, CAL, , ,
Support: [ ], Oppose: [x]
Office Sought: [ ] House, [x] Senate, State: NC
Calendar Year-To-Date Per Election for Office Sought: 1992832.95
Disbursement For: [ ] Primary, [x] General 2020

Full Name of Payee: DMM MEDIA
Mailing Address: 1911 N. FORT MYER DRIVE, SUITE 400
City: ARLINGTON, State: VA, Zip Code: 22209
Purpose of Expenditure: RADIO PRODUCTION - FILED ON 08/26/2020
Category/Type:
Name of Federal Candidate: CUNNINGHAM, CAL, , ,
Support: [ ], Oppose: [x]
Office Sought: [ ] House, [x] Senate, State: NC
Calendar Year-To-Date Per Election for Office Sought: 1992832.95
Disbursement For: [ ] Primary, [x] General 2020

(a) SUBTOTAL of Itemized Independent Expenditures ..... 14784.12
(b) SUBTOTAL of Unitemized Independent Expenditures.....
(c) TOTAL Independent Expenditures .....

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CROSBY, CALEB, , ,

[Electronically Filed]

Date 09 / 20 / 2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Senate Leadership Fund
FEC IDENTIFICATION NUMBER
C C00571703

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

Full Name of Payee FP1 DIGITAL, LLC
Mailing Address 3001 WASHINGTON BLVD., 7TH FLOOR
City ARLINGTON State VA Zip Code 22201
Purpose of Expenditure ONLINE ADVERTISING - FILED ON 08/12/2020
Category/Type
Date of Public Distribution/Dissemination 08/12/2020
Amount 344918.00
Transaction ID: SE24.16377
Date of Disbursement or Obligation 08/12/2020

Name of Federal Candidate: OSSOFF, JONATHAN, ,
Support Oppose
Office Sought: House Senate State: GA
Disbursement For: Primary General 2020 Other (specify)

Full Name of Payee FP1 DIGITAL, LLC
Mailing Address 3001 WASHINGTON BLVD., 7TH FLOOR
City ARLINGTON State VA Zip Code 22201
Purpose of Expenditure ONLINE ADVERTISING - FILED ON 08/12/2020
Category/Type
Date of Public Distribution/Dissemination 08/12/2020
Amount 195788.45
Transaction ID: SE24.16396
Date of Disbursement or Obligation 08/12/2020

Name of Federal Candidate: GREENFIELD, THERESA, ,
Support Oppose
Office Sought: House Senate State: IA
Disbursement For: Primary General 2020 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 540706.45
(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.

CROSBY, CALEB, ,

[Electronically Filed]

Date 09/20/2020

Signature

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

NAME OF COMMITTEE (In Full) <b>Senate Leadership Fund</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00571703
--	--

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

Full Name of Payee <input type="checkbox"/> Memo Item <b>FP1 DIGITAL, LLC</b>	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address <b>3001 WASHINGTON BLVD., 7TH FLOOR</b>	Amount <input type="text"/>
City <b>ARLINGTON</b> State <b>VA</b> Zip Code <b>22201</b>	<b>Transaction ID : SE24.16402</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure <b>ONLINE ADVERTISING - FILED ON 08/19/2020</b> Category/Type <input type="text"/>	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose <b>GREENFIELD, THERESA, , ,</b> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate District: _____ State: <b>IA</b>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> <b>3357534.51</b>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item <b>FP1 DIGITAL, LLC</b>	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address <b>3001 WASHINGTON BLVD., 7TH FLOOR</b>	Amount <input type="text"/>
City <b>ARLINGTON</b> State <b>VA</b> Zip Code <b>22201</b>	<b>Transaction ID : SE24.16383</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure <b>ONLINE ADVERTISING - FILED ON 08/19/2020</b> Category/Type <input type="text"/>	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose <b>OSSOFF, JONATHAN, , ,</b> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate District: _____ State: <b>GA</b>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> <b>5717423.51</b>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<input type="text"/> <b>440269.45</b>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....	<input type="text"/>
<b>(c) TOTAL</b> Independent Expenditures .....	<input type="text"/>

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

CROSBY, CALEB, , ,

*[Electronically Filed]*

Date

/  /

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Senate Leadership Fund
FEC IDENTIFICATION NUMBER
C C00571703

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

Full Name of Payee
FP1 DIGITAL, LLC
Mailing Address
3001 WASHINGTON BLVD., 7TH FLOOR
City
ARLINGTON State
VA Zip Code
22201
Purpose of Expenditure
ONLINE ADVERTISING - FILED ON 08/26/2020
Category/Type
Date of Public Distribution/Dissemination
08 / 26 / 2020
Amount
344918.00
Transaction ID : SE24.16389
Date of Disbursement or Obligation
08 / 26 / 2020

Name of Federal Candidate:
OSSOFF, JONATHAN, ,
Support Oppose
Office Sought:
House Senate State: GA
Disbursement For:
Primary General 2020
Other (specify)

Full Name of Payee
FP1 DIGITAL, LLC
Mailing Address
3001 WASHINGTON BLVD., 7TH FLOOR
City
ARLINGTON State
VA Zip Code
22201
Purpose of Expenditure
ONLINE ADVERTISING - FILED ON 08/26/2020
Category/Type
Date of Public Distribution/Dissemination
08 / 26 / 2020
Amount
195788.45
Transaction ID : SE24.16408
Date of Disbursement or Obligation
08 / 26 / 2020

Name of Federal Candidate:
GREENFIELD, THERESA, ,
Support Oppose
Office Sought:
House Senate State: IA
Disbursement For:
Primary General 2020
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures ..... 540706.45
(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.

CROSBY, CALEB, , [Electronically Filed] Date 09 / 20 / 2020
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Senate Leadership Fund
FEC IDENTIFICATION NUMBER
C C00571703

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

Full Name of Payee
MAIN STREET MEDIA GROUP
Memo Item

Date of Public Distribution/Dissemination
08 / 12 / 2020

Mailing Address
P.O. BOX 25093

Amount
798434.92

City State Zip Code
ALEXANDRIA VA 22313-5093

Transaction ID : SE24.16392
Date of Disbursement or Obligation

Purpose of Expenditure
TV/MEDIA PLACEMENT - FILED ON 08/12/2020
Category/Type

08 / 07 / 2020

Name of Federal Candidate:
GREENFIELD, THERESA, ,
Support Oppose

Office Sought:
House Senate
President Senate
District: State: IA

Calendar Year-To-Date
Per Election for Office Sought
3357534.51

Disbursement For:
Primary General
Other (specify)

Full Name of Payee
MAIN STREET MEDIA GROUP
Memo Item

Date of Public Distribution/Dissemination
08 / 12 / 2020

Mailing Address
P.O. BOX 25093

Amount
120508.28

City State Zip Code
ALEXANDRIA VA 22313-5093

Transaction ID : SE24.16393
Date of Disbursement or Obligation

Purpose of Expenditure
RADIO PLACEMENT - FILED ON 08/12/2020
Category/Type

08 / 07 / 2020

Name of Federal Candidate:
GREENFIELD, THERESA, ,
Support Oppose

Office Sought:
House Senate
President Senate
District: State: IA

Calendar Year-To-Date
Per Election for Office Sought
3357534.51

Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 918943.20
(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.

CROSBY, CALEB, , [Electronically Filed] Date 09 / 20 / 2020
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Senate Leadership Fund
FEC IDENTIFICATION NUMBER
C C00571703

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

Full Name of Payee MAIN STREET MEDIA GROUP
Mailing Address P.O. BOX 25093
City ALEXANDRIA State VA Zip Code 22313-5093
Purpose of Expenditure TV/MEDIA PLACEMENT - FILED ON 08/12/2020
Category/Type
Name of Federal Candidate: CUNNINGHAM, CAL, ,
Support Oppose
Office Sought: House Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 1992832.95
Disbursement For: Primary General 2020 Other (specify)

Full Name of Payee MAIN STREET MEDIA GROUP
Mailing Address P.O. BOX 25093
City ALEXANDRIA State VA Zip Code 22313-5093
Purpose of Expenditure RADIO PLACEMENT - FILED ON 08/12/2020
Category/Type
Name of Federal Candidate: CUNNINGHAM, CAL, ,
Support Oppose
Office Sought: House Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 1992832.95
Disbursement For: Primary General 2020 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 578488.07
(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.

CROSBY, CALEB, ,

[Electronically Filed]

Date 09 / 20 / 2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Senate Leadership Fund
FEC IDENTIFICATION NUMBER
C C00571703

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

Full Name of Payee MAIN STREET MEDIA GROUP
Mailing Address P.O. BOX 25093
City ALEXANDRIA State VA Zip Code 22313-5093
Purpose of Expenditure TV/MEDIA PLACEMENT - FILED ON 08/19/2020
Category/Type
Name of Federal Candidate: CUNNINGHAM, CAL, ,
Support Oppose
Office Sought: House Senate State: NC
Disbursement For: Primary General 2020
Amount 517222.61
Transaction ID : SE24.16451
Date of Disbursement or Obligation 08/14/2020

Full Name of Payee MAIN STREET MEDIA GROUP
Mailing Address P.O. BOX 25093
City ALEXANDRIA State VA Zip Code 22313-5093
Purpose of Expenditure RADIO PLACEMENT - FILED ON 08/19/2020
Category/Type
Name of Federal Candidate: CUNNINGHAM, CAL, ,
Support Oppose
Office Sought: House Senate State: NC
Disbursement For: Primary General 2020
Amount 46367.64
Transaction ID : SE24.16452
Date of Disbursement or Obligation 08/14/2020

(a) SUBTOTAL of Itemized Independent Expenditures 563590.25
(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.

CROSBY, CALEB, ,

[Electronically Filed]

Date 09/20/2020

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Senate Leadership Fund
FEC IDENTIFICATION NUMBER
C C00571703

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

Full Name of Payee MAIN STREET MEDIA GROUP
Mailing Address P.O. BOX 25093
City ALEXANDRIA State VA Zip Code 22313-5093
Purpose of Expenditure TV/MEDIA PLACEMENT - FILED ON 08/19/2020
Category/Type
Date of Public Distribution/Dissemination 08/19/2020
Amount 772691.18
Transaction ID : SE24.16398
Date of Disbursement or Obligation 08/14/2020

Name of Federal Candidate: GREENFIELD, THERESA, ,
Support Oppose
Office Sought: House Senate State: IA
Disbursement For: Primary General 2020
Other (specify)

Full Name of Payee MAIN STREET MEDIA GROUP
Mailing Address P.O. BOX 25093
City ALEXANDRIA State VA Zip Code 22313-5093
Purpose of Expenditure RADIO PLACEMENT - FILED ON 08/19/2020
Category/Type
Date of Public Distribution/Dissemination 08/19/2020
Amount 111031.23
Transaction ID : SE24.16399
Date of Disbursement or Obligation 08/14/2020

Name of Federal Candidate: GREENFIELD, THERESA, ,
Support Oppose
Office Sought: House Senate State: IA
Disbursement For: Primary General 2020
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 883722.41
(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.

CROSBY, CALEB, ,
Signature

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Date 09/20/2020



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Senate Leadership Fund
FEC IDENTIFICATION NUMBER
C C00571703

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

Full Name of Payee
MAIN STREET MEDIA GROUP
Mailing Address
P.O. BOX 25093
City
ALEXANDRIA State
VA Zip Code
22313-5093
Purpose of Expenditure
TV/MEDIA PLACEMENT - FILED ON 08/19/2020
Category/Type
Date of Public Distribution/Dissemination
08 / 19 / 2020
Amount
666053.60
Transaction ID : SE24.16413
Date of Disbursement or Obligation
08 / 14 / 2020

Name of Federal Candidate:
GIDEON, SARA, ,
Support Oppose
Office Sought:
House Senate State: ME
Disbursement For:
Primary General 2020
Other (specify)

Full Name of Payee
MAIN STREET MEDIA GROUP
Mailing Address
P.O. BOX 25093
City
ALEXANDRIA State
VA Zip Code
22313-5093
Purpose of Expenditure
RADIO PLACEMENT - FILED ON 08/19/2020
Category/Type
Date of Public Distribution/Dissemination
08 / 19 / 2020
Amount
61107.20
Transaction ID : SE24.16414
Date of Disbursement or Obligation
08 / 14 / 2020

Name of Federal Candidate:
GIDEON, SARA, ,
Support Oppose
Office Sought:
House Senate State: ME
Disbursement For:
Primary General 2020
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures ..... 727160.80
(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.

CROSBY, CALEB, ,
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Date
09 / 20 / 2020

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Senate Leadership Fund
FEC IDENTIFICATION NUMBER
C C00571703

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

Full Name of Payee MAIN STREET MEDIA GROUP
Mailing Address P.O. BOX 25093
City ALEXANDRIA State VA Zip Code 22313-5093
Purpose of Expenditure TV/MEDIA PLACEMENT - FILED ON 08/26/2020
Category/Type
Name of Federal Candidate: GIDEON, SARA, ,
Office Sought: Senate State: ME
Calendar Year-To-Date Per Election for Office Sought 1582352.99
Disbursement For: General 2020

Full Name of Payee MAIN STREET MEDIA GROUP
Mailing Address P.O. BOX 25093
City ALEXANDRIA State VA Zip Code 22313-5093
Purpose of Expenditure RADIO PLACEMENT - FILED ON 08/26/2020
Category/Type
Name of Federal Candidate: GIDEON, SARA, ,
Office Sought: Senate State: ME
Calendar Year-To-Date Per Election for Office Sought 1582352.99
Disbursement For: General 2020

(a) SUBTOTAL of Itemized Independent Expenditures 717637.05
(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.

CROSBY, CALEB, ,

[Electronically Filed]

Date 09 / 20 / 2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Senate Leadership Fund
FEC IDENTIFICATION NUMBER
C C00571703

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

Full Name of Payee MAIN STREET MEDIA GROUP
Mailing Address P.O. BOX 25093
City ALEXANDRIA State VA Zip Code 22313-5093
Purpose of Expenditure TV/MEDIA PLACEMENT - FILED ON 08/26/2020
Category/Type
Date of Public Distribution/Dissemination 08/26/2020
Amount 789464.00
Transaction ID : SE24.16404
Date of Disbursement or Obligation 08/20/2020

Name of Federal Candidate: GREENFIELD, THERESA, ,
Support Oppose
Office Sought: House Senate State: IA
Disbursement For: Primary General 2020 Other (specify)

Full Name of Payee MAIN STREET MEDIA GROUP
Mailing Address P.O. BOX 25093
City ALEXANDRIA State VA Zip Code 22313-5093
Purpose of Expenditure RADIO PLACEMENT - FILED ON 08/26/2020
Category/Type
Date of Public Distribution/Dissemination 08/26/2020
Amount 110715.80
Transaction ID : SE24.16405
Date of Disbursement or Obligation 08/20/2020

Name of Federal Candidate: GREENFIELD, THERESA, ,
Support Oppose
Office Sought: House Senate State: IA
Disbursement For: Primary General 2020 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 900179.80
(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.

CROSBY, CALEB, , [Electronically Filed]
Signature

Date 09/20/2020

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

NAME OF COMMITTEE (In Full) <b>Senate Leadership Fund</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00571703
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Check if  24-hour report  48-hour report  New report Amends report filed on  /  /

Full Name of Payee <input type="checkbox"/> Memo Item <b>MAIN STREET MEDIA GROUP</b>		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address P.O. BOX 25093		Amount <input type="text"/> 522993.41
City ALEXANDRIA	State VA	
Zip Code 22313-5093	Purpose of Expenditure TV/MEDIA PLACEMENT - FILED ON 08/26/2020	Transaction ID : <b>SE24.16457</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: CUNNINGHAM, CAL, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 1992832.95		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item <b>MAIN STREET MEDIA GROUP</b>		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address P.O. BOX 25093		Amount <input type="text"/> 46235.91
City ALEXANDRIA	State VA	
Zip Code 22313-5093	Purpose of Expenditure RADIO PLACEMENT - FILED ON 08/26/2020	Transaction ID : <b>SE24.16458</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: CUNNINGHAM, CAL, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 1992832.95		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<input type="text"/> 569229.32
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....	<input type="text"/>
(c) <b>TOTAL</b> Independent Expenditures .....	<input type="text"/>

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

CROSBY, CALEB, , ,

*[Electronically Filed]*

Date  /  /

Signature

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

NAME OF COMMITTEE (In Full) <b>Senate Leadership Fund</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00571703
--	--

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 <b>MAJORITY STRATEGIES, LLC</b>		Date of Public Distribution/Dissemination <span style="margin-left: 20px;">M M / D D / Y Y Y Y Y Y</span> <span style="margin-left: 20px;">08 / 19 / 2020</span>	
Mailing Address 12854 KENAN DRIVE, SUITE 145		Amount <span style="margin-left: 20px;">48456.91</span>	
City JACKSONVILLE	State FL	Zip Code 32258	<b>Transaction ID : SE24.16417</b>
Purpose of Expenditure ONLINE ADVERTISING - FILED ON 08/19/2020		Category/Type <span style="border: 1px solid black; display: inline-block; width: 50px; height: 15px;"></span>	Date of Disbursement or Obligation <span style="margin-left: 20px;">M M / D D / Y Y Y Y Y Y</span> <span style="margin-left: 20px;">08 / 19 / 2020</span>
Name of Federal Candidate: GIDEON, SARA, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>ME</u>
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;"><span style="border: 1px solid black; display: inline-block; width: 150px; height: 15px;"></span></span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item <b>MAJORITY STRATEGIES, LLC</b>		Date of Public Distribution/Dissemination <span style="margin-left: 20px;">M M / D D / Y Y Y Y Y Y</span> <span style="margin-left: 20px;">08 / 26 / 2020</span>	
Mailing Address 12854 KENAN DRIVE, SUITE 145		Amount <span style="margin-left: 20px;">48456.91</span>	
City JACKSONVILLE	State FL	Zip Code 32258	<b>Transaction ID : SE24.16423</b>
Purpose of Expenditure ONLINE ADVERTISING - FILED ON 08/26/2020		Category/Type <span style="border: 1px solid black; display: inline-block; width: 50px; height: 15px;"></span>	Date of Disbursement or Obligation <span style="margin-left: 20px;">M M / D D / Y Y Y Y Y Y</span> <span style="margin-left: 20px;">08 / 26 / 2020</span>
Name of Federal Candidate: GIDEON, SARA, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>ME</u>
Calendar Year-To-Date Per Election for Office Sought <span style="margin-left: 20px;"><span style="border: 1px solid black; display: inline-block; width: 150px; height: 15px;"></span></span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<span style="border: 1px solid black; display: inline-block; width: 150px; height: 15px;"></span> 96913.82
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....	<span style="border: 1px solid black; display: inline-block; width: 150px; height: 15px;"></span>
<b>(c) TOTAL</b> Independent Expenditures .....	<span style="border: 1px solid black; display: inline-block; width: 150px; height: 15px;"></span>

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CROSBY, CALEB, , , [Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
09 / 20 / 2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Senate Leadership Fund
FEC IDENTIFICATION NUMBER
C C00571703

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

Full Name of Payee MCCARTHY HENNINGS WHALEN, INC.
Mailing Address 1850 M STREET NW, SUITE 235
City WASHINGTON State DC Zip Code 20036
Purpose of Expenditure TV/MEDIA PRODUCTION - FILED ON 08/12/2020
Category/Type
Date of Public Distribution/Dissemination 08/12/2020
Amount 11478.43
Transaction ID : SE24.16428
Date of Disbursement or Obligation 08/12/2020

Name of Federal Candidate: BULLOCK, STEVE, ,
Support Oppose
Office Sought: House Senate State: MT
Disbursement For: Primary General 2020
Other (specify)

Full Name of Payee MCCARTHY HENNINGS WHALEN, INC.
Mailing Address 1850 M STREET NW, SUITE 235
City WASHINGTON State DC Zip Code 20036
Purpose of Expenditure RADIO PRODUCTION - FILED ON 08/12/2020
Category/Type
Date of Public Distribution/Dissemination 08/12/2020
Amount 1068.33
Transaction ID : SE24.16429
Date of Disbursement or Obligation 08/12/2020

Name of Federal Candidate: BULLOCK, STEVE, ,
Support Oppose
Office Sought: House Senate State: MT
Disbursement For: Primary General 2020
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 12546.76
(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.

CROSBY, CALEB, ,

[Electronically Filed]

Date 09/20/2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Senate Leadership Fund
FEC IDENTIFICATION NUMBER
C C00571703

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

Full Name of Payee MCCARTHY HENNINGS WHALEN, INC.
Mailing Address 1850 M STREET NW, SUITE 235
City WASHINGTON State DC Zip Code 20036
Purpose of Expenditure TV/MEDIA PRODUCTION - FILED ON 08/19/2020
Category/Type
Date of Public Distribution/Dissemination 08/19/2020
Amount 9836.05
Transaction ID : SE24.16435
Date of Disbursement or Obligation 08/19/2020

Name of Federal Candidate: BULLOCK, STEVE, ,
Support Oppose
Office Sought: House Senate State: MT
Disbursement For: Primary General 2020
Other (specify)

Full Name of Payee MCCARTHY HENNINGS WHALEN, INC.
Mailing Address 1850 M STREET NW, SUITE 235
City WASHINGTON State DC Zip Code 20036
Purpose of Expenditure RADIO PRODUCTION - FILED ON 08/19/2020
Category/Type
Date of Public Distribution/Dissemination 08/19/2020
Amount 1367.66
Transaction ID : SE24.16436
Date of Disbursement or Obligation 08/19/2020

Name of Federal Candidate: BULLOCK, STEVE, ,
Support Oppose
Office Sought: House Senate State: MT
Disbursement For: Primary General 2020
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 11203.71
(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.

CROSBY, CALEB, ,

[Electronically Filed]

Date 09/20/2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Senate Leadership Fund
FEC IDENTIFICATION NUMBER
C C00571703

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

Full Name of Payee MCCARTHY HENNINGS WHALEN, INC.
Mailing Address 1850 M STREET NW, SUITE 235
City WASHINGTON State DC Zip Code 20036
Purpose of Expenditure TV/MEDIA PRODUCTION - FILED ON 08/26/2020
Category/Type
Date of Public Distribution/Dissemination 08/26/2020
Amount 10715.63
Transaction ID : SE24.16441
Date of Disbursement or Obligation 08/26/2020

Name of Federal Candidate: BULLOCK, STEVE, ,
Support Oppose
Office Sought: House Senate State: MT
Disbursement For: Primary General 2020
Other (specify)

Full Name of Payee MCCARTHY HENNINGS WHALEN, INC.
Mailing Address 1850 M STREET NW, SUITE 235
City WASHINGTON State DC Zip Code 20036
Purpose of Expenditure RADIO PRODUCTION - FILED ON 08/26/2020
Category/Type
Date of Public Distribution/Dissemination 08/26/2020
Amount 1193.33
Transaction ID : SE24.16442
Date of Disbursement or Obligation 08/26/2020

Name of Federal Candidate: BULLOCK, STEVE, ,
Support Oppose
Office Sought: House Senate State: MT
Disbursement For: Primary General 2020
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 11908.96
(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.

CROSBY, CALEB, ,

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Date 09/20/2020

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Senate Leadership Fund
FEC IDENTIFICATION NUMBER
C C00571703

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

Full Name of Payee MENTZER MEDIA SERVICES
Mailing Address 210 W. PENNSYLVANIA AVE. SUITE 250
City TOWSON State MD Zip Code 21204
Purpose of Expenditure TV/MEDIA PLACEMENT - FILED ON 08/12/2020
Category/Type
Name of Federal Candidate: BULLOCK, STEVE, , ,
Office Sought: Senate State: MT
Calendar Year-To-Date Per Election for Office Sought 5179443.22
Disbursement For: General 2020

Full Name of Payee MENTZER MEDIA SERVICES
Mailing Address 210 W. PENNSYLVANIA AVE. SUITE 250
City TOWSON State MD Zip Code 21204
Purpose of Expenditure RADIO PLACEMENT - FILED ON 08/12/2020
Category/Type
Name of Federal Candidate: BULLOCK, STEVE, , ,
Office Sought: Senate State: MT
Calendar Year-To-Date Per Election for Office Sought 5179443.22
Disbursement For: General 2020

(a) SUBTOTAL of Itemized Independent Expenditures 1173677.05
(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.

CROSBY, CALEB, , ,

[Electronically Filed]

Date

09 / 20 / 2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Senate Leadership Fund
FEC IDENTIFICATION NUMBER
C C00571703

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

Full Name of Payee MENTZER MEDIA SERVICES
Mailing Address 210 W. PENNSYLVANIA AVE. SUITE 250
City TOWSON State MD Zip Code 21204
Purpose of Expenditure TV/MEDIA PLACEMENT - FILED ON 08/12/2020
Category/Type
Name of Federal Candidate: OSSOFF, JONATHAN, , ,
Office Sought: Senate State: GA
Disbursement For: General 2020
Amount 1373002.54
Transaction ID: SE24.16373
Date of Disbursement or Obligation 08/05/2020

Full Name of Payee MENTZER MEDIA SERVICES
Mailing Address 210 W. PENNSYLVANIA AVE. SUITE 250
City TOWSON State MD Zip Code 21204
Purpose of Expenditure RADIO PLACEMENT - FILED ON 08/12/2020
Category/Type
Name of Federal Candidate: OSSOFF, JONATHAN, , ,
Office Sought: Senate State: GA
Disbursement For: General 2020
Amount 243006.40
Transaction ID: SE24.16374
Date of Disbursement or Obligation 08/05/2020

(a) SUBTOTAL of Itemized Independent Expenditures 1616008.94
(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.

CROSBY, CALEB, ,

[Electronically Filed]

Date 09/20/2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Senate Leadership Fund
FEC IDENTIFICATION NUMBER
C C00571703

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

Full Name of Payee
MENTZER MEDIA SERVICES
Mailing Address
210 W. PENNSYLVANIA AVE. SUITE 250
City
TOWSON State
MD Zip Code
21204
Purpose of Expenditure
TV/MEDIA PLACEMENT - FILED ON 08/19/2020
Category/Type
Amount
1327122.72
Transaction ID : SE24.16379
Date of Disbursement or Obligation
08 / 12 / 2020

Name of Federal Candidate:
OSSOFF, JONATHAN, ,
Support Oppose
Office Sought:
House Senate State: GA
Disbursement For:
Primary General 2020
Other (specify)

Full Name of Payee
MENTZER MEDIA SERVICES
Mailing Address
210 W. PENNSYLVANIA AVE. SUITE 250
City
TOWSON State
MD Zip Code
21204
Purpose of Expenditure
RADIO PLACEMENT - FILED ON 08/19/2020
Category/Type
Amount
234995.20
Transaction ID : SE24.16380
Date of Disbursement or Obligation
08 / 12 / 2020

Name of Federal Candidate:
OSSOFF, JONATHAN, ,
Support Oppose
Office Sought:
House Senate State: GA
Disbursement For:
Primary General 2020
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures ..... 1562117.92
(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.

CROSBY, CALEB, ,

[Electronically Filed]

Date 09 / 20 / 2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Senate Leadership Fund
FEC IDENTIFICATION NUMBER
C C00571703

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

Full Name of Payee
MENTZER MEDIA SERVICES
Mailing Address
210 W. PENNSYLVANIA AVE. SUITE 250
City
TOWSON State
MD Zip Code
21204
Purpose of Expenditure
TV/MEDIA PLACEMENT - FILED ON 08/19/2020
Category/Type
Date of Public Distribution/Dissemination
08 / 19 / 2020
Amount
1042401.36
Transaction ID : SE24.16432
Date of Disbursement or Obligation
08 / 12 / 2020

Name of Federal Candidate:
BULLOCK, STEVE, ,
Support Oppose
Office Sought:
House Senate
District:
State: MT
Calendar Year-To-Date
Per Election for Office Sought
5179443.22
Disbursement For:
Primary General
Other (specify)

Full Name of Payee
MENTZER MEDIA SERVICES
Mailing Address
210 W. PENNSYLVANIA AVE. SUITE 250
City
TOWSON State
MD Zip Code
21204
Purpose of Expenditure
RADIO PLACEMENT - FILED ON 08/19/2020
Category/Type
Date of Public Distribution/Dissemination
08 / 19 / 2020
Amount
96913.52
Transaction ID : SE24.16433
Date of Disbursement or Obligation
08 / 12 / 2020

Name of Federal Candidate:
BULLOCK, STEVE, ,
Support Oppose
Office Sought:
House Senate
District:
State: MT
Calendar Year-To-Date
Per Election for Office Sought
5179443.22
Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures
1139314.88
(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.

CROSBY, CALEB, ,

[Electronically Filed]

Date

09 / 20 / 2020

Signature

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

NAME OF COMMITTEE (In Full) <b>Senate Leadership Fund</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">C</span> C00571703                 </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 <b>MENTZER MEDIA SERVICES</b>	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">M M</span> / <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">D D</span> / <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">Y Y Y Y Y Y</span>                      08 / 19 / 2020                 </div>
Mailing Address 210 W. PENNSYLVANIA AVE. SUITE 250	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">                     649787.60                 </div>
City State Zip Code TOWSON MD 21204	<b>Transaction ID : SE24.16434</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">M M</span> / <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">D D</span> / <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">Y Y Y Y Y Y</span>                      08 / 18 / 2020                 </div>
Purpose of Expenditure TV/MEDIA PLACEMENT - FILED ON 08/19/2020	Category/Type <span style="border: 1px solid black; display: inline-block; width: 40px; height: 15px;"></span>
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose BULLOCK, STEVE, , ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input type="checkbox"/> State: <u>MT</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; text-align: right;">5179443.22</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item <b>MENTZER MEDIA SERVICES</b>	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">M M</span> / <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">D D</span> / <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">Y Y Y Y Y Y</span>                      08 / 26 / 2020                 </div>
Mailing Address 210 W. PENNSYLVANIA AVE. SUITE 250	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">                     1779412.80                 </div>
City State Zip Code TOWSON MD 21204	<b>Transaction ID : SE24.16439</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">M M</span> / <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">D D</span> / <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">Y Y Y Y Y Y</span>                      08 / 20 / 2020                 </div>
Purpose of Expenditure TV/MEDIA PLACEMENT - FILED ON 08/26/2020	Category/Type <span style="border: 1px solid black; display: inline-block; width: 40px; height: 15px;"></span>
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose BULLOCK, STEVE, , ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input type="checkbox"/> State: <u>MT</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; text-align: right;">5179443.22</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">                 2429200.40             </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">                 _____             </div>
<b>(c) TOTAL</b> 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.

CROSBY, CALEB, , ,

*[Electronically Filed]*

Date M M / D D / Y Y Y Y Y Y  
 09 / 20 / 2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Senate Leadership Fund
FEC IDENTIFICATION NUMBER
C C00571703

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

Full Name of Payee MENTZER MEDIA SERVICES
Mailing Address 210 W. PENNSYLVANIA AVE. SUITE 250
City TOWSON State MD Zip Code 21204
Purpose of Expenditure RADIO PLACEMENT - FILED ON 08/26/2020
Name of Federal Candidate: BULLOCK, STEVE, , ,
Calendar Year-To-Date Per Election for Office Sought 5179443.22
Disbursement For: General 2020

Full Name of Payee MENTZER MEDIA SERVICES
Mailing Address 210 W. PENNSYLVANIA AVE. SUITE 250
City TOWSON State MD Zip Code 21204
Purpose of Expenditure TV/MEDIA PLACEMENT - FILED ON 08/26/2020
Name of Federal Candidate: OSSOFF, JONATHAN, , ,
Calendar Year-To-Date Per Election for Office Sought 5717423.51
Disbursement For: General 2020

(a) SUBTOTAL of Itemized Independent Expenditures 1413026.56
(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.

CROSBY, CALEB, , ,

[Electronically Filed]

Date 09 / 20 / 2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Senate Leadership Fund
FEC IDENTIFICATION NUMBER
C C00571703

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

Full Name of Payee
MENTZER MEDIA SERVICES
Mailing Address
210 W. PENNSYLVANIA AVE. SUITE 250
City
TOWSON State
MD Zip Code
21204
Purpose of Expenditure
RADIO PLACEMENT - FILED ON 08/26/2020
Category/Type
Date of Public Distribution/Dissemination
08 / 26 / 2020
Amount
233653.20
Transaction ID : SE24.16386
Date of Disbursement or Obligation
08 / 20 / 2020

Name of Federal Candidate:
OSSOFF, JONATHAN, ,
Support Oppose
Office Sought:
House Senate
District:
State: GA
Calendar Year-To-Date
Per Election for Office Sought
5717423.51
Disbursement For:
Primary General
Other (specify)

Full Name of Payee
RICHARD SALES MEDIA
Mailing Address
6902 N HIGHLANDS DR.
City
PARADISE VALLEY State
AZ Zip Code
85253
Purpose of Expenditure
WEB AD - FILED ON 08/12/2020
Category/Type
Date of Public Distribution/Dissemination
08 / 12 / 2020
Amount
3000.00
Transaction ID : SE24.16397
Date of Disbursement or Obligation
08 / 12 / 2020

Name of Federal Candidate:
GREENFIELD, THERESA, ,
Support Oppose
Office Sought:
House Senate
District:
State: IA
Calendar Year-To-Date
Per Election for Office Sought
3357534.51
Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures
236653.20
(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.

CROSBY, CALEB, ,

[Electronically Filed]

Date
09 / 20 / 2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Senate Leadership Fund
FEC IDENTIFICATION NUMBER
C C00571703

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

Full Name of Payee
RICHARD SALES MEDIA
Mailing Address
6902 N HIGHLANDS DR.
City
PARADISE VALLEY
State
AZ
Zip Code
85253
Purpose of Expenditure
WEB AD - FILED ON 08/12/2020
Category/Type
Date of Public Distribution/Dissemination
08 / 12 / 2020
Amount
3000.00
Transaction ID : SE24.16378
Date of Disbursement or Obligation
08 / 12 / 2020

Name of Federal Candidate:
OSSOFF, JONATHAN, ,
Support
Oppose
Office Sought:
House
Senate
District:
State: GA
Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
RICHARD SALES MEDIA
Mailing Address
6902 N HIGHLANDS DR.
City
PARADISE VALLEY
State
AZ
Zip Code
85253
Purpose of Expenditure
WEB AD - FILED ON 08/12/2020
Category/Type
Date of Public Distribution/Dissemination
08 / 12 / 2020
Amount
3000.00
Transaction ID : SE24.16431
Date of Disbursement or Obligation
08 / 12 / 2020

Name of Federal Candidate:
BULLOCK, STEVE, ,
Support
Oppose
Office Sought:
House
Senate
District:
State: MT
Disbursement For:
Primary
General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures ..... 6000.00
(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.

CROSBY, CALEB, ,
[Electronically Filed]
Date
09 / 20 / 2020
Signature



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Senate Leadership Fund
FEC IDENTIFICATION NUMBER
C C00571703

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

Full Name of Payee
RICHARD SALES MEDIA
Mailing Address
6902 N HIGHLANDS DR.
City
PARADISE VALLEY
State
AZ
Zip Code
85253
Purpose of Expenditure
WEB AD - FILED ON 08/12/2020
Category/Type
Amount
3000.00
Transaction ID : SE24.16450
Date of Disbursement or Obligation
08 / 12 / 2020

Name of Federal Candidate:
CUNNINGHAM, CAL, ,
Support Oppose
Office Sought:
House Senate
District:
State: NC
Calendar Year-To-Date
Per Election for Office Sought
1992832.95
Disbursement For:
Primary General
Other (specify)

Full Name of Payee
RICHARD SALES MEDIA
Mailing Address
6902 N HIGHLANDS DR.
City
PARADISE VALLEY
State
AZ
Zip Code
85253
Purpose of Expenditure
WEB AD - FILED ON 08/19/2020
Category/Type
Amount
3000.00
Transaction ID : SE24.16456
Date of Disbursement or Obligation
08 / 19 / 2020

Name of Federal Candidate:
CUNNINGHAM, CAL, ,
Support Oppose
Office Sought:
House Senate
District:
State: NC
Calendar Year-To-Date
Per Election for Office Sought
1992832.95
Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures ..... 6000.00
(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.

CROSBY, CALEB, ,

[Electronically Filed]

Date 09 / 20 / 2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Senate Leadership Fund
FEC IDENTIFICATION NUMBER
C C00571703

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

Full Name of Payee RICHARD SALES MEDIA
Mailing Address 6902 N HIGHLANDS DR.
City PARADISE VALLEY State AZ Zip Code 85253
Purpose of Expenditure WEB AD - FILED ON 08/19/2020
Name of Federal Candidate: BULLOCK, STEVE, ,
Calendar Year-To-Date Per Election for Office Sought 5179443.22
Disbursement For: General 2020

Full Name of Payee RICHARD SALES MEDIA
Mailing Address 6902 N HIGHLANDS DR.
City PARADISE VALLEY State AZ Zip Code 85253
Purpose of Expenditure WEB AD - FILED ON 08/19/2020
Name of Federal Candidate: GIDEON, SARA, ,
Calendar Year-To-Date Per Election for Office Sought 1582352.99
Disbursement For: General 2020

(a) SUBTOTAL of Itemized Independent Expenditures 6000.00
(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.

CROSBY, CALEB, ,

[Electronically Filed]

Date 09 / 20 / 2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Senate Leadership Fund
FEC IDENTIFICATION NUMBER
C C00571703

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

Full Name of Payee
RICHARD SALES MEDIA
Mailing Address
6902 N HIGHLANDS DR.
City
PARADISE VALLEY
State
AZ
Zip Code
85253
Purpose of Expenditure
WEB AD - FILED ON 08/19/2020
Category/Type
Amount
3000.00
Transaction ID : SE24.16384
Date of Disbursement or Obligation
08 / 19 / 2020

Name of Federal Candidate:
OSSOFF, JONATHAN, ,
Support
Oppose
Office Sought:
House
Senate
District:
State: GA
Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
RICHARD SALES MEDIA
Mailing Address
6902 N HIGHLANDS DR.
City
PARADISE VALLEY
State
AZ
Zip Code
85253
Purpose of Expenditure
WEB AD - FILED ON 08/19/2020
Category/Type
Amount
3000.00
Transaction ID : SE24.16403
Date of Disbursement or Obligation
08 / 19 / 2020

Name of Federal Candidate:
GREENFIELD, THERESA, ,
Support
Oppose
Office Sought:
House
Senate
District:
State: IA
Disbursement For:
Primary
General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures ..... 6000.00
(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.

CROSBY, CALEB, ,
Signature

[Electronically Filed]

Date
09 / 20 / 2020

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Senate Leadership Fund
FEC IDENTIFICATION NUMBER
C C00571703

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

Full Name of Payee
RICHARD SALES MEDIA
Mailing Address
6902 N HIGHLANDS DR.
City
PARADISE VALLEY
State
AZ
Zip Code
85253
Purpose of Expenditure
WEB AD - FILED ON 08/26/2020
Category/Type
Date of Public Distribution/Dissemination
08 / 26 / 2020
Amount
3000.00
Transaction ID : SE24.16390
Date of Disbursement or Obligation
08 / 26 / 2020

Name of Federal Candidate:
OSSOFF, JONATHAN, ,
Support
Oppose
Office Sought:
House
Senate
District:
State: GA
Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
RICHARD SALES MEDIA
Mailing Address
6902 N HIGHLANDS DR.
City
PARADISE VALLEY
State
AZ
Zip Code
85253
Purpose of Expenditure
WEB AD - FILED ON 08/26/2020
Category/Type
Date of Public Distribution/Dissemination
08 / 26 / 2020
Amount
3000.00
Transaction ID : SE24.16424
Date of Disbursement or Obligation
08 / 26 / 2020

Name of Federal Candidate:
GIDEON, SARA, ,
Support
Oppose
Office Sought:
House
Senate
District:
State: ME
Disbursement For:
Primary
General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures ..... 6000.00
(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.

CROSBY, CALEB, ,
Signature

[Electronically Filed]

Date
09 / 20 / 2020

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Senate Leadership Fund
FEC IDENTIFICATION NUMBER
C C00571703

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

Full Name of Payee
RICHARD SALES MEDIA
Mailing Address
6902 N HIGHLANDS DR.
City
PARADISE VALLEY
State
AZ
Zip Code
85253
Purpose of Expenditure
WEB AD - FILED ON 08/26/2020
Category/Type
Date of Public Distribution/Dissemination
08 / 26 / 2020
Amount
3000.00
Transaction ID : SE24.16409
Date of Disbursement or Obligation
08 / 26 / 2020

Name of Federal Candidate:
GREENFIELD, THERESA, ,
Support
Oppose
Office Sought:
House
Senate
District:
State: IA
Calendar Year-To-Date
Per Election for Office Sought
3357534.51
Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
RICHARD SALES MEDIA
Mailing Address
6902 N HIGHLANDS DR.
City
PARADISE VALLEY
State
AZ
Zip Code
85253
Purpose of Expenditure
WEB AD - FILED ON 08/26/2020
Category/Type
Date of Public Distribution/Dissemination
08 / 26 / 2020
Amount
3000.00
Transaction ID : SE24.16444
Date of Disbursement or Obligation
08 / 26 / 2020

Name of Federal Candidate:
BULLOCK, STEVE, ,
Support
Oppose
Office Sought:
House
Senate
District:
State: MT
Calendar Year-To-Date
Per Election for Office Sought
5179443.22
Disbursement For:
Primary
General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures ..... 6000.00
(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.

CROSBY, CALEB, ,

[Electronically Filed]

Date 09 / 20 / 2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Senate Leadership Fund
FEC IDENTIFICATION NUMBER
C C00571703

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

Full Name of Payee: RICHARD SALES MEDIA
Mailing Address: 6902 N HIGHLANDS DR.
City: PARADISE VALLEY, State: AZ, Zip Code: 85253
Purpose of Expenditure: WEB AD - FILED ON 08/26/2020
Category/Type:
Name of Federal Candidate: CUNNINGHAM, CAL, , ,
Support: [ ], Oppose: [x]
Office Sought: [ ] President, [x] Senate, State: NC
Disbursement For: [ ] Primary, [x] General 2020
Amount: 3000.00
Transaction ID: SE24.16462
Date of Disbursement or Obligation: 08/26/2020
Calendar Year-To-Date Per Election for Office Sought: 1992832.95

Full Name of Payee: TARGETED VICTORY LLC
Mailing Address: 2311 WILSON BLVD, SUITE 200
City: ARLINGTON, State: VA, Zip Code: 22201
Purpose of Expenditure: ONLINE ADVERTISING - FILED ON 08/05/2020
Category/Type:
Name of Federal Candidate: COLLINS, SUSAN, , ,
Support: [x], Oppose: [ ]
Office Sought: [ ] President, [x] Senate, State: ME
Disbursement For: [ ] Primary, [x] General 2020
Amount: 4416.32
Transaction ID: SE24.16412
Date of Disbursement or Obligation: 08/05/2020
Calendar Year-To-Date Per Election for Office Sought: 1582352.99

(a) SUBTOTAL of Itemized Independent Expenditures ..... 7416.32
(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.

CROSBY, CALEB, , , [Electronically Filed] Date 09/20/2020
Signature

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

NAME OF COMMITTEE (In Full) <b>Senate Leadership Fund</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">C</span> C00571703                 </div>
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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 <b>TARGETED VICTORY LLC</b>		Date of Public Distribution/Dissemination <span style="font-size: 24px; font-weight: bold;">08 / 05 / 2020</span>	
Mailing Address <b>2311 WILSON BLVD, SUITE 200</b>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">4416.33</div>	
City <b>ARLINGTON</b>	State <b>VA</b>	Zip Code <b>22201</b>	<b>Transaction ID : SE24.16425</b> Date of Disbursement or Obligation <span style="font-size: 24px; font-weight: bold;">08 / 05 / 2020</span>
Purpose of Expenditure <b>ONLINE ADVERTISING - FILED ON 08/05/2020</b>		Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	
Name of Federal Candidate: <b>DAINES, STEVE, , ,</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>MT</b>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; text-align: right;">5179443.22</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item <b>TARGETED VICTORY LLC</b>		Date of Public Distribution/Dissemination <span style="font-size: 24px; font-weight: bold;">08 / 05 / 2020</span>	
Mailing Address <b>2311 WILSON BLVD, SUITE 200</b>		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">4416.33</div>	
City <b>ARLINGTON</b>	State <b>VA</b>	Zip Code <b>22201</b>	<b>Transaction ID : SE24.16391</b> Date of Disbursement or Obligation <span style="font-size: 24px; font-weight: bold;">08 / 05 / 2020</span>
Purpose of Expenditure <b>ONLINE ADVERTISING - FILED ON 08/05/2020</b>		Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	
Name of Federal Candidate: <b>ERNST, JONI, , ,</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>IA</b>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; text-align: right;">3357534.51</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">8832.66</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
<b>(c) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">17833418.52</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.

CROSBY, CALEB, , ,

*[Electronically Filed]*

Date 09 / 20 / 2020

Signature