

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

STELLA2020

ADDRESS (number and street)

3109 WEST 50TH STREET

#126

Check if different than previously reported. (ACC)

MINNEAPOLIS

MN

55410

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00709493

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

STATE ▼ DISTRICT

MN

05

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)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the State of

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y 2020

through

M M /

D D /

Y Y Y Y 2020

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

Curtis, Elizabeth, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Curtis, Elizabeth, , ,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y 2020

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

Office Use Only

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
STELLA2020

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	16804.74	136380.78
(b) Total Contribution Refunds (from Line 20(d))	25.00	3546.11
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	16779.74	132834.67
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	20746.51	130174.57
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	20746.51	130174.57
8. Cash on Hand at Close of Reporting Period (from Line 27).....	2660.10	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

STELLA2020

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	3486.97	37126.48
(ii) Unitemized	13317.77	99254.30
(iii) TOTAL of contributions from individuals	16804.74	136380.78
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	16804.74	136380.78
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		
	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	16804.74	136380.78

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 22

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	20746.51	130174.57
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	25.00	3546.11
(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 20(a), (b), and (c)).....	25.00	3546.11
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	20771.51	133720.68

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	6626.87
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	16804.74
25. SUBTOTAL (add Line 23 and Line 24).....	23431.61
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	20771.51
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	2660.10

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

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

FOR LINE NUMBER: PAGE 5 OF 22
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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)
STELLA2020

A. Full Name (Last, First, Middle Initial)
Elliott, David, , ,
 Mailing Address 6621 Talmadge Ln.
 City Dallas State TX Zip Code 75230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer retired Occupation retired
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 3800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 01 / 2020
Transaction ID : SA11AI.10142
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
Elliott, David, , ,
 Mailing Address 6621 Talmadge Ln.
 City Dallas State TX Zip Code 75230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer retired Occupation retired
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 4800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 11 / 2020
Transaction ID : SA11AI.10143
 Amount of Each Receipt this Period
 1000.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
Fiddymment, Karyl Lynn, , ,
 Mailing Address 6419 Rio De Onar Way
 City Elk Grove State CA Zip Code 95757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer retired Occupation retired
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 17 / 2020
Transaction ID : SA11AI.10348
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 2050.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 6 OF 22
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
STELLA2020

A. Full Name (Last, First, Middle Initial)
Fiddymment, Karyl Lynn, , ,
Mailing Address 6419 Rio De Onar Way
City Elk Grove State CA Zip Code 95757
FEC ID number of contributing federal political committee. C
Name of Employer retired Occupation retired
Receipt For: 2020
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 24 / 2020
Transaction ID : SA11AI.10349
Amount of Each Receipt this Period
50.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
Fiddymment, Karyl Lynn, , ,
Mailing Address 6419 Rio De Onar Way
City Elk Grove State CA Zip Code 95757
FEC ID number of contributing federal political committee. C
Name of Employer retired Occupation retired
Receipt For: 2020
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼ 325.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 28 / 2020
Transaction ID : SA11AI.10350
Amount of Each Receipt this Period
25.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
Fiddymment, Karyl Lynn, , ,
Mailing Address 6419 Rio De Onar Way
City Elk Grove State CA Zip Code 95757
FEC ID number of contributing federal political committee. C
Name of Employer retired Occupation retired
Receipt For: 2020
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 28 / 2020
Transaction ID : SA11AI.10351
Amount of Each Receipt this Period
25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 7 OF 22
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
STELLA2020

A. Full Name (Last, First, Middle Initial)
Fiddymment, Karyl Lynn, , ,

Mailing Address 6419 Rio De Onar Way

City Elk Grove State CA Zip Code 95757

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

Name of Employer retired Occupation retired

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
375.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 28 2020

Transaction ID : SA11AI.10352

Amount of Each Receipt this Period
25.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Harding, MariaElena, , ,

Mailing Address 4251 Southwest 11th Street

City Miami State FL Zip Code 33134

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

Name of Employer retired Occupation retired

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 17 2020

Transaction ID : SA11AI.9913

Amount of Each Receipt this Period
25.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Harding, MariaElena, , ,

Mailing Address 4251 Southwest 11th Street

City Miami State FL Zip Code 33134

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

Name of Employer retired Occupation retired

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 17 2020

Transaction ID : SA11AI.9914

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 8 OF 22	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STELLA2020

A. Full Name (Last, First, Middle Initial)
Harding, MariaElena, , ,

Mailing Address 4251 Southwest 11th Street

City Miami	State FL	Zip Code 33134
---------------	-------------	-------------------

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

Name of Employer retired	Occupation retired
-----------------------------	-----------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 , , 275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 17 / 2020

Transaction ID : SA11AI.9915

Amount of Each Receipt this Period
 , , 25.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Heald, Jack, , ,

Mailing Address 6242 N. Via Paloma Rosa

City Tucson	State AZ	Zip Code 85718
----------------	-------------	-------------------

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

Name of Employer Jack Heald	Occupation consultant
--------------------------------	--------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 , , 275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 06 / 2020

Transaction ID : SA11AI.10247

Amount of Each Receipt this Period
 , , 25.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Miller, Alan, , ,

Mailing Address 160 Cardinal Sq

City Honesdale	State PA	Zip Code 18431
-------------------	-------------	-------------------

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

Name of Employer Premier Select Sires	Occupation Area Sales Manager
--	----------------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 , , 236.43

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 02 / 2020

Transaction ID : SA11AI.9685

Amount of Each Receipt this Period
 , , 26.27

Memo Item

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

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

, , 76.27

, ,

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 22
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
STELLA2020

A. Full Name (Last, First, Middle Initial)
Miller, Alan, , ,
 Mailing Address 160 Cardinal Sq
 City Honesdale State PA Zip Code 18431
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Premier Select Sires Occupation Area Sales Manager
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 262.70

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 02 / 2020
Transaction ID : SA11AI.9681
 Amount of Each Receipt this Period
 26.27
 Memo Item

B. Full Name (Last, First, Middle Initial)
Miller, Alan, , ,
 Mailing Address 160 Cardinal Sq
 City Honesdale State PA Zip Code 18431
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Premier Select Sires Occupation Area Sales Manager
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 288.97

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 02 / 2020
Transaction ID : SA11AI.9678
 Amount of Each Receipt this Period
 26.27
 Memo Item

C. Full Name (Last, First, Middle Initial)
Oden, Rick, , ,
 Mailing Address 5549 Posda Dr
 City Crowley State TX Zip Code 76036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 210.80

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 24 / 2020
Transaction ID : SA11AI.9683
 Amount of Each Receipt this Period
 21.08
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 73.62
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 22
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
STELLA2020

A. Full Name (Last, First, Middle Initial)
Oden, Rick, , ,

Mailing Address 5549 Posda Dr

City Crowley State TX Zip Code 76036

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

Name of Employer Retired Occupation Retired

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 231.88

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 24 / 2020

Transaction ID : SA11AI.9679

Amount of Each Receipt this Period
 _____ 21.08

Memo Item

B. Full Name (Last, First, Middle Initial)
Oden, Rick, , ,

Mailing Address 5549 Posda Dr

City Crowley State TX Zip Code 76036

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

Name of Employer Retired Occupation Retired

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 252.96

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 24 / 2020

Transaction ID : SA11AI.9676

Amount of Each Receipt this Period
 _____ 21.08

Memo Item

C. Full Name (Last, First, Middle Initial)
Owen, Jodi, , ,

Mailing Address 629 S Lincoln Ave

City Sioux Falls State SD Zip Code 57104

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

Name of Employer Self Occupation Psychologist

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 220.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2020

Transaction ID : SA11AI.9684

Amount of Each Receipt this Period
 _____ 20.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ _____ 62.16

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 22
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
STELLA2020

A. Full Name (Last, First, Middle Initial)
Owen, Jodi, , ,

Mailing Address 629 S Lincoln Ave

City: Sioux Falls State: SD Zip Code: 57104

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

Name of Employer: Self Occupation: Psychologist

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
240.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 22 / 2020

Transaction ID : SA11AI.9680

Amount of Each Receipt this Period
20.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Owen, Jodi, , ,

Mailing Address 629 S Lincoln Ave

City: Sioux Falls State: SD Zip Code: 57104

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

Name of Employer: Self Occupation: Psychologist

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
260.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 22 / 2020

Transaction ID : SA11AI.9677

Amount of Each Receipt this Period
20.00

Memo Item

C. Full Name (Last, First, Middle Initial)
SHERMAN, JOEL, , ,

Mailing Address 25 Chapel Place, 2H

City: Great Neck State: NY Zip Code: 11021

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

Name of Employer: retired Occupation: retired

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 01 / 2020

Transaction ID : SA11AI.9729

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 140.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 22
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
STELLA2020

A. Full Name (Last, First, Middle Initial)
SHERMAN, JOEL, , ,

Mailing Address 25 Chapel Place, 2H

City: Great Neck State: NY Zip Code: 11021

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

Name of Employer: retired Occupation: retired

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 01 / 2020

Transaction ID : SA11AI.9730

Amount of Each Receipt this Period
50.00

Memo Item

B. Full Name (Last, First, Middle Initial)
SHERMAN, JOEL, , ,

Mailing Address 25 Chapel Place, 2H

City: Great Neck State: NY Zip Code: 11021

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

Name of Employer: retired Occupation: retired

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
550.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 01 / 2020

Transaction ID : SA11AI.9731

Amount of Each Receipt this Period
50.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Smith, Gary, , ,

Mailing Address 910 Pinewood Ln

City: Seabrook State: TX Zip Code: 77586

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

Name of Employer: Retired Occupation: Retired

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 17 / 2020

Transaction ID : SA11AI.10176

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 22
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
STELLA2020

A. Full Name (Last, First, Middle Initial)
Smith, Gary, , ,
 Mailing Address 910 Pinewood Ln
 City Seabrook State TX Zip Code 77586
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 21 / 2020
Transaction ID : SA11AI.10177
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
Smith, Gary, , ,
 Mailing Address 910 Pinewood Ln
 City Seabrook State TX Zip Code 77586
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 05 / 2020
Transaction ID : SA11AI.10178
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
Tompkins, Roger, , ,
 Mailing Address 8145 Middle Fork Way
 City Jacksonville State FL Zip Code 32256
 FEC ID number of contributing federal political committee. **C**
 Name of Employer unemployed Occupation unemployed
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 259.92

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 28 / 2020
Transaction ID : SA11AI.9576
 Amount of Each Receipt this Period
 259.92
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 359.92
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 14 OF 22
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
STELLA2020

A. Full Name (Last, First, Middle Initial)
Wallis, Lynn, , ,

Mailing Address 106 E. Washington

City: Cuba State: MO Zip Code: 65453

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

Name of Employer: Wallis Oil Occupation: Executive

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 12 / 2020

Transaction ID : SA11AI.10097

Amount of Each Receipt this Period
 _____ 100.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Wallis, Lynn, , ,

Mailing Address 106 E. Washington

City: Cuba State: MO Zip Code: 65453

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

Name of Employer: Wallis Oil Occupation: Executive

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 06 / 2020

Transaction ID : SA11AI.10098

Amount of Each Receipt this Period
 _____ 100.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Witkin, Jack, , ,

Mailing Address 1535 High St

City: Boulder State: CO Zip Code: 80304

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

Name of Employer: Retired Occupation: Retired

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 16 / 2020

Transaction ID : SA11AI.10205

Amount of Each Receipt this Period
 _____ 100.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ _____ 300.00

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

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

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

FOR LINE NUMBER: PAGE 15 OF 22
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
STELLA2020

A. Full Name (Last, First, Middle Initial)
Witkin, Jack, , ,

Mailing Address 1535 High St

City Boulder State CO Zip Code 80304

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

Name of Employer Retired Occupation Retired

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1150.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 30 / 2020

Transaction ID : SA11AI.10206

Amount of Each Receipt this Period
50.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Witkin, Jack, , ,

Mailing Address 1535 High St

City Boulder State CO Zip Code 80304

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

Name of Employer Retired Occupation Retired

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 03 / 2020

Transaction ID : SA11AI.10207

Amount of Each Receipt this Period
50.00

Memo Item

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	3486.97

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 22			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
STELLA2020

Full Name (Last, First, Middle Initial) A. Capital Square Funding Group		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2020
Mailing Address PO Box 10853		FEC Identification Number C
City Raleigh	State NC	Zip Code 27605
Purpose of Disbursement Fundraising Commission		Amount of Each Disbursement this Period 750.80
Candidate Name		Transaction ID : SB17.10417
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Capital Square Funding Group		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2020
Mailing Address PO Box 10853		FEC Identification Number C
City Raleigh	State NC	Zip Code 27605
Purpose of Disbursement Email Distribution Fees		Amount of Each Disbursement this Period 1796.91
Candidate Name		Transaction ID : SB17.10418
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) c. Capital Square Funding Group		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2020
Mailing Address PO Box 10853		FEC Identification Number C
City Raleigh	State NC	Zip Code 27605
Purpose of Disbursement Email Distribution Fees		Amount of Each Disbursement this Period 1503.79
Candidate Name		Transaction ID : SB17.10420
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....▶	4051.50
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 22			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
STELLA2020

Full Name (Last, First, Middle Initial) A. Capital Square Funding Group			Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2020		
Mailing Address PO Box 10853			FEC Identification Number C		
City Raleigh	State NC	Zip Code 27605	Amount of Each Disbursement this Period 598.20		
Purpose of Disbursement Fundraising Commission		Category/ Type	Transaction ID : SB17.10423		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Capital Square Funding Group			Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2020		
Mailing Address PO Box 10853			FEC Identification Number C		
City Raleigh	State NC	Zip Code 27605	Amount of Each Disbursement this Period 1298.64		
Purpose of Disbursement Email Distribution Fees		Category/ Type	Transaction ID : SB17.10424		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. Conservative Compliance Consulting			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2020		
Mailing Address 5 Halifax Court			FEC Identification Number C		
City Marlton	State NJ	Zip Code 08053	Amount of Each Disbursement this Period 500.00		
Purpose of Disbursement Compliance Services		Category/ Type	Transaction ID : SB17.9534		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	2396.84
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 22			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
STELLA2020

A. Conservative Compliance Consulting

Full Name (Last, First, Middle Initial)

Mailing Address 5 Halifax Court

City Marlton State NJ Zip Code 08053

Purpose of Disbursement Compliance Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 01 / 2020

FEC Identification Number: C

Amount of Each Disbursement this Period: 500.00

Transaction ID : SB17.9537

Memo Item

B. Conservative Compliance Consulting

Full Name (Last, First, Middle Initial)

Mailing Address 5 Halifax Court

City Marlton State NJ Zip Code 08053

Purpose of Disbursement Compliance Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 29 / 2020

FEC Identification Number: C

Amount of Each Disbursement this Period: 500.00

Transaction ID : SB17.9543

Memo Item

c. Rightside Lists

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 10853

City Ralieggh State NC Zip Code 27605

Purpose of Disbursement Online Fundraising Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 01 / 2020

FEC Identification Number: C

Amount of Each Disbursement this Period: 2229.80

Transaction ID : SB17.10416

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 3229.80

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 22			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
STELLA2020

A. Rightside Lists

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 10853

City Raleigh State NC Zip Code 27605

Purpose of Disbursement Online Fundraising Fees

Candidate Name

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

State: District:

Date of Disbursement: 05 / 01 / 2020

FEC Identification Number: C

Amount of Each Disbursement this Period: 4486.80

Transaction ID : SB17.10419

Memo Item

B. Rightside Lists

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 10853

City Raleigh State NC Zip Code 27605

Purpose of Disbursement Online Fundraising Fees

Candidate Name

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

State: District:

Date of Disbursement: 06 / 01 / 2020

FEC Identification Number: C

Amount of Each Disbursement this Period: 2329.20

Transaction ID : SB17.10422

Memo Item

c. Southern Jack Strategies

Full Name (Last, First, Middle Initial)
Mailing Address 11 Balmoral Dr

City Niceville State FL Zip Code 32578

Purpose of Disbursement Campaign Management Services

Candidate Name

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

State: District:

Date of Disbursement: 05 / 26 / 2020

FEC Identification Number: C

Amount of Each Disbursement this Period: 4000.00

Transaction ID : SB17.9542

Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 10816.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 22			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
STELLA2020

Full Name (Last, First, Middle Initial) A. Stripe		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2020
Mailing Address 510 Townsend St		FEC Identification Number C
City San Francisco	State CA	Zip Code 94103
Purpose of Disbursement Chargeback Fee		Amount of Each Disbursement this Period 15.00
Candidate Name		Transaction ID : SB17.10415
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Stripe		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2020
Mailing Address 510 Townsend St		FEC Identification Number C
City San Francisco	State CA	Zip Code 94103
Purpose of Disbursement Payment Processing Fees		Amount of Each Disbursement this Period 107.41
Candidate Name		Transaction ID : SB17.9686
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) c. Wells Fargo		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2020
Mailing Address 501 W Rt. 70		FEC Identification Number C
City Marlton	State NJ	Zip Code 08053
Purpose of Disbursement Bank Fees		Amount of Each Disbursement this Period 16.00
Candidate Name		Transaction ID : SB17.9536
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	138.41
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 21 OF 22	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STELLA2020

Full Name (Last, First, Middle Initial) A. Wells Fargo		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2020
Mailing Address 501 W Rt. 70		FEC Identification Number C
City Marlton	State NJ	Zip Code 08053
Purpose of Disbursement Bank Fees		Amount of Each Disbursement this Period 15.00
Candidate Name	Category/ Type	Transaction ID : SB17.9539
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Wells Fargo		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2020
Mailing Address 501 W Rt. 70		FEC Identification Number C
City Marlton	State NJ	Zip Code 08053
Purpose of Disbursement Bank Fees		Amount of Each Disbursement this Period 13.00
Candidate Name	Category/ Type	Transaction ID : SB17.9540
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) c. Wells Fargo		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2020
Mailing Address 501 W Rt. 70		FEC Identification Number C
City Marlton	State NJ	Zip Code 08053
Purpose of Disbursement Bank Fees		Amount of Each Disbursement this Period 30.00
Candidate Name	Category/ Type	Transaction ID : SB17.9541
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	58.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 22	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STELLA2020

Full Name (Last, First, Middle Initial) A. Wells Fargo			Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2020	
Mailing Address 501 W Rt. 70			FEC Identification Number C	
City Marlton	State NJ	Zip Code 08053	Amount of Each Disbursement this Period 13.00	
Purpose of Disbursement Bank Fees		Category/ Type	Transaction ID : SB17.9545	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

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

SUBTOTAL of Disbursements This Page (optional).....▶	13.00
TOTAL This Period (last page this line number only).....▶	20703.55