

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

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

12FE4M5

AMERICA FIRST ACTION, INC.

ADDRESS (number and street)

1400 Crystal Drive

Suite 850

Check if different
than previously
reported. (ACC)

Arlington

VA

22202

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00637512

3. IS THIS
REPORTNEW
(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

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of(d) 30-Day
POST-Election
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

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

PROCH, JON, , ,

Type or Print Name of Treasurer

Signature of Treasurer

PROCH, JON, , ,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

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

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

AMERICA FIRST ACTION, INC.

Report Covering the Period:

From:

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

To:

 M M / D D / Y Y Y Y Y
 03 / 31 / 2020

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2020		18154316.68
(b) Cash on Hand at Beginning of Reporting Period.....	18154316.68	
(c) Total Receipts (from Line 19)	9439726.56	9439726.56
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	27594043.24	27594043.24
7. Total Disbursements (from Line 31).....	2182135.01	2182135.01
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	25411908.23	25411908.23
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)	705833.73	



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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

AMERICA FIRST ACTION, INC.

Report Covering the Period:

From:

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

To:

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

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).....	9043871.62	9043871.62
(ii) Unitemized	335561.95	335561.95
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	9379433.57	9379433.57
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	25000.00	25000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	9404433.57	9404433.57
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).....	1641.27	1641.27
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	33651.72	33651.72
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))	9439726.56	9439726.56
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	9439726.56	9439726.56

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

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	2181972.76	2181972.76
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	2181972.76	2181972.76
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	162.25	162.25
(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)).....	162.25	162.25
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)) ..	2182135.01	2182135.01
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2182135.01	2182135.01

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	9404433.57	9404433.57
34. Total Contribution Refunds (from Line 28(d))	162.25	162.25
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	9404271.32	9404271.32
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	2181972.76	2181972.76
37. Offsets to Operating Expenditures (from Line 15, page 3).....	1641.27	1641.27
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	2180331.49	2180331.49

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

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

FOR LINE NUMBER: PAGE 6 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. ABRAMS, JERRY, , ,

Mailing Address 15 ARTEMIS BLVD

City
MERRITT ISLAND

State
FL

Zip Code
32953

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 22 / 2020

Transaction ID : SA11AI.77066

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. ALLDRIN, KENFIELD, , ,

Mailing Address 16913 SCHELL RD

City
OAKDALE

State
CA

Zip Code
95361

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MONTPELIER NUT

Occupation (for Individual)
FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 28 / 2020

Transaction ID : SA11AI.77248

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. ALLEN, BLAIR, , ,

Mailing Address 2601 COLLEGE PKWY

City
CARSON CITY

State
NV

Zip Code
89706

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COMSTOCK VILLAGE

Occupation (for Individual)
OWNER

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
01 / 28 / 2020

Transaction ID : SA11AI.77278

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

600.00

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

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

FOR LINE NUMBER: PAGE 7 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. ALLEN, BLAIR, , ,

Mailing Address 2601 COLLEGE PKWY

City
CARSON CITYState
NVZip Code
89706FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COMSTOCK VILLAGEOccupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2020

Transaction ID : SA11Al.77279

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. ALLEN, BLAIR, , ,

Mailing Address 2601 COLLEGE PKWY

City
CARSON CITYState
NVZip Code
89706FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COMSTOCK VILLAGEOccupation (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
03 / 28 / 2020

Transaction ID : SA11Al.77280

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. ALLISON, ROBERT, , ,

Mailing Address 1566 US HWY 190 E

City
WOODVILLEState
TXZip Code
75979FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 21 / 2020

Transaction ID : SA11Al.77309

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

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

1000.00

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

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

FOR LINE NUMBER: PAGE 8 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. ALLISON, ROBERT, , ,

Mailing Address 1566 US HWY 190 E

City
WOODVILLEState
TXZip Code
75979FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 03 / 2020

Transaction ID : SA11AI.77308

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. ALPERT, NEIL, , ,

Mailing Address 700 NEW HAMPSHIRE AVE NW

City
WASHINGTONState
DCZip Code
20037FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
POTOMAC MANAGEMENTOccupation (for Individual)
MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
01 / 09 / 2020

Transaction ID : SA11AI.77328

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

C. ALTMAN, ALAN, , ,

Mailing Address 2 GROVE ISLE DR

City
MIAMIState
FLZip Code
33133FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PRIME NURSING CAREOccupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 09 / 2020

Transaction ID : SA11AI.77338

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

1200.00

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

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 OF 290
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. ALTMAN, ALAN, , ,

Mailing Address 2 GROVE ISLE DR

City
MIAMI

State
FL

Zip Code
33133

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PRIME NURSING CARE

Occupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2020

Transaction ID : SA11AI.77336

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

B. ALTMAN, ALAN, , ,

Mailing Address 2 GROVE ISLE DR

City
MIAMI

State
FL

Zip Code
33133

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PRIME NURSING CARE

Occupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2020

Transaction ID : SA11AI.77337

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

C. AMERICA FIRST POLICIES, INC.

Mailing Address 1400 CRYSTAL DRIVE
STE 850

City
ARLINGTON

State
VA

Zip Code
22202

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225037.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2020

Transaction ID : SA11AI.98212

Amount of Each Receipt this Period

225037.00

☐ Memo Item

IN-KIND - PAYROLL / OFFICE EXPENSES

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

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

225187.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. ANDERSON, CAROL, , ,

Mailing Address 1072 CARRINGTON WAY

City
VICTOR

State
NY

Zip Code
14564

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 / D D / Y Y Y Y Y Y
03 / 10 / 2020

Transaction ID : SA11AI.77478

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. ANDERSON, CLAUDIA, , ,

Mailing Address 1625 W LOIS MEADOWS CT

City
RIVERTON

State
UT

Zip Code
84065

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 / D D / Y Y Y Y Y Y
02 / 26 / 2020

Transaction ID : SA11AI.77476

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. ANDERSON, CLAUDIA, , ,

Mailing Address 1625 W LOIS MEADOWS CT

City
RIVERTON

State
UT

Zip Code
84065

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

M M / D D / Y Y Y Y Y Y
03 / 14 / 2020

Transaction ID : SA11AI.77479

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

750.00

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

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

FOR LINE NUMBER: PAGE 11 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. ANDERSON, CLAUDIA, , ,

Mailing Address 1625 W LOIS MEADOWS CT

City
RIVERTONState
UTZip Code
84065FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 29 / 2020

Transaction ID : SA11AI.77480

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. ANDERSON, STEPHEN, , ,

Mailing Address 623 WINCHESTER CT

City
BARTLETTState
ILZip Code
60103FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BR PURCHASING LLCOccupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 18 / 2020

Transaction ID : SA11AI.77468

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. ANSELMO, REVERGE, C, ,

Mailing Address 164 MASON ST

City
GREENWICHState
CTZip Code
06830FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
01 / 27 / 2020

Transaction ID : SA11AI.77530

Amount of Each Receipt this Period

250000.00

☐ Memo Item

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

250350.00

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 12 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. AUL, DAVID, , ,

Mailing Address 1195 E PALATINE

City
ARLINGTON HEIGHTSState
ILZip Code
60004FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 18 / 2020

Transaction ID : SA11AI.77798

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. BAHLER, WALTER, , ,

Mailing Address 5927 S CREEKSIDE CT

City
REMINGTONState
INZip Code
47977FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 18 / 2020

Transaction ID : SA11AI.77860

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. BAIRD, SAUNDRA, , ,

Mailing Address 2035 ROCK RIDGE RD

City
BRANDENBURGState
KYZip Code
40108FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 23 / 2020

Transaction ID : SA11AI.77899

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

235.00

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

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

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

FOR LINE NUMBER: PAGE 13 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. BAIRD, SAUNDRA, , ,

Mailing Address 2035 ROCK RIDGE RD

City
BRANDENBURG

State
KY

Zip Code
40108

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 ▼

236.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 27 / 2020

Transaction ID : SA11AI.77894

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

B. BAIRD, SAUNDRA, , ,

Mailing Address 2035 ROCK RIDGE RD

City
BRANDENBURG

State
KY

Zip Code
40108

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 ▼

237.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 04 / 2020

Transaction ID : SA11AI.77882

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

C. BAIRD, SAUNDRA, , ,

Mailing Address 2035 ROCK RIDGE RD

City
BRANDENBURG

State
KY

Zip Code
40108

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 ▼

272.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 04 / 2020

Transaction ID : SA11AI.77900

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

56.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 290

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. BAIRD, SAUNDRA, , ,

Mailing Address 2035 ROCK RIDGE RD

City
BRANDENBURGState
KYZip Code
40108FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	12	/	2020

Transaction ID : SA11AI.77897

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. BAIRD, SAUNDRA, , ,

Mailing Address 2035 ROCK RIDGE RD

City
BRANDENBURGState
KYZip Code
40108FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	13	/	2020

Transaction ID : SA11AI.77895

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

C. BAIRD, SAUNDRA, , ,

Mailing Address 2035 ROCK RIDGE RD

City
BRANDENBURGState
KYZip Code
40108FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

352.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	23	/	2020

Transaction ID : SA11AI.77901

Amount of Each Receipt this Period

35.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

80.00

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 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. BAIRD, SAUNDRA, , ,

Mailing Address 2035 ROCK RIDGE RD

City
BRANDENBURGState
KYZip Code
40108FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

367.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 26 / 2020

Transaction ID : SA11AI.77891

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

B. BAISE, DORORTHY ANN, G, ,

Mailing Address 2201 GREAT FALLS ST

City
FALLS CHURCHState
VAZip Code
22043-1626FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BAISE FARMSOccupation (for Individual)
TREASURER

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
02 / 24 / 2020

Transaction ID : SA11AI.77903

Amount of Each Receipt this Period

50000.00

☐ Memo Item

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

C. BAISE, GARY, H, ,

Mailing Address 2201 GREAT FALLS ST

City
FALLS CHURCHState
VAZip Code
22043-1626FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
OFW LAWOccupation (for Individual)
PARTNER

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
02 / 24 / 2020

Transaction ID : SA11AI.77905

Amount of Each Receipt this Period

50000.00

☐ Memo Item

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

100015.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 16 OF 290
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. BARCO, SHARON, , ,

Mailing Address 23 GOLFVIEW PL

City
ROTONDA WESTState
FLZip Code
33947FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BARCOS ACCOUNTING & TAXOccupation (for Individual)
ACCOUNTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	30	/	2020

Transaction ID : SA11AI.78033

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

B. BARRETT, ROBERT, , ,

Mailing Address P.O. BOX 82401

City
CONYERSState
GAZip Code
30013FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	27	/	2020

Transaction ID : SA11AI.78140

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. BARRETT, ROBERT, , ,

Mailing Address P.O. BOX 82401

City
CONYERSState
GAZip Code
30013FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

251.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	28	/	2020

Transaction ID : SA11AI.78145

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

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

135.00

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

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

FOR LINE NUMBER: PAGE 17 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. BARRETT, ROBERT, , ,

Mailing Address P.O. BOX 82401

City
CONYERS

State
GA

Zip Code
30013

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 ▼

276.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2020

Transaction ID : SA11AI.78141

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. BASSO, NICHOLAS, P, ,

Mailing Address 68 COACHLIGHT SQ

City
MONTROSE

State
NY

Zip Code
10548

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 ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2020

Transaction ID : SA11AI.78230

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. BASSO, NICHOLAS, P, ,

Mailing Address 68 COACHLIGHT SQ

City
MONTROSE

State
NY

Zip Code
10548

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 ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 25 / 2020

Transaction ID : SA11AI.78220

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

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

40.00

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

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

FOR LINE NUMBER: PAGE 18 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. BASSO, NICHOLAS, P, ,

Mailing Address 68 COACHLIGHT SQ

City
MONTROSE

State
NY

Zip Code
10548

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 ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 28 / 2020

Transaction ID : SA11AI.78231

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. BASSO, NICHOLAS, P, ,

Mailing Address 68 COACHLIGHT SQ

City
MONTROSE

State
NY

Zip Code
10548

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 / D D / Y Y Y Y Y
03 / 28 / 2020

Transaction ID : SA11AI.78239

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. BASSO, NICHOLAS, P, ,

Mailing Address 68 COACHLIGHT SQ

City
MONTROSE

State
NY

Zip Code
10548

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 ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2020

Transaction ID : SA11AI.78236

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

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

50.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. BELCHER, WILLIAM, , ,

Mailing Address 431 VIRGINIA AVE

City
CAMPBELLState
CAZip Code
95008FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AMERICAN RIGGINGOccupation (for Individual)
RIGGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2020

Transaction ID : SA11AI.78425

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. BENGTSON, BRUCE, , ,

Mailing Address 2 GAELSONG LN

City
READINGState
PAZip Code
19610FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.56

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 29 / 2020

Transaction ID : SA11AI.78482

Amount of Each Receipt this Period

31.56

☐ Memo Item

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

C. BENISCHEK, ELLEN, , ,

Mailing Address 3013 TAHITI ST NE

City
ALBUQUERQUEState
NMZip Code
87111FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 25 / 2020

Transaction ID : SA11AI.78490

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

166.56

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

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. BENNETT, JOSEPH, , ,

Mailing Address P.O. BOX 662

City
WILSONState
WYZip Code
83014FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 23 / 2020

Transaction ID : SA11AI.78512

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

B. BERTAS, MARY, K, ,

Mailing Address 1333 HILLSIDE CIR

City
CHASKAState
MNZip Code
55318FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.35

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 25 / 2020

Transaction ID : SA11AI.78629

Amount of Each Receipt this Period

151.35

☐ Memo Item

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

C. BERTAS, MARY, K, ,

Mailing Address 1333 HILLSIDE CIR

City
CHASKAState
MNZip Code
55318FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

382.35

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 29 / 2020

Transaction ID : SA11AI.78627

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

751.35

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

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

FOR LINE NUMBER: PAGE 21 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. BERTAS, MARY, K, ,

Mailing Address 1333 HILLSIDE CIR

City
CHASKA

State
MN

Zip Code
55318

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 ▼

482.35

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 29 / 2020

Transaction ID : SA11AI.78628

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. BERTAS, MARY, K, ,

Mailing Address 1333 HILLSIDE CIR

City
CHASKA

State
MN

Zip Code
55318

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 ▼

704.35

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 29 / 2020

Transaction ID : SA11AI.78632

Amount of Each Receipt this Period

222.00

☐ Memo Item

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

C. BERTOLOTTI, EUNICE, , ,

Mailing Address 1283 ESTATE DR

City
LOS ALTOS

State
CA

Zip Code
94024

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 26 / 2020

Transaction ID : SA11AI.78639

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

422.00

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

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

FOR LINE NUMBER: PAGE 22 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. BEYER, STEVE, , ,

Mailing Address 2209 VERSAILLES CT

City
HENDERSON

State
NV

Zip Code
89074

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STEVE BEYER PRODUCTIONS

Occupation (for Individual)
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 27 / 2020

Transaction ID : SA11AI.78670

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. BLANCHFIELD, ROGER, , ,

Mailing Address 767 110TH ST

City
CHURDAN

State
IA

Zip Code
50050

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 03 / 2020

Transaction ID : SA11AI.78811

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. BLANCHFIELD, ROGER, , ,

Mailing Address 767 110TH ST

City
CHURDAN

State
IA

Zip Code
50050

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 21 / 2020

Transaction ID : SA11AI.78816

Amount of Each Receipt this Period

45.00

☐ Memo Item

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

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

170.00

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

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

FOR LINE NUMBER: PAGE 23 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. BOLAND, BONNIE, , ,

Mailing Address 7375 COLONY COVE LN

City
JACKSONVILLE

State
FL

Zip Code
32277

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 ▼

215.00

Date of Receipt

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

Transaction ID : SA11AI.78918

Amount of Each Receipt this Period

65.00

☐ Memo Item

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

B. BOLT, LELAND, , ,

Mailing Address 5155 CANTERBURY DR

City
SAN DIEGO

State
CA

Zip Code
92116

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
03 / 01 / 2020

Transaction ID : SA11AI.78929

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. BOLT, LELAND, , ,

Mailing Address 5155 CANTERBURY DR

City
SAN DIEGO

State
CA

Zip Code
92116

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 ▼

750.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 25 / 2020

Transaction ID : SA11AI.78930

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

815.00

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 24 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. BOWERS, GUY, , ,

Mailing Address 8635 W SAHARA AVE
#70

City
LAS VEGAS

State
NV

Zip Code
89117

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 ▼

298.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 02 / 2020

Transaction ID : SA11AI.79113

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. BRADFORD, JERRY, , ,

Mailing Address 8102 GULF OF MEXICO BLVD

City

MARATHON

State

FL

Zip Code

33050

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 ▼

1005.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 04 / 2020

Transaction ID : SA11AI.79191

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

C. BRADLEY, EDWARD, , ,

Mailing Address 204 LARKIN LN

City

WALLINGFORD

State

PA

Zip Code

19086

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 03 / 2020

Transaction ID : SA11AI.79201

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

1200.00

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

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

FOR LINE NUMBER: PAGE 25 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. BRADLEY, EDWARD, , ,

Mailing Address 204 LARKIN LN

City
WALLINGFORD

State
PA

Zip Code
19086

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

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

Transaction ID : SA11AI.79202

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. BRADLEY, EDWARD, , ,

Mailing Address 204 LARKIN LN

City
WALLINGFORD

State
PA

Zip Code
19086

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

M M / D D / Y Y Y Y Y Y
02 / 22 / 2020

Transaction ID : SA11AI.79203

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. BRADLEY, EDWARD, , ,

Mailing Address 204 LARKIN LN

City
WALLINGFORD

State
PA

Zip Code
19086

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 ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 22 / 2020

Transaction ID : SA11AI.79204

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

300.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 26 OF 290
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. BRADLEY, EDWARD, , ,

Mailing Address 204 LARKIN LN

City
WALLINGFORDState
PAZip Code
19086FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		22		2020

Transaction ID : SA11AI.79205

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. BRADLEY, EDWARD, , ,

Mailing Address 204 LARKIN LN

City
WALLINGFORDState
PAZip Code
19086FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

845.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		09		2020

Transaction ID : SA11AI.79214

Amount of Each Receipt this Period

145.00

☐ Memo Item

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

C. BRADLEY, EDWARD, , ,

Mailing Address 204 LARKIN LN

City
WALLINGFORDState
PAZip Code
19086FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

945.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		15		2020

Transaction ID : SA11AI.79206

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

345.00

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 27 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. BRADLEY, EDWARD, , ,

Mailing Address 204 LARKIN LN

City
WALLINGFORD

State
PA

Zip Code
19086

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 ▼

1045.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 17 / 2020

Transaction ID : SA11AI.79207

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. BRADLEY, EDWARD, , ,

Mailing Address 204 LARKIN LN

City
WALLINGFORD

State
PA

Zip Code
19086

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 ▼

1080.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 20 / 2020

Transaction ID : SA11AI.79198

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

C. BRADLEY, EDWARD, , ,

Mailing Address 204 LARKIN LN

City
WALLINGFORD

State
PA

Zip Code
19086

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 ▼

1180.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 25 / 2020

Transaction ID : SA11AI.79208

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

235.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. BRADLEY, EDWARD, , ,

Mailing Address 204 LARKIN LN

City
WALLINGFORD

State
PA

Zip Code
19086

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 ▼

1280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 26 / 2020

Transaction ID : SA11AI.79209

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. BRADLEY, EDWARD, , ,

Mailing Address 204 LARKIN LN

City
WALLINGFORD

State
PA

Zip Code
19086

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 ▼

1380.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 27 / 2020

Transaction ID : SA11AI.79212

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. BRADLEY, EDWARD, , ,

Mailing Address 204 LARKIN LN

City
WALLINGFORD

State
PA

Zip Code
19086

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 ▼

1480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2020

Transaction ID : SA11AI.79213

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

300.00

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 29 OF 290

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. BRENNAN, BERNARD, , ,

Mailing Address 133 SPENCER DR

City
AMHERST

State
MA

Zip Code
01004

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 21 / 2020

Transaction ID : SA11AI.79285

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. BRESHEARS, PATRICIA, , ,

Mailing Address 2490 16TH AVE

City
KINGSBURG

State
CA

Zip Code
93931

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 ▼

268.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 19 / 2020

Transaction ID : SA11AI.79295

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. BRODIE, RENTON, , ,

Mailing Address 17138 RIVER BLUFF DR

City
UNION PIER

State
MI

Zip Code
49129

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

M M / D D / Y Y Y Y Y Y
03 / 24 / 2020

Transaction ID : SA11AI.79360

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

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

700.00

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 30 OF 290

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. BROWNE, DIANA, , ,

Mailing Address 3207 CLUB POINT WAY

City
GAINESVILLE

State
GA

Zip Code
30506

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 ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 17 / 2020

Transaction ID : SA11AI.79483

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. BROWNE, DIANA, , ,

Mailing Address 3207 CLUB POINT WAY

City
GAINESVILLE

State
GA

Zip Code
30506

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 ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 23 / 2020

Transaction ID : SA11AI.79482

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. BRUNNER, ROBERT, , ,

Mailing Address 4001 E WASHINGTON ST

City
URBANA

State
IL

Zip Code
61802

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 ▼

224.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 20 / 2020

Transaction ID : SA11AI.79526

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

400.00

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

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

FOR LINE NUMBER: PAGE 31 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. BRUNNER, ROBERT, , ,

Mailing Address 4001 E WASHINGTON ST

City
URBANA

State
IL

Zip Code
61802

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 ▼

274.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 20 / 2020

Transaction ID : SA11AI.79527

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. BRUNNER, ROBERT, , ,

Mailing Address 4001 E WASHINGTON ST

City
URBANA

State
IL

Zip Code
61802

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 ▼

279.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 30 / 2020

Transaction ID : SA11AI.79514

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

C. BRUNNER, ROBERT, , ,

Mailing Address 4001 E WASHINGTON ST

City
URBANA

State
IL

Zip Code
61802

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 ▼

379.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 30 / 2020

Transaction ID : SA11AI.79530

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

155.00

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

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

FOR LINE NUMBER: PAGE 32 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. BRUNNER, ROBERT, , ,

Mailing Address 4001 E WASHINGTON ST

City
URBANA

State
IL

Zip Code
61802

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 ▼

479.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2020

Transaction ID : SA11AI.79531

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. CALDERON, ERNESTINA, , ,

Mailing Address 146 ROCK HILL CHURCH RD

City
STAFFORD

State
VA

Zip Code
22556

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DON

Occupation (for Individual)
LOG MGMT SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 29 / 2020

Transaction ID : SA11AI.79879

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. CALHOUN, JOHN, , ,

Mailing Address 10049 OLDFIELD DR

City
RICHMOND

State
VA

Zip Code
23235

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COLDWELL BANKER

Occupation (for Individual)
REALTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 05 / 2020

Transaction ID : SA11AI.79885

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

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

1200.00

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

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

FOR LINE NUMBER: PAGE 33 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. CAMPBELL, KEITH, , ,

Mailing Address 4875 PELICAN COLONY BLVD
 #603

City State Zip Code
 BONITA SPRINGS FL 34134

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
 RETIRED

Occupation (for Individual)
 RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 01 30 2020

Transaction ID : SA11AI.79967

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

B. CAMPBELL, KEITH, , ,

Mailing Address 4875 PELICAN COLONY BLVD
 #603

City State Zip Code
 BONITA SPRINGS FL 34134

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

M M M / D D D / Y Y Y Y Y Y
 03 26 2020

Transaction ID : SA11AI.79966

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

C. CARL, JEFFREY, , ,

Mailing Address 622 GRAND ISLAND DR

City State Zip Code
 LAKE HAVASU CITY AZ 86403

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
 RETIRED

Occupation (for Individual)
 RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : SA11AI.80094

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

750.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 34 OF 290

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. CARL, JEFFREY, , ,

Mailing Address 622 GRAND ISLAND DR

City
LAKE HAVASU CITYState
AZZip Code
86403FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	07	/	2020

Transaction ID : SA11AI.80095

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. CARREON, MOISES, , ,

Mailing Address 820 CASPIAN CT E

City
MONUMENTState
COZip Code
80132FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ASCENTOccupation (for Individual)
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	14	/	2020

Transaction ID : SA11AI.80144

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. CAUTHEN, JOYE, , ,

Mailing Address 10208 DOYLESTOWN RD.

City
MATTHEWSState
NCZip Code
28105FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
03	/	21	/	2020

Transaction ID : SA11AI.80332

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

600.00

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 35 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. CAYNE, PATRICIA, , ,

Mailing Address 1000 S OCEAN BLVD

City
BOCA RATON

State
FL

Zip Code
33432

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 / D D / Y Y Y Y Y Y
03 / 24 / 2020

Transaction ID : SA11AI.80348

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

B. CHENEY, FRANK, , ,

Mailing Address 2410 W NINE MILE RD

City
PENSACOLA

State
FL

Zip Code
32534

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

M M / D D / Y Y Y Y Y Y
03 / 30 / 2020

Transaction ID : SA11AI.80481

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

C. CHERNYAK, MARINA, , ,

Mailing Address 35935 KING EDWARD DR

City
FARMINGTON HILLS

State
MI

Zip Code
48331

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
1001SHOPS.COM

Occupation (for Individual)
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 16 / 2020

Transaction ID : SA11AI.80487

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

1600.00

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 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. CHIAVAROLI, JOYCE, , ,

Mailing Address 15353 BURBANK DR

#6

City

BROOKSVILLE

State

FL

Zip Code

34604

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 ▼

237.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 13 / 2020

Transaction ID : SA11AI.80508

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. CHIAVAROLI, JOYCE, , ,

Mailing Address 15353 BURBANK DR

#6

City

BROOKSVILLE

State

FL

Zip Code

34604

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 ▼

262.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 15 / 2020

Transaction ID : SA11AI.80503

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. CHIAVAROLI, JOYCE, , ,

Mailing Address 15353 BURBANK DR

#6

City

BROOKSVILLE

State

FL

Zip Code

34604

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 ▼

312.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 13 / 2020

Transaction ID : SA11AI.80509

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

125.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 37 OF 290
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. CHIAVAROLI, JOYCE, , ,Mailing Address 15353 BURBANK DR
#6City
BROOKSVILLEState
FLZip Code
34604FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	15	/	2020

Transaction ID : SA11AI.80504

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. CHILCUTT, TRISHA, , ,

Mailing Address 127 ROUTT ST

City
SAN ANTONIOState
TXZip Code
78209FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
03	/	26	/	2020

Transaction ID : SA11AI.80519

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. CHRISTOFERSON, OWEN, , ,

Mailing Address 79 NOTTINGHAM TER

City
BUFFALOState
NYZip Code
14216FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	25	/	2020

Transaction ID : SA11AI.80569

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

775.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 38 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. CICCARELLI, JOAN, , ,

Mailing Address 5948 CICCARELLI RD

City
MODESTO

State
CA

Zip Code
95358

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2020

Transaction ID : SA11AI.80595

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. CLARK, JUDITH, , ,

Mailing Address 517 E MAIN ST

City
LAKE CITY

State
SC

Zip Code
29560

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 ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2020

Transaction ID : SA11AI.80691

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

C. COATNEY, RICHARD, , ,

Mailing Address 130 CYPRESS POINT COURT

City
APTOS

State
CA

Zip Code
95003

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 12 / 2020

Transaction ID : SA11AI.80784

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

385.00

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

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

FOR LINE NUMBER: PAGE 39 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. COATNEY, RICHARD, , ,

Mailing Address 130 CYPRESS POINT COURT

City
APTOS

State
CA

Zip Code
95003

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 12 / 2020

Transaction ID : SA11AI.80785

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. COLEMAN, JAMES, , ,

Mailing Address P.O. BOX 864

City
FLAT ROCK

State
NC

Zip Code
28731

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

M M / D D / Y Y Y Y Y Y
03 / 05 / 2020

Transaction ID : SA11AI.80863

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

C. CONNOLLY, CYNTHIA, , ,

Mailing Address 7998 W 111TH AVE

City
WESTMINSTER

State
CO

Zip Code
80021

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CONNOLLY'S TOWING, INC.

Occupation (for Individual)
ACCOUNTING

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 20 / 2020

Transaction ID : SA11AI.80956

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

700.00

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

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

FOR LINE NUMBER: PAGE 40 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. COOPER, BART, , ,

Mailing Address 3417 SENTINEL OAK DR

City
FLOWER MOUNDState
TXZip Code
75022FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 25 / 2020

Transaction ID : SA11AI.81065

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. CRAFT, JOE, , ,

Mailing Address 1717 S BOULDER AVE
STE 400City
TULSAState
OKZip Code
74119FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ALLIANCE COAL LLCOccupation (for Individual)
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 09 / 2020

Transaction ID : SA11AI.81202

Amount of Each Receipt this Period

500000.00

☐ Memo Item

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

C. CRAIN, TIMOTHY, , ,

Mailing Address 2609 PICKWICK LN

City
PLANOState
TXZip Code
75093FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TSC AVIATIONOccupation (for Individual)
PRESIDENT/CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 04 / 2020

Transaction ID : SA11AI.81217

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

500175.00

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

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

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

FOR LINE NUMBER: PAGE 41 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. CRAWFORD, JAMES, , ,

Mailing Address 2264 GRANADA HLS

City

NEW BRAUNFELS

State

TX

Zip Code

78132

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 / D D / Y Y Y Y Y Y
03 / 18 / 2020

Transaction ID : SA11AI.81236

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. CROUCH, BILL, , ,

Mailing Address P.O. BOX 161866

City

AUSTIN

State

TX

Zip Code

78716

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 21 / 2020

Transaction ID : SA11AI.81301

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. CROUCH, BILL, , ,

Mailing Address P.O. BOX 161866

City

AUSTIN

State

TX

Zip Code

78716

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary☐ General☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 21 / 2020

Transaction ID : SA11AI.81302

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

450.00

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

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

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

FOR LINE NUMBER: PAGE 42 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. DANIEL, LEE, , , III

Mailing Address 1356 WHITE HAWK RANCH DR

City
BOULDER

State
CO

Zip Code
80303

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

M M / D D / Y Y Y Y Y Y
01 / 30 / 2020

Transaction ID : SA11AI.81493

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

B. DAVIS, DAVE, , ,

Mailing Address 500 GRAND AVE PKWY

City
PFLUGERVILLE

State
TX

Zip Code
78660

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 ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2020

Transaction ID : SA11AI.81642

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

C. DAWSON, VICTORIA, , ,

Mailing Address 11251 W GARBOW RD

City
MIDDLEVILLE

State
MI

Zip Code
49333

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 / D D / Y Y Y Y Y Y
03 / 30 / 2020

Transaction ID : SA11AI.81647

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

1250.00

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

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

FOR LINE NUMBER: PAGE 43 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. DEBILL, WALTER, , ,

Mailing Address 9102 SAN DIEGO RD

City
AUSTIN

State
TX

Zip Code
78737

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 07 / 2020

Transaction ID : SA11AI.81711

Amount of Each Receipt this Period

400.00

☐ Memo Item

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

B. DE FRANCE, LAURIE, , ,

Mailing Address P.O. BOX 503

City
RIVERSIDE

State
CA

Zip Code
92502

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 / D D / Y Y Y Y Y Y
03 / 25 / 2020

Transaction ID : SA11AI.81665

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. DEIHL, RICHARD, , ,

Mailing Address 888 W EAST ST
#4002

City
SAN DIEGO

State
CA

Zip Code
92101

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 / D D / Y Y Y Y Y Y
01 / 21 / 2020

Transaction ID : SA11AI.81755

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

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

1650.00

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

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

FOR LINE NUMBER: PAGE 44 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. DENTON, DAYTON, , ,

Mailing Address 29510 W HAWTHORNE DR

City
SPRING

State
TX

Zip Code
77386

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

M M / D D / Y Y Y Y Y Y
03 / 24 / 2020

Transaction ID : SA11AI.81846

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

B. DEWEY, LINDA, , ,

Mailing Address P.O. BOX 554

City

FALL RIVER MILLS

State

CA

Zip Code

96028

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 ▼

202.99

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 13 / 2020

Transaction ID : SA11AI.81910

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

C. DEWEY, LINDA, , ,

Mailing Address P.O. BOX 554

City

FALL RIVER MILLS

State

CA

Zip Code

96028

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 ▼

227.99

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 13 / 2020

Transaction ID : SA11AI.81915

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

530.00

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

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. DICKER, FREDRIC, , ,

Mailing Address 10 MARION AVE

City
ALBANY

State
NY

Zip Code
12203

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 / D D / Y Y Y Y Y Y
02 / 14 / 2020

Transaction ID : SA11AI.81945

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City
JACKSONVILLE

State
FL

Zip Code
32205

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 ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2020

Transaction ID : SA11AI.82021

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

C. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City
JACKSONVILLE

State
FL

Zip Code
32205

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 ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 29 / 2020

Transaction ID : SA11AI.81994

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

280.00

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

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City
JACKSONVILLE

State
FL

Zip Code
32205

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 ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 29 / 2020

Transaction ID : SA11AI.81995

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City
JACKSONVILLE

State
FL

Zip Code
32205

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 ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 29 / 2020

Transaction ID : SA11AI.81996

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City
JACKSONVILLE

State
FL

Zip Code
32205

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 ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 29 / 2020

Transaction ID : SA11AI.81997

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

30.00

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City
JACKSONVILLE

State
FL

Zip Code
32205

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 ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 01 / 2020

Transaction ID : SA11AI.82015

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

B. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City
JACKSONVILLE

State
FL

Zip Code
32205

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 ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 02 / 2020

Transaction ID : SA11AI.82024

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City
JACKSONVILLE

State
FL

Zip Code
32205

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 ▼

286.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 04 / 2020

Transaction ID : SA11AI.81971

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

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

41.00

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

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

FOR LINE NUMBER: PAGE 48 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City
JACKSONVILLE

State
FL

Zip Code
32205

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 ▼

291.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 04 / 2020

Transaction ID : SA11AI.81978

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

B. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City
JACKSONVILLE

State
FL

Zip Code
32205

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 ▼

296.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 04 / 2020

Transaction ID : SA11AI.81979

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

C. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City
JACKSONVILLE

State
FL

Zip Code
32205

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 ▼

306.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 04 / 2020

Transaction ID : SA11AI.81998

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

20.00

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 49 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City
JACKSONVILLE

State
FL

Zip Code
32205

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 ▼

316.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 04 / 2020

Transaction ID : SA11AI.81999

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City
JACKSONVILLE

State
FL

Zip Code
32205

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 ▼

326.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 05 / 2020

Transaction ID : SA11AI.82000

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City
JACKSONVILLE

State
FL

Zip Code
32205

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 ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 06 / 2020

Transaction ID : SA11AI.82001

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

30.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 50 OF 290
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City
JACKSONVILLEState
FLZip Code
32205FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		06		2020

Transaction ID : SA11AI.82002

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City
JACKSONVILLEState
FLZip Code
32205FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

356.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		08		2020

Transaction ID : SA11AI.82003

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City
JACKSONVILLEState
FLZip Code
32205FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

366.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		08		2020

Transaction ID : SA11AI.82004

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

30.00

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 51 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City
JACKSONVILLE

State
FL

Zip Code
32205

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 ▼

371.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 12 / 2020

Transaction ID : SA11AI.81980

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

B. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City
JACKSONVILLE

State
FL

Zip Code
32205

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 ▼

386.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 12 / 2020

Transaction ID : SA11AI.82016

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

C. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City
JACKSONVILLE

State
FL

Zip Code
32205

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 ▼

401.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 12 / 2020

Transaction ID : SA11AI.82017

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

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

35.00

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

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

FOR LINE NUMBER: PAGE 52 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City
JACKSONVILLE

State
FL

Zip Code
32205

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 ▼

411.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 13 / 2020

Transaction ID : SA11AI.82005

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City
JACKSONVILLE

State
FL

Zip Code
32205

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 ▼

426.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 13 / 2020

Transaction ID : SA11AI.82018

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

C. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City
JACKSONVILLE

State
FL

Zip Code
32205

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 ▼

427.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 14 / 2020

Transaction ID : SA11AI.81972

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

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

26.00

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

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

FOR LINE NUMBER: PAGE 53 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City
JACKSONVILLE

State
FL

Zip Code
32205

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 ▼

462.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 14 / 2020

Transaction ID : SA11AI.82028

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

B. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City
JACKSONVILLE

State
FL

Zip Code
32205

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 ▼

497.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 14 / 2020

Transaction ID : SA11AI.82029

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

C. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City
JACKSONVILLE

State
FL

Zip Code
32205

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 ▼

507.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 15 / 2020

Transaction ID : SA11AI.82006

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

80.00

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

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

FOR LINE NUMBER: PAGE 54 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City
JACKSONVILLE

State
FL

Zip Code
32205

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 ▼

517.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 15 / 2020

Transaction ID : SA11AI.82007

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City
JACKSONVILLE

State
FL

Zip Code
32205

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 ▼

542.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 16 / 2020

Transaction ID : SA11AI.82025

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City
JACKSONVILLE

State
FL

Zip Code
32205

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 ▼

547.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 21 / 2020

Transaction ID : SA11AI.81981

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

40.00

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 55 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City
JACKSONVILLE

State
FL

Zip Code
32205

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 ▼

567.00

Date of Receipt

03 / 21 / 2020

Transaction ID : SA11AI.82022

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

B. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City
JACKSONVILLE

State
FL

Zip Code
32205

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 ▼

592.00

Date of Receipt

03 / 21 / 2020

Transaction ID : SA11AI.82026

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City
JACKSONVILLE

State
FL

Zip Code
32205

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 ▼

597.00

Date of Receipt

03 / 25 / 2020

Transaction ID : SA11AI.81982

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

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

50.00

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

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

FOR LINE NUMBER: PAGE 56 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City
JACKSONVILLE

State
FL

Zip Code
32205

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 ▼

602.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 25 / 2020

Transaction ID : SA11AI.81983

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

B. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City
JACKSONVILLE

State
FL

Zip Code
32205

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 ▼

607.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 27 / 2020

Transaction ID : SA11AI.81984

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

C. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City
JACKSONVILLE

State
FL

Zip Code
32205

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 ▼

617.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2020

Transaction ID : SA11AI.82010

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

20.00

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

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

FOR LINE NUMBER: PAGE 57 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City
JACKSONVILLE

State
FL

Zip Code
32205

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 ▼

622.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2020

Transaction ID : SA11AI.81985

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

B. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City
JACKSONVILLE

State
FL

Zip Code
32205

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 ▼

632.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2020

Transaction ID : SA11AI.82011

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City
JACKSONVILLE

State
FL

Zip Code
32205

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 ▼

642.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2020

Transaction ID : SA11AI.82012

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

25.00

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

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

FOR LINE NUMBER: PAGE 58 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. DICKSON, MARJORIE, , ,

Mailing Address 1024 DANCY ST

City
JACKSONVILLE

State
FL

Zip Code
32205

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 ▼

652.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2020

Transaction ID : SA11AI.82013

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. DIECK, DIANA, , ,

Mailing Address 1028 WESTERN DR

City
SANTA CRUZ

State
CA

Zip Code
95060

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 / D D / Y Y Y Y Y Y
03 / 26 / 2020

Transaction ID : SA11AI.82040

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

C. DOANE, DARYL, , ,

Mailing Address 1300 HOLLYDALE DR

City
FULLERTON

State
CA

Zip Code
92831

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DEPOSITECH, INC.

Occupation (for Individual)
PRESIDENT & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2020

Transaction ID : SA11AI.82137

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

1260.00

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

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

FOR LINE NUMBER: PAGE 59 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. DONNELLY, THOMAS, , ,

Mailing Address 8846 S SACRAMENTO AVE

City
EVERGREEN PARK

State
IL

Zip Code
60805

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COOK COUNTY OF IL

Occupation (for Individual)
COMPUTER PROGRAMMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 21 / 2020

Transaction ID : SA11AI.82266

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. DONNELLY, THOMAS, , ,

Mailing Address 8846 S SACRAMENTO AVE

City
EVERGREEN PARK

State
IL

Zip Code
60805

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COOK COUNTY OF IL

Occupation (for Individual)
COMPUTER PROGRAMMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 21 / 2020

Transaction ID : SA11AI.82269

Amount of Each Receipt this Period

125.00

☐ Memo Item

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

C. DONNELLY, THOMAS, , ,

Mailing Address 8846 S SACRAMENTO AVE

City
EVERGREEN PARK

State
IL

Zip Code
60805

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COOK COUNTY OF IL

Occupation (for Individual)
COMPUTER PROGRAMMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 21 / 2020

Transaction ID : SA11AI.82267

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

325.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. DONNELLY, THOMAS, , ,

Mailing Address 8846 S SACRAMENTO AVE

City
EVERGREEN PARK

State
IL

Zip Code
60805

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COOK COUNTY OF IL

Occupation (for Individual)
COMPUTER PROGRAMMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 21 / 2020

Transaction ID : SA11AI.82270

Amount of Each Receipt this Period

125.00

☐ Memo Item

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

B. DOWD, JOHN, M, ,

Mailing Address 31 HARDING LANE

City
CHATHAM

State
MA

Zip Code
02633

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 13 / 2020

Transaction ID : SA11AI.82321

Amount of Each Receipt this Period

10000.00

☐ Memo Item

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

C. DOWNS, SUZANNE, , ,

Mailing Address 445 PEACHTREE BATTLE AVENUE NW

City
ATLANTA

State
GA

Zip Code
30305

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 ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 26 / 2020

Transaction ID : SA11AI.82338

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

10375.00

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

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

FOR LINE NUMBER: PAGE 61 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. DUTTO, NICHOLAS, , ,

Mailing Address 2400 THIRD ST

City
SAN FRANCISCO

State
CA

Zip Code
94107

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
METROPOLITAN ELECTRIC

Occupation (for Individual)
CONTRACTOR

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
03 / 09 / 2020

Transaction ID : SA11AI.82478

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

B. ELLIS, DAVID, , ,

Mailing Address 207 E SHIELDS ST

City
FLETCHER

State
OK

Zip Code
73541

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CITY OF LAWTON

Occupation (for Individual)
WWTP PLANT OPERATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 12 / 2020

Transaction ID : SA11AI.82751

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

C. ELLIS, DAVID, , ,

Mailing Address 207 E SHIELDS ST

City
FLETCHER

State
OK

Zip Code
73541

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CITY OF LAWTON

Occupation (for Individual)
WWTP PLANT OPERATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

221.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 15 / 2020

Transaction ID : SA11AI.82727

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

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

1040.00

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

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

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. ELLIS, DAVID, , ,

Mailing Address 207 E SHIELDS ST

City
FLETCHER

State
OK

Zip Code
73541

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CITY OF LAWTON

Occupation (for Individual)
WWTP PLANT OPERATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 16 / 2020

Transaction ID : SA11AI.82728

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

B. ELLIS, DAVID, , ,

Mailing Address 207 E SHIELDS ST

City
FLETCHER

State
OK

Zip Code
73541

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CITY OF LAWTON

Occupation (for Individual)
WWTP PLANT OPERATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 16 / 2020

Transaction ID : SA11AI.82729

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

C. ELLIS, DAVID, , ,

Mailing Address 207 E SHIELDS ST

City
FLETCHER

State
OK

Zip Code
73541

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CITY OF LAWTON

Occupation (for Individual)
WWTP PLANT OPERATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

259.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 16 / 2020

Transaction ID : SA11AI.82744

Amount of Each Receipt this Period

28.00

☐ Memo Item

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

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

38.00

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. ELLIS, DAVID, , ,

Mailing Address 207 E SHIELDS ST

City
FLETCHER

State
OK

Zip Code
73541

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CITY OF LAWTON

Occupation (for Individual)
WWTP PLANT OPERATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 16 / 2020

Transaction ID : SA11AI.82752

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

B. ELLIS, DAVID, , ,

Mailing Address 207 E SHIELDS ST

City
FLETCHER

State
OK

Zip Code
73541

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CITY OF LAWTON

Occupation (for Individual)
WWTP PLANT OPERATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 20 / 2020

Transaction ID : SA11AI.82731

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. ELLIS, DAVID, , ,

Mailing Address 207 E SHIELDS ST

City
FLETCHER

State
OK

Zip Code
73541

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CITY OF LAWTON

Occupation (for Individual)
WWTP PLANT OPERATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

329.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 23 / 2020

Transaction ID : SA11AI.82739

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

70.00

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

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for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. ELLIS, DAVID, , ,

Mailing Address 207 E SHIELDS ST

City
FLETCHER

State
OK

Zip Code
73541

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CITY OF LAWTON

Occupation (for Individual)
WWTP PLANT OPERATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

344.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 27 / 2020

Transaction ID : SA11AI.82734

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

B. ELLIS, DAVID, , ,

Mailing Address 207 E SHIELDS ST

City
FLETCHER

State
OK

Zip Code
73541

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CITY OF LAWTON

Occupation (for Individual)
WWTP PLANT OPERATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

374.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 27 / 2020

Transaction ID : SA11AI.82746

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

C. ELLIS, DAVID, , ,

Mailing Address 207 E SHIELDS ST

City
FLETCHER

State
OK

Zip Code
73541

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CITY OF LAWTON

Occupation (for Individual)
WWTP PLANT OPERATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

404.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 28 / 2020

Transaction ID : SA11AI.82747

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

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

75.00

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. ELLIS, DAVID, , ,

Mailing Address 207 E SHIELDS ST

City
FLETCHER

State
OK

Zip Code
73541

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CITY OF LAWTON

Occupation (for Individual)
WWTP PLANT OPERATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 29 / 2020

Transaction ID : SA11AI.82740

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. ELLIS, DAVID, , ,

Mailing Address 207 E SHIELDS ST

City
FLETCHER

State
OK

Zip Code
73541

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CITY OF LAWTON

Occupation (for Individual)
WWTP PLANT OPERATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

454.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2020

Transaction ID : SA11AI.82741

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. ELLIS, DAVID, , ,

Mailing Address 207 E SHIELDS ST

City
FLETCHER

State
OK

Zip Code
73541

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CITY OF LAWTON

Occupation (for Individual)
WWTP PLANT OPERATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

479.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2020

Transaction ID : SA11AI.82742

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. ELLIS, DAVID, , ,

Mailing Address 207 E SHIELDS ST

City
FLETCHERState
OKZip Code
73541FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CITY OF LAWTONOccupation (for Individual)
WWTP PLANT OPERATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 30 / 2020

Transaction ID : SA11AI.82745

Amount of Each Receipt this Period

28.00

☐ Memo Item

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

B. ELLIS, DAVID, , ,

Mailing Address 207 E SHIELDS ST

City
FLETCHERState
OKZip Code
73541FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CITY OF LAWTONOccupation (for Individual)
WWTP PLANT OPERATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

532.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2020

Transaction ID : SA11AI.82743

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. ENTERPRISE, DANGENE, , ,

Mailing Address 66 E 55TH ST

City
NEW YORKState
NYZip Code
10022FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DANGENE ENTERPRISEOccupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

206.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 02 / 2020

Transaction ID : SA11AI.82841

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

153.00

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 67 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. EVERTSEN, KAREN, , ,

Mailing Address 7710 TAMARRON DR

City
PLAINSBORO

State
NJ

Zip Code
08536

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
REMAX

Occupation (for Individual)
REALTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 18 / 2020

Transaction ID : SA11AI.82938

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. EWING, PEGGY, , ,

Mailing Address P.O. BOX 2760

City
MESQUITE

State
NV

Zip Code
89024

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 ▼

246.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 15 / 2020

Transaction ID : SA11AI.82952

Amount of Each Receipt this Period

56.00

☐ Memo Item

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

C. EWING, PEGGY, , ,

Mailing Address P.O. BOX 2760

City
MESQUITE

State
NV

Zip Code
89024

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 ▼

296.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 17 / 2020

Transaction ID : SA11AI.82949

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

356.00

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. EWING, PEGGY, , ,

Mailing Address P.O. BOX 2760

City
MESQUITE

State
NV

Zip Code
89024

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 ▼

346.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 17 / 2020

Transaction ID : SA11AI.82950

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. EWING, PEGGY, , ,

Mailing Address P.O. BOX 2760

City
MESQUITE

State
NV

Zip Code
89024

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 ▼

396.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 02 / 2020

Transaction ID : SA11AI.82951

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. EWING, PEGGY, , ,

Mailing Address P.O. BOX 2760

City
MESQUITE

State
NV

Zip Code
89024

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 ▼

441.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 15 / 2020

Transaction ID : SA11AI.82946

Amount of Each Receipt this Period

45.00

☐ Memo Item

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

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

145.00

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

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

FOR LINE NUMBER: PAGE 69 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. FELLER, MARY KAY, , ,

Mailing Address 6517 BRILLIANT WAY

City
DAYTON

State
OH

Zip Code
45459

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 ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 06 / 2020

Transaction ID : SA11AI.83120

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. FERGUSON, PERRY, H, ,

Mailing Address 1482 EAST VALLEY RD
STE 200

City

SANTA BARBARA

State
CA

Zip Code
93108

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SBF & L INC.

Occupation (for Individual)
R. E. PROFESSIONAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 05 / 2020

Transaction ID : SA11AI.83151

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. FERNANDEZ, SAL, , ,

Mailing Address 2432 SATELLITE BEACH DR

City

LAS VEGAS

State
NV

Zip Code
89134

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DEPARTMENT OF NAVY

Occupation (for Individual)
SECURITY

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 26 / 2020

Transaction ID : SA11AI.83161

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

450.00

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

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

FOR LINE NUMBER: PAGE 70 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. FIDDYMENT, 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 (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 23 / 2020

Transaction ID : SA11AI.83193

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. FIDDYMENT, 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 (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 26 / 2020

Transaction ID : SA11AI.83190

Amount of Each Receipt this Period

45.00

☐ Memo Item

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

C. FINLEY, DANIEL, , ,

Mailing Address P.O. BOX 27535

City

HOUSTON

State

TX

Zip Code

77227

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF-EMPLOYED

Occupation (for Individual)

ATTORNEY

Receipt For:

☐ Primary☐ General☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 28 / 2020

Transaction ID : SA11AI.83255

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

595.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 71 OF 290
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. FLUTER, RUSSELL, , ,

Mailing Address 2025 W BALBOA BLVD

City
NEWPORT BEACHState
CAZip Code
92663FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYEDOccupation (for Individual)
REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
03	16	2020

Transaction ID : SA11AI.83378

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. FRAULI, HAROLD, , ,

Mailing Address 5519 WENDOVER CT

City
WESTON LAKESState
TXZip Code
77441FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
02	14	2020

Transaction ID : SA11AI.83559

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. FRAULI, HAROLD, , ,

Mailing Address 5519 WENDOVER CT

City
WESTON LAKESState
TXZip Code
77441FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
03	15	2020

Transaction ID : SA11AI.83560

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

600.00

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

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

FOR LINE NUMBER: PAGE 72 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. FREEMAN, DODY, , ,

Mailing Address 26810 CHIPSTONE CT

City
CYPRESSState
TXZip Code
77433FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
03 / 29 / 2020

Transaction ID : SA11AI.83598

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. FROSTAD, STEVEN, , ,

Mailing Address 2832 SLATER RD

City
OAK HARBORState
WAZip Code
98277FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 24 / 2020

Transaction ID : SA11AI.83688

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

C. FUCHS, ARNOLD, , ,

Mailing Address 14996 S W SUMMERVIEW DR

City
PORTLANDState
ORZip Code
97224FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HARRISOccupation (for Individual)
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

226.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 27 / 2020

Transaction ID : SA11AI.83688

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

785.00

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 73 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. GADDIS, JANE, , ,

Mailing Address 10700 SIKES PL
STE 2245

City
CHARLOTTE

State
NC

Zip Code
28277

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

ASHOK B CHUDGAR CPA

Occupation (for Individual)

SR ACCOUNTANT/VP OPERATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.99

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 18 / 2020

Transaction ID : SA11AI.83746

Amount of Each Receipt this Period

130.00

☐ Memo Item

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

B. GADDIS, JANE, , ,

Mailing Address 10700 SIKES PL
STE 2245

City
CHARLOTTE

State
NC

Zip Code
28277

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

ASHOK B CHUDGAR CPA

Occupation (for Individual)

SR ACCOUNTANT/VP OPERATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

271.99

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 27 / 2020

Transaction ID : SA11AI.83732

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

C. GADDIS, JANE, , ,

Mailing Address 10700 SIKES PL
STE 2245

City
CHARLOTTE

State
NC

Zip Code
28277

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

ASHOK B CHUDGAR CPA

Occupation (for Individual)

SR ACCOUNTANT/VP OPERATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

276.98

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 27 / 2020

Transaction ID : SA11AI.83734

Amount of Each Receipt this Period

4.99

☐ Memo Item

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

135.99

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 74 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. GADDIS, JANE, , ,

Mailing Address 10700 SIKES PL
STE 2245

City
CHARLOTTE

State
NC

Zip Code
28277

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ASHOK B CHUDGAR CPA

Occupation (for Individual)
SR ACCOUNTANT/VP OPERATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.98

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 27 / 2020

Transaction ID : SA11AI.83739

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

B. GADDIS, JANE, , ,

Mailing Address 10700 SIKES PL
STE 2245

City
CHARLOTTE

State
NC

Zip Code
28277

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ASHOK B CHUDGAR CPA

Occupation (for Individual)
SR ACCOUNTANT/VP OPERATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.98

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 27 / 2020

Transaction ID : SA11AI.83740

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

C. GADDIS, JANE, , ,

Mailing Address 10700 SIKES PL
STE 2245

City
CHARLOTTE

State
NC

Zip Code
28277

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ASHOK B CHUDGAR CPA

Occupation (for Individual)
SR ACCOUNTANT/VP OPERATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

311.98

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 27 / 2020

Transaction ID : SA11AI.83742

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

35.00

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 75 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. GADDIS, JANE, , ,

Mailing Address 10700 SIKES PL
STE 2245

City
CHARLOTTE

State
NC

Zip Code
28277

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

ASHOK B CHUDGAR CPA

Occupation (for Individual)

SR ACCOUNTANT/VP OPERATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.98

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 27 / 2020

Transaction ID : SA11AI.83745

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. GADDIS, JANE, , ,

Mailing Address 10700 SIKES PL
STE 2245

City
CHARLOTTE

State
NC

Zip Code
28277

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

ASHOK B CHUDGAR CPA

Occupation (for Individual)

SR ACCOUNTANT/VP OPERATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.97

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 18 / 2020

Transaction ID : SA11AI.83735

Amount of Each Receipt this Period

4.99

☐ Memo Item

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

C. GADDIS, JANE, , ,

Mailing Address 10700 SIKES PL
STE 2245

City
CHARLOTTE

State
NC

Zip Code
28277

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

ASHOK B CHUDGAR CPA

Occupation (for Individual)

SR ACCOUNTANT/VP OPERATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

371.96

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 27 / 2020

Transaction ID : SA11AI.83736

Amount of Each Receipt this Period

4.99

☐ Memo Item

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

59.98

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 76 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. GARATONI, JUDY, , ,

Mailing Address 4100 EDISON LAKES PKWY, SUITE 260

City
MISHAWAKA

State
IN

Zip Code
46545

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 ▼

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2020

Transaction ID : SA11AI.98226

Amount of Each Receipt this Period

75000.00

☒ Memo Item

PARTNERSHIP: GARATONI HOLDINGS
INVESTMENT PARTNERSHIP [SA11A:98223]

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

B. GARATONI, LAWRENCE, , ,

Mailing Address 4100 EDISON LAKES PKWY STE 260

City
MISHAWAKA

State
IN

Zip Code
46545

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HEALTH QUEST

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2020

Transaction ID : SA11AI.98227

Amount of Each Receipt this Period

75000.00

☒ Memo Item

PARTNERSHIP: GARATONI HOLDINGS
INVESTMENT PARTNERSHIP [SA11A:98223]

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

C. GARATONI HOLDINGS INVESTMENT PARTNERSHIP

Mailing Address 4100 EDISON LAKES PKWY STE 260

City
MISHAWAKA

State
IN

Zip Code
46545

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 ▼

150000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2020

Transaction ID : SA11AI.98223

Amount of Each Receipt this Period

150000.00

☐ Memo Item

SEE MEMO ENTRIES: PARTNERSHIP [SA11AI.98226,
98227]

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

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

150000.00

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

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

FOR LINE NUMBER: PAGE 77 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. GERRISH, JUDITH, , ,

Mailing Address 911 LEROY CT

City
RIVER FALLS

State
WI

Zip Code
54022

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
03 / 28 / 2020

Transaction ID : SA11AI.83999

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. GIANNE, ALDO, , ,

Mailing Address 7969 NW 2ND ST

City
MIAMI

State
FL

Zip Code
33156

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 ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 26 / 2020

Transaction ID : SA11AI.84024

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. GLOCKLER, HERRMANN, , ,

Mailing Address 3265 SIERRA CREST WAY

City
RENO

State
NV

Zip Code
89519

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 29 / 2020

Transaction ID : SA11AI.84189

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

450.00

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

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

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

FOR LINE NUMBER: PAGE 78 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. GOLDBERG, SHERRY, , ,

Mailing Address 8317 N RIDGEVIEW DR

City
PARADISE VALLEY

State
AZ

Zip Code
85253

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
ADVERTISING AND ART

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 12 / 2020

Transaction ID : SA11AI.84242

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

B. GOLDBERG, SHERRY, , ,

Mailing Address 8317 N RIDGEVIEW DR

City
PARADISE VALLEY

State
AZ

Zip Code
85253

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
ADVERTISING AND ART

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 18 / 2020

Transaction ID : SA11AI.84243

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

C. GOLDSTEIN, PAULA, , ,

Mailing Address 1100 UPTOWN PARK BLVD
#81

City
HOUSTON

State
TX

Zip Code
77056

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 ▼

1045.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 27 / 2020

Transaction ID : SA11AI.84259

Amount of Each Receipt this Period

1045.00

☐ Memo Item

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

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

1115.00

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

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

FOR LINE NUMBER: PAGE 79 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. GRAY, DONALD, , ,

Mailing Address 23233 N PIMA RD
 #113-367

City
 SCOTTSDALE

State
 AZ

Zip Code
 85255

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
 GRAY ASSOCIATES

Occupation (for Individual)
 OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1036.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 03 / 19 / 2020

Transaction ID : SA11AI.84481

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

B. GUTHIKONDA, MURALI, , ,

Mailing Address 6 HIGBIE CT

City

GROSSE POINTE FARMS

State

MI

Zip Code

48236

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
 DETROIT MEDICAL CENTER

Occupation (for Individual)
 PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 01 / 25 / 2020

Transaction ID : SA11AI.84761

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

C. HALE, SARAH, , ,

Mailing Address 103 WASHINGTON ST

City

XENIA

State

OH

Zip Code

45385

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
 RETIRED

Occupation (for Individual)
 RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 03 / 13 / 2020

Transaction ID : SA11AI.84876

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

2100.00

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

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

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

FOR LINE NUMBER: PAGE 80 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. HAMILTON, EARL, , ,

Mailing Address 105 WINTER FOREST DR
APT 102

City
CANDLER

State
NC

Zip Code
28715

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2020

Transaction ID : SA11AI.84969

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. HAMILTON, EARL, , ,

Mailing Address 105 WINTER FOREST DR
APT 102

City
CANDLER

State
NC

Zip Code
28715

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2020

Transaction ID : SA11AI.84970

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. HAMILTON, EARL, , ,

Mailing Address 105 WINTER FOREST DR
APT 102

City
CANDLER

State
NC

Zip Code
28715

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

M M / D D / Y Y Y Y Y Y
02 / 29 / 2020

Transaction ID : SA11AI.84971

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 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 81 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. HAMILTON, EARL, , ,

Mailing Address 105 WINTER FOREST DR
APT 102

City
CANDLER

State
NC

Zip Code
28715

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 ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 28 / 2020

Transaction ID : SA11AI.84972

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. HAMILTON, EARL, , ,

Mailing Address 105 WINTER FOREST DR
APT 102

City
CANDLER

State
NC

Zip Code
28715

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 ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 29 / 2020

Transaction ID : SA11AI.84973

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. HAMMOND, PHILIP, , ,

Mailing Address 2440 BORDER LINKS DR

City
VISALIA

State
CA

Zip Code
93291

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

M M / D D / Y Y Y Y Y Y
03 / 05 / 2020

Transaction ID : SA11AI.84991

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

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

700.00

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

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

FOR LINE NUMBER: PAGE 82 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. HAND, MARY JANE, , ,

Mailing Address P.O. BOX 808

City
HOBBS

State
NM

Zip Code
88241

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
INVESTMENTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 06 / 2020

Transaction ID : SA11AI.85018

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. HAND, MARY JANE, , ,

Mailing Address P.O. BOX 808

City
HOBBS

State
NM

Zip Code
88241

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
INVESTMENTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 06 / 2020

Transaction ID : SA11AI.85019

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. HARANG, GORDON, , ,

Mailing Address 1517 SAWMILL CREEK RD

City
SITKA

State
AK

Zip Code
99835

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ARROWHEAD TRANS. INC.

Occupation (for Individual)
CORP. OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 10 / 2020

Transaction ID : SA11AI.85066

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

600.00

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

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

FOR LINE NUMBER: PAGE 83 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. HARDEMAN, CHARLES, , ,

Mailing Address 792 ROWLAND BLVD

City
NOVATO

State
CA

Zip Code
94947

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 / D D / Y Y Y Y Y Y
01 / 23 / 2020

Transaction ID : SA11AI.85074

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. HARKER, JOSEPH, , ,

Mailing Address 630 SOUTHVIEW DR

City
ALLEN

State
TX

Zip Code
75002

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STRIKE

Occupation (for Individual)
PARTNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 22 / 2020

Transaction ID : SA11AI.85137

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

C. HARLAN, MARIE, , ,

Mailing Address 27140 E EL MACERO DR

City
DAVIS

State
CA

Zip Code
95618

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 / D D / Y Y Y Y Y Y
02 / 20 / 2020

Transaction ID : SA11AI.85139

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

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

1750.00

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

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

FOR LINE NUMBER: PAGE 84 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. HARLAN, MARIE, , ,

Mailing Address 27140 E EL MACERO DR

City
DAVIS

State
CA

Zip Code
95618

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

M M / D D / Y Y Y Y Y Y
03 / 24 / 2020

Transaction ID : SA11AI.85140

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

B. HARRIS, DONNA, , ,

Mailing Address 1961 GARDENA PL

City
SAN DIEGO

State
CA

Zip Code
92110

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 18 / 2020

Transaction ID : SA11AI.85216

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. HARRIS, JOSEPH, , ,

Mailing Address 199 MOUNTAIN HILL RD

City
FORTSON

State
GA

Zip Code
31808

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FIRE PROTECTION SOLUTIONS INC

Occupation (for Individual)
PRESIDENT & ESTIMATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 02 / 2020

Transaction ID : SA11AI.85217

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

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

1300.00

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

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

FOR LINE NUMBER: PAGE 85 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. HAU, ADA, , ,

Mailing Address 1901 QUAIL MEADOW RD

City
LOS ALTOS

State
CA

Zip Code
94024

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 ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 21 / 2020

Transaction ID : SA11AI.85327

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. HAWKINS, GREGG, , ,

Mailing Address 113 SHADOW LAKE DRIVE

City
BUCKHEAD

State
GA

Zip Code
30625

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
THE SILVER MOON

Occupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 14 / 2020

Transaction ID : SA11AI.85362

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. HILL, CARL, , ,

Mailing Address 4537 W 24TH ST

City
GREELEY

State
CO

Zip Code
80634

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 / D D / Y Y Y Y Y Y
03 / 23 / 2020

Transaction ID : SA11AI.85672

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

375.00

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

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

FOR LINE NUMBER: PAGE 86 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. HITCHCOCK, JAMES, , ,

Mailing Address 4642 RIDGEWOOD CT

City
MORADA

State
CA

Zip Code
95212

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 ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 26 / 2020

Transaction ID : SA11AI.85718

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. HODGE, CHRIS, , ,

Mailing Address 2180 IDLEWILD RD

City

PALM BEACH GARDENS

State

FL

Zip Code

33410-2598

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
THE WAYS BOATYARD LLC

Occupation (for Individual)
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 07 / 2020

Transaction ID : SA11AI.85758

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

C. HOLINKA, JOSEPH, , ,

Mailing Address 14411 SHELTER LN

City

HAYMARKET

State

VA

Zip Code

20169

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 05 / 2020

Transaction ID : SA11AI.85839

Amount of Each Receipt this Period

150.00

☐ Memo Item

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

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

325.00

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

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

FOR LINE NUMBER: PAGE 87 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. HOLINKA, JOSEPH, , ,

Mailing Address 14411 SHELTER LN

City
HAYMARKET

State
VA

Zip Code
20169

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 ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 05 / 2020

Transaction ID : SA11AI.85840

Amount of Each Receipt this Period

150.00

☐ Memo Item

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

B. HOPPER, BILLY, B, ,

Mailing Address PO BOX 353

City
MENTONE

State
TX

Zip Code
79754

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

M M / D D / Y Y Y Y Y
03 / 21 / 2020

Transaction ID : SA11AI.85941

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

C. HUBBARD, FRANK, , ,

Mailing Address 1610 BENT OAK LN

City
VERO BEACH

State
FL

Zip Code
32963

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 22 / 2020

Transaction ID : SA11AI.86063

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

750.00

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. HUDSON, WILLIAM, , ,

Mailing Address 28 HUDSON LN

City
ALAMO

State
TN

Zip Code
38001

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 ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 12 / 2020

Transaction ID : SA11AI.86090

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. HUDSON, WILLIAM, , ,

Mailing Address 28 HUDSON LN

City
ALAMO

State
TN

Zip Code
38001

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 ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 12 / 2020

Transaction ID : SA11AI.86091

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. HUDSON, WILLIAM, , ,

Mailing Address 28 HUDSON LN

City
ALAMO

State
TN

Zip Code
38001

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 ▼

241.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 29 / 2020

Transaction ID : SA11AI.86082

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

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

51.00

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

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

FOR LINE NUMBER: PAGE 89 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. HUDSON, WILLIAM, , ,

Mailing Address 28 HUDSON LN

City
ALAMO

State
TN

Zip Code
38001

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 ▼

246.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 29 / 2020

Transaction ID : SA11AI.86083

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

B. HUDSON, WILLIAM, , ,

Mailing Address 28 HUDSON LN

City
ALAMO

State
TN

Zip Code
38001

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 ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 29 / 2020

Transaction ID : SA11AI.86086

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

C. HUDSON, WILLIAM, , ,

Mailing Address 28 HUDSON LN

City
ALAMO

State
TN

Zip Code
38001

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 ▼

286.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 29 / 2020

Transaction ID : SA11AI.86087

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

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

45.00

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

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

FOR LINE NUMBER: PAGE 90 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. HUDSON, WILLIAM, , ,

Mailing Address 28 HUDSON LN

City
ALAMO

State
TN

Zip Code
38001

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 ▼

342.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 29 / 2020

Transaction ID : SA11AI.86111

Amount of Each Receipt this Period

56.00

☐ Memo Item

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

B. HUDSON, WILLIAM, , ,

Mailing Address 28 HUDSON LN

City
ALAMO

State
TN

Zip Code
38001

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 ▼

392.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 01 / 2020

Transaction ID : SA11AI.86104

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. HUDSON, WILLIAM, , ,

Mailing Address 28 HUDSON LN

City
ALAMO

State
TN

Zip Code
38001

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 ▼

442.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 01 / 2020

Transaction ID : SA11AI.86105

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

156.00

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. HUDSON, WILLIAM, , ,

Mailing Address 28 HUDSON LN

City
ALAMO

State
TN

Zip Code
38001

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 ▼

487.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 04 / 2020

Transaction ID : SA11Al.86101

Amount of Each Receipt this Period

45.00

☐ Memo Item

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

B. HUDSON, WILLIAM, , ,

Mailing Address 28 HUDSON LN

City
ALAMO

State
TN

Zip Code
38001

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 ▼

512.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 09 / 2020

Transaction ID : SA11Al.86092

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. HUDSON, WILLIAM, , ,

Mailing Address 28 HUDSON LN

City
ALAMO

State
TN

Zip Code
38001

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 ▼

537.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 09 / 2020

Transaction ID : SA11Al.86093

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

95.00

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. HUDSON, WILLIAM, , ,

Mailing Address 28 HUDSON LN

City
ALAMO

State
TN

Zip Code
38001

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 ▼

587.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 09 / 2020

Transaction ID : SA11AI.86106

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. HUDSON, WILLIAM, , ,

Mailing Address 28 HUDSON LN

City
ALAMO

State
TN

Zip Code
38001

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 ▼

637.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 09 / 2020

Transaction ID : SA11AI.86107

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. HUDSON, WILLIAM, , ,

Mailing Address 28 HUDSON LN

City
ALAMO

State
TN

Zip Code
38001

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 ▼

662.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 12 / 2020

Transaction ID : SA11AI.86094

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

125.00

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

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. HUDSON, WILLIAM, , ,

Mailing Address 28 HUDSON LN

City
ALAMO

State
TN

Zip Code
38001

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 ▼

712.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 13 / 2020

Transaction ID : SA11AI.86108

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. HUDSON, WILLIAM, , ,

Mailing Address 28 HUDSON LN

City
ALAMO

State
TN

Zip Code
38001

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 ▼

737.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 25 / 2020

Transaction ID : SA11AI.86096

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. JOBE, RENEE, , ,

Mailing Address 8185 E ALAMEDA RD

City
SCOTTSDALE

State
AZ

Zip Code
85255

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

M M / D D / Y Y Y Y Y
01 / 21 / 2020

Transaction ID : SA11AI.86556

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

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

575.00

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

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. JOBE, RENEE, , ,

Mailing Address 8185 E ALAMEDA RD

City
SCOTTSDALE

State
AZ

Zip Code
85255

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 / D D / Y Y Y Y Y Y
02 / 21 / 2020

Transaction ID : SA11AI.86557

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

B. JOBE, RENEE, , ,

Mailing Address 8185 E ALAMEDA RD

City
SCOTTSDALE

State
AZ

Zip Code
85255

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

M M / D D / Y Y Y Y Y Y
03 / 21 / 2020

Transaction ID : SA11AI.86558

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

C. JOHNSON, SHEILA, B, ,

Mailing Address 4636 HARLEY AVE

City
FORT WORTH

State
TX

Zip Code
76107

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 ▼

267.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 01 / 2020

Transaction ID : SA11AI.86700

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

1100.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. JOHNSON, SHEILA, B, ,

Mailing Address 4636 HARLEY AVE

City
FORT WORTH

State
TX

Zip Code
76107

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 ▼

367.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 01 / 2020

Transaction ID : SA11AI.86701

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. JOHNSON, SHEILA, B, ,

Mailing Address 4636 HARLEY AVE

City
FORT WORTH

State
TX

Zip Code
76107

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 ▼

467.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 01 / 2020

Transaction ID : SA11AI.86702

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. JOHNSON, SUSAN, , ,

Mailing Address 14343 HARBOUR LINKS CT
UNIT 22B

City
FORT MYERS

State
FL

Zip Code
33908

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 ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 18 / 2020

Transaction ID : SA11AI.86698

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

300.00

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. JOHNSON, SUSAN, , ,

Mailing Address 14343 HARBOUR LINKS CT
 UNIT 22B

City
 FORT MYERS

State
 FL

Zip Code
 33908

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 ▼

301.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 18 / 2020

Transaction ID : SA11AI.86705

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. JONES, BARRY, , ,

Mailing Address 3800 CLOVERDALE DR

City
 TYLER

State
 TX

Zip Code
 75701

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 / D D / Y Y Y Y Y Y
 02 / 05 / 2020

Transaction ID : SA11AI.86801

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. JONES, BARRY, , ,

Mailing Address 3800 CLOVERDALE DR

City
 TYLER

State
 TX

Zip Code
 75701

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

M M / D D / Y Y Y Y Y Y
 03 / 05 / 2020

Transaction ID : SA11AI.86802

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

600.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. JONES, LINDA, , ,

Mailing Address 3151 KINGSTREE CT

City
DUBLINState
OHZip Code
43017FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	21	/	2020

Transaction ID : SA11AI.86795

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. JUREK, FLORENCE, , ,

Mailing Address P.O. BOX 8134

City

NEW FAIRFIELD

State

CT

Zip Code

06812

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	26	/	2020

Transaction ID : SA11AI.86857

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

C. JUREK, FLORENCE, , ,

Mailing Address P.O. BOX 8134

City

NEW FAIRFIELD

State

CT

Zip Code

06812

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

237.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2020

Transaction ID : SA11AI.86866

Amount of Each Receipt this Period

35.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

155.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 98 OF 290

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. JUREK, FLORENCE, , ,

Mailing Address P.O. BOX 8134

City
NEW FAIRFIELDState
CTZip Code
06812FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	04	/	2020

Transaction ID : SA11AI.86858

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. JUREK, FLORENCE, , ,

Mailing Address P.O. BOX 8134

City
NEW FAIRFIELDState
CTZip Code
06812FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	08	/	2020

Transaction ID : SA11AI.86867

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

C. JUREK, FLORENCE, , ,

Mailing Address P.O. BOX 8134

City
NEW FAIRFIELDState
CTZip Code
06812FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

298.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	15	/	2020

Transaction ID : SA11AI.86852

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

61.00

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 99 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. JUREK, FLORENCE, , ,

Mailing Address P.O. BOX 8134

City
NEW FAIRFIELD

State
CT

Zip Code
06812

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 ▼

333.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 15 / 2020

Transaction ID : SA11AI.86868

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

B. JUREK, FLORENCE, , ,

Mailing Address P.O. BOX 8134

City
NEW FAIRFIELD

State
CT

Zip Code
06812

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 ▼

338.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 29 / 2020

Transaction ID : SA11AI.86854

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

C. JUREK, FLORENCE, , ,

Mailing Address P.O. BOX 8134

City
NEW FAIRFIELD

State
CT

Zip Code
06812

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 ▼

363.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 29 / 2020

Transaction ID : SA11AI.86859

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

65.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 100 OF 290
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. KALINOWSKI, JAMES, , ,

Mailing Address 91-1018 KAI WEKE ST

City
EWA BEACHState
HIZip Code
96706FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	21	/	2020

Transaction ID : SA11AI.86917

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. KEHRT, MARGARET, , ,

Mailing Address 38 STONEWOOD CREEK CT

City
DALLASState
GAZip Code
30132FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	08	/	2020

Transaction ID : SA11AI.87068

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. KEHRT, MARGARET, , ,

Mailing Address 38 STONEWOOD CREEK CT

City
DALLASState
GAZip Code
30132FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	17	/	2020

Transaction ID : SA11AI.87069

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

300.00

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 101 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. KEHRT, MARGARET, , ,

Mailing Address 38 STONEWOOD CREEK CT

City
DALLAS

State
GA

Zip Code
30132

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 ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 18 / 2020

Transaction ID : SA11AI.87071

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

B. KEHRT, MARGARET, , ,

Mailing Address 38 STONEWOOD CREEK CT

City
DALLAS

State
GA

Zip Code
30132

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 ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 20 / 2020

Transaction ID : SA11AI.87072

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

C. KEHRT, MARGARET, , ,

Mailing Address 38 STONEWOOD CREEK CT

City
DALLAS

State
GA

Zip Code
30132

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 ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 22 / 2020

Transaction ID : SA11AI.87064

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

80.00

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

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

FOR LINE NUMBER: PAGE 102 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. KEHRT, MARGARET, , ,

Mailing Address 38 STONEWOOD CREEK CT

City
DALLAS

State
GA

Zip Code
30132

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 ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 25 / 2020

Transaction ID : SA11AI.87073

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

B. KEHRT, MARGARET, , ,

Mailing Address 38 STONEWOOD CREEK CT

City
DALLAS

State
GA

Zip Code
30132

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 ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 30 / 2020

Transaction ID : SA11AI.87065

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. KLEIN, MICHAEL, , ,

Mailing Address 5220 KLEES MILL RD

City
SYKESVILLE

State
MD

Zip Code
21784

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CHARLES A. KLEIN & SONS INC.

Occupation (for Individual)
MECHANICAL CONTRACTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

556.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 29 / 2020

Transaction ID : SA11AI.87359

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

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

545.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. KOFINAS, GEORGE, , ,Mailing Address 100 WINSTON DR
APT PH-HNCity
CLIFFSIDE PARKState
NJZip Code
07010FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYEDOccupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 29 / 2020

Transaction ID : SA11AI.87488

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. KOFINAS, GEORGE, , ,Mailing Address 100 WINSTON DR
APT PH-HNCity
CLIFFSIDE PARKState
NJZip Code
07010FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYEDOccupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 13 / 2020

Transaction ID : SA11AI.87490

Amount of Each Receipt this Period

150.00

☐ Memo Item

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

C. KOPPEN, ECKHARDT, , ,

Mailing Address P.O. BOX 124

City
TUCSONState
AZZip Code
85702FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MINING CONTRACTORSOccupation (for Individual)
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 09 / 2020

Transaction ID : SA11AI.87545

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

500.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 104 OF 290
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. KORNEGAY, GLEN, , ,

Mailing Address 290 CEDAR RIDGE DRIVE

City
MURPHYState
NCZip Code
28906FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.99

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	05	/	2020

Transaction ID : SA11AI.87557

Amount of Each Receipt this Period

290.00

☐ Memo Item

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

B. KORNEGAY, GLEN, , ,

Mailing Address 290 CEDAR RIDGE DRIVE

City
MURPHYState
NCZip Code
28906FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

374.98

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	01	/	2020

Transaction ID : SA11AI.87553

Amount of Each Receipt this Period

4.99

☐ Memo Item

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

C. KRISTEDJA, PAUL, , ,

Mailing Address 12142 AFTON LN

City
NORTH TUSTINState
CAZip Code
92705FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
KPRSOccupation (for Individual)
EXEC

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	16	/	2020

Transaction ID : SA11AI.87622

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

394.99

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 105 OF 290

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

NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. KULLIJIAN, JOHN, , ,

Mailing Address 5803 BRIDLEWOOD DR

City
RICHMONDState
TXZip Code
77469FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
02	09	2020

Transaction ID : SA11AI.87700

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

B. KULLIJIAN, JOHN, , ,

Mailing Address 5803 BRIDLEWOOD DR

City
RICHMONDState
TXZip Code
77469FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
02	09	2020

Transaction ID : SA11AI.87701

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

C. KULLIJIAN, JOHN, , ,

Mailing Address 5803 BRIDLEWOOD DR

City
RICHMONDState
TXZip Code
77469FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
02	11	2020

Transaction ID : SA11AI.87679

Amount of Each Receipt this Period

10.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

80.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. KULLIJIAN, JOHN, , ,

Mailing Address 5803 BRIDLEWOOD DR

City
RICHMOND

State
TX

Zip Code
77469

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 ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 11 / 2020

Transaction ID : SA11AI.87680

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. KULLIJIAN, JOHN, , ,

Mailing Address 5803 BRIDLEWOOD DR

City
RICHMOND

State
TX

Zip Code
77469

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 ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 13 / 2020

Transaction ID : SA11AI.87702

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

C. KULLIJIAN, JOHN, , ,

Mailing Address 5803 BRIDLEWOOD DR

City
RICHMOND

State
TX

Zip Code
77469

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 ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 13 / 2020

Transaction ID : SA11AI.87703

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

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

80.00

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

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

FOR LINE NUMBER: PAGE 107 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. KULLIJIAN, JOHN, , ,

Mailing Address 5803 BRIDLEWOOD DR

City
RICHMOND

State
TX

Zip Code
77469

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 ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 19 / 2020

Transaction ID : SA11AI.87686

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. KULLIJIAN, JOHN, , ,

Mailing Address 5803 BRIDLEWOOD DR

City
RICHMOND

State
TX

Zip Code
77469

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 ▼

395.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 19 / 2020

Transaction ID : SA11AI.87687

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. KULLIJIAN, JOHN, , ,

Mailing Address 5803 BRIDLEWOOD DR

City
RICHMOND

State
TX

Zip Code
77469

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 ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 20 / 2020

Transaction ID : SA11AI.87688

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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

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

FOR LINE NUMBER: PAGE 108 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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RICHMOND

State
TX

Zip Code
77469

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 ▼

445.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 20 / 2020

Transaction ID : SA11AI.87689

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. KULLIJIAN, JOHN, , ,

Mailing Address 5803 BRIDLEWOOD DR

City
RICHMOND

State
TX

Zip Code
77469

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 ▼

470.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 01 / 2020

Transaction ID : SA11AI.87690

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. KULLIJIAN, JOHN, , ,

Mailing Address 5803 BRIDLEWOOD DR

City
RICHMOND

State
TX

Zip Code
77469

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 ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 01 / 2020

Transaction ID : SA11AI.87691

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 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<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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A. KULLIJIAN, JOHN, , ,

Mailing Address 5803 BRIDLEWOOD DR

City
RICHMONDState
TXZip Code
77469FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
03	/	01	/	2020

Transaction ID : SA11AI.87692

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. KULLIJIAN, JOHN, , ,

Mailing Address 5803 BRIDLEWOOD DR

City
RICHMONDState
TXZip Code
77469FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

545.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
03	/	01	/	2020

Transaction ID : SA11AI.87693

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. KULLIJIAN, JOHN, , ,

Mailing Address 5803 BRIDLEWOOD DR

City
RICHMONDState
TXZip Code
77469FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
03	/	02	/	2020

Transaction ID : SA11AI.87694

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 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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TX

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77469

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federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

595.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 02 / 2020

Transaction ID : SA11AI.87695

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. KULLIJIAN, JOHN, , ,

Mailing Address 5803 BRIDLEWOOD DR

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77469

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federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 02 / 2020

Transaction ID : SA11AI.87704

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

C. KULLIJIAN, JOHN, , ,

Mailing Address 5803 BRIDLEWOOD DR

City
RICHMOND

State
TX

Zip Code
77469

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 ▼

665.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 02 / 2020

Transaction ID : SA11AI.87705

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

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

95.00

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)

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A. KULLIJIAN, JOHN, , ,

Mailing Address 5803 BRIDLEWOOD DR

City
RICHMOND

State
TX

Zip Code
77469

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 ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 08 / 2020

Transaction ID : SA11AI.87706

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

B. KULLIJIAN, JOHN, , ,

Mailing Address 5803 BRIDLEWOOD DR

City
RICHMOND

State
TX

Zip Code
77469

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 ▼

735.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 08 / 2020

Transaction ID : SA11AI.87707

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

C. KULLIJIAN, JOHN, , ,

Mailing Address 5803 BRIDLEWOOD DR

City
RICHMOND

State
TX

Zip Code
77469

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 ▼

785.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 08 / 2020

Transaction ID : SA11AI.87714

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

120.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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A. KULLIJIAN, JOHN, , ,

Mailing Address 5803 BRIDLEWOOD DR

City
RICHMOND

State
TX

Zip Code
77469

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 ▼

835.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 08 / 2020

Transaction ID : SA11AI.87715

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. KULLIJIAN, JOHN, , ,

Mailing Address 5803 BRIDLEWOOD DR

City
RICHMOND

State
TX

Zip Code
77469

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 ▼

845.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 11 / 2020

Transaction ID : SA11AI.87681

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. KULLIJIAN, JOHN, , ,

Mailing Address 5803 BRIDLEWOOD DR

City
RICHMOND

State
TX

Zip Code
77469

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 ▼

865.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 11 / 2020

Transaction ID : SA11AI.87683

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

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

80.00

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 113 OF 290

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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RICHMOND

State
TX

Zip Code
77469

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 ▼

885.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 11 / 2020

Transaction ID : SA11AI.87684

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

B. KULLIJIAN, JOHN, , ,

Mailing Address 5803 BRIDLEWOOD DR

City
RICHMOND

State
TX

Zip Code
77469

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 ▼

920.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 14 / 2020

Transaction ID : SA11AI.87708

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

C. KULLIJIAN, JOHN, , ,

Mailing Address 5803 BRIDLEWOOD DR

City
RICHMOND

State
TX

Zip Code
77469

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 ▼

955.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 14 / 2020

Transaction ID : SA11AI.87709

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

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

90.00

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 114 OF 290

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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Zip Code
77469

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 ▼

1005.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 15 / 2020

Transaction ID : SA11AI.87716

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. KULLIJIAN, JOHN, , ,

Mailing Address 5803 BRIDLEWOOD DR

City
RICHMOND

State
TX

Zip Code
77469

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 ▼

1055.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 15 / 2020

Transaction ID : SA11AI.87717

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. KULLIJIAN, JOHN, , ,

Mailing Address 5803 BRIDLEWOOD DR

City
RICHMOND

State
TX

Zip Code
77469

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 ▼

1090.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 20 / 2020

Transaction ID : SA11AI.87710

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

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

135.00

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 115 OF 290

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

A. KULLIJIAN, JOHN, , ,

Mailing Address 5803 BRIDLEWOOD DR

City
RICHMOND

State
TX

Zip Code
77469

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 ▼

1125.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 20 / 2020

Transaction ID : SA11AI.87711

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

B. KULLIJIAN, JOHN, , ,

Mailing Address 5803 BRIDLEWOOD DR

City
RICHMOND

State
TX

Zip Code
77469

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 ▼

1160.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 24 / 2020

Transaction ID : SA11AI.87712

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

C. KULLIJIAN, JOHN, , ,

Mailing Address 5803 BRIDLEWOOD DR

City
RICHMOND

State
TX

Zip Code
77469

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 ▼

1195.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 24 / 2020

Transaction ID : SA11AI.87713

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

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

105.00

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

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. LAGO, BARBARA, , ,

Mailing Address 3325 LIZARD HEAD LN

City
SEDONA

State
AZ

Zip Code
86336

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 / D D / Y Y Y Y Y Y
03 / 11 / 2020

Transaction ID : SA11AI.87802

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. LANDES, JAMES, , ,

Mailing Address 18500 BLACK RD

City
LOS GATOS

State
CA

Zip Code
95033

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

M M / D D / Y Y Y Y Y Y
03 / 31 / 2020

Transaction ID : SA11AI.87866

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

C. LANNERT, ROBERT, , ,

Mailing Address 106 SHORE OAKS CT

City
LAKEWAY

State
TX

Zip Code
78738

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 21 / 2020

Transaction ID : SA11AI.87910

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

850.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. LAYTON, EVA, , ,

Mailing Address 809 BUNKER HILL DRIVE

City
CARSON CITY

State
NV

Zip Code
89703

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 ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 28 / 2020

Transaction ID : SA11AI.88020

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. LAYTON, EVA, , ,

Mailing Address 809 BUNKER HILL DRIVE

City
CARSON CITY

State
NV

Zip Code
89703

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 ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 28 / 2020

Transaction ID : SA11AI.88021

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. LEACH, JOHN, , ,

Mailing Address 2485 RUE DU JARDIN

City
NAPLES

State
FL

Zip Code
34105

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 05 / 2020

Transaction ID : SA11AI.88042

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

250.00

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. LEE, ELEANOR, , ,

Mailing Address 1930 W RIVER BEND CT

City
MEQUON

State
WI

Zip Code
53092

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 ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 26 / 2020

Transaction ID : SA11AI.88087

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. LEONARD, KELLY, , ,

Mailing Address 1089 PINNACLE VIEW DR. EAST

City
KERRVILLE

State
TX

Zip Code
78028

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 / D D / Y Y Y Y Y Y
02 / 03 / 2020

Transaction ID : SA11AI.88161

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. LILLY, KEVIN, , ,

Mailing Address 3507 WOODLAND POINTE DR

City
SAINT JOSEPH

State
MO

Zip Code
64506

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ST JOSEPH BEVERAGE

Occupation (for Individual)
SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 25 / 2020

Transaction ID : SA11AI.88282

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

600.00

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. LINDSTROM, KEITH, , ,

Mailing Address 438 DEER RUN DR

City
CENTRAL SQUARE

State
NY

Zip Code
13036

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 ▼

341.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 14 / 2020

Transaction ID : SA11AI.88348

Amount of Each Receipt this Period

176.00

☐ Memo Item

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

B. LINDSTROM, KEITH, , ,

Mailing Address 438 DEER RUN DR

City
CENTRAL SQUARE

State
NY

Zip Code
13036

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 ▼

366.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 09 / 2020

Transaction ID : SA11AI.88343

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. LORENZO, GREGORY, , ,

Mailing Address 740 E WALKER ST

City
ORLAND

State
CA

Zip Code
95963

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
CONTRACTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 22 / 2020

Transaction ID : SA11AI.88545

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

301.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. LORENZO, GREGORY, , ,

Mailing Address 740 E WALKER ST

City
ORLAND

State
CA

Zip Code
95963

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
CONTRACTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 22 / 2020

Transaction ID : SA11AI.88546

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. LUCH, WARREN, , ,

Mailing Address P.O. BOX 194

City

CARMEL BY THE SEA

State

CA

Zip Code

93921

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UNEMPLOYED

Occupation (for Individual)
UNEMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 09 / 2020

Transaction ID : SA11AI.88618

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. LUNDQUIST, DAVID, , ,

Mailing Address 6277 N OCEAN BLVD

City

BOYNTON BEACH

State

FL

Zip Code

33435

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 / D D / Y Y Y Y Y Y
02 / 05 / 2020

Transaction ID : SA11AI.88676

Amount of Each Receipt this Period

150.00

☐ Memo Item

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

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

350.00

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

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. LUNDQUIST, DAVID, , ,

Mailing Address 6277 N OCEAN BLVD

City
BOYNTON BEACH

State
FL

Zip Code
33435

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 ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 26 / 2020

Transaction ID : SA11AI.88674

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. LUNDQUIST, DAVID, , ,

Mailing Address 6277 N OCEAN BLVD

City
BOYNTON BEACH

State
FL

Zip Code
33435

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 ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2020

Transaction ID : SA11AI.88675

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. MACK, DAVID, S, ,

Mailing Address ONE BRIDGE PLAZA N
STE 260

City
FORT LEE

State
NJ

Zip Code
07024

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MACK CONSTRUCTION

Occupation (for Individual)
SENIOR PARTNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

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

Transaction ID : SA11AI.88786

Amount of Each Receipt this Period

100000.00

☐ Memo Item

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

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

100200.00

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

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for each category of the
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. MANEN, GREGORY, , ,

Mailing Address 819 COUNTY ROAD 404

City
DAYTON

State
TX

Zip Code
77535

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ACTT

Occupation (for Individual)
INSPECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 18 / 2020

Transaction ID : SA11AI.88896

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. MANICKE, ELAINE, , ,

Mailing Address 7167 CORRALES RD

City
CORRALES

State
NM

Zip Code
87048

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 / D D / Y Y Y Y Y Y
03 / 28 / 2020

Transaction ID : SA11AI.88912

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. MATTEI, REBECCA, , ,

Mailing Address 22 JARRELL FARMS DR

City
NEWARK

State
DE

Zip Code
19711

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 / D D / Y Y Y Y Y Y
02 / 26 / 2020

Transaction ID : SA11AI.89169

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

750.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. MCCLANE, BOB, , ,

Mailing Address 132 GRANT AVE

City
SAN ANTONIOState
TXZip Code
78209FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYEDOccupation (for Individual)
FINANCIAL CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	17	/	2020

Transaction ID : SA11AI.89330

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

B. MCCORD, WILLIAM, B, ,

Mailing Address P.O. BOX 339

City
SULTANAState
CAZip Code
93666FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	24	/	2020

Transaction ID : SA11AI.89384

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. MCKIBBEN, MASON, , ,Mailing Address 501 PORTOLA RD
APT 3ACity
PORTOLA VALLEYState
CAZip Code
94028FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
03	/	02	/	2020

Transaction ID : SA11AI.89574

Amount of Each Receipt this Period

250.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1000.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. MCMAHON, LINDA, E, ,

Mailing Address 1055 WASHINGTON BLVD.

City
STAMFORDState
CTZip Code
06901FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AMERICA FIRST ACTION, INCOccupation (for Individual)
CHAIR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

123014.40

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2020

Transaction ID : SA11AI.98210

Amount of Each Receipt this Period

123014.40

☐ Memo Item

IN-KIND - TRAVEL: AIR

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

B. MCPHERSON, KATHLEEN, , ,

Mailing Address 2050 CANAL ST

City
COMMERCE TOWNSHIPState
MIZip Code
48382FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TRADER JOESOccupation (for Individual)
RETAIL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 26 / 2020

Transaction ID : SA11AI.89644

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. MCPHERSON, KATHLEEN, , ,

Mailing Address 2050 CANAL ST

City
COMMERCE TOWNSHIPState
MIZip Code
48382FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TRADER JOESOccupation (for Individual)
RETAIL

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 26 / 2020

Transaction ID : SA11AI.89645

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

123514.40

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

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. MCPHERSON, KATHLEEN, , ,

Mailing Address 2050 CANAL ST

City
COMMERCE TOWNSHIP

State
MI

Zip Code
48382

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TRADER JOES

Occupation (for Individual)
RETAIL

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
03 / 29 / 2020

Transaction ID : SA11AI.89646

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. MCREYNOLDS, JAMES, , ,

Mailing Address 200 BRICKLE SPRINGS RD

City
CAVE CITY

State
AR

Zip Code
72521

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
TRUCKING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 22 / 2020

Transaction ID : SA11AI.89660

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

C. MCREYNOLDS, JAMES, , ,

Mailing Address 200 BRICKLE SPRINGS RD

City
CAVE CITY

State
AR

Zip Code
72521

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
TRUCKING

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 22 / 2020

Transaction ID : SA11AI.89661

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

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

850.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. MEDVE, JAKOB, , ,Mailing Address 3401 LEE PKWY
2203City
DALLASState
TXZip Code
75219FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYEDOccupation (for Individual)
REAL ESATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	13	/	2020

Transaction ID : SA11AI.89721

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. MELBY, MARYANN, , ,

Mailing Address 20322 92ND AVE S

City
KENTState
WAZip Code
98031FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
03	/	21	/	2020

Transaction ID : SA11AI.89764

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. MEYER, JOHN, , ,

Mailing Address 4617 AMBERLEY DR

City
BIRMINGHAMState
ALZip Code
35242FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

528.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	11	/	2020

Transaction ID : SA11AI.89908

Amount of Each Receipt this Period

500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

850.00

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 127 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. MILFORD, RONNIE, , ,

Mailing Address 2726 RED BLUFF RAMP RD

City
SAN ANGELO

State
TX

Zip Code
76904

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
INVESTMENT AND LAWN SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 18 / 2020

Transaction ID : SA11AI.89967

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. MILLARD, SILVI, , ,

Mailing Address 5310 SWISS AVE

City
DALLAS

State
TX

Zip Code
75214

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 ▼

251.00

Date of Receipt

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

Transaction ID : SA11AI.89980

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. MILLARD, SILVI, , ,

Mailing Address 5310 SWISS AVE

City
DALLAS

State
TX

Zip Code
75214

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 ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 09 / 2020

Transaction ID : SA11AI.89978

Amount of Each Receipt this Period

85.00

☐ Memo Item

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

435.00

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. MITCHELL, ROBERT, , ,

Mailing Address 4127 BEECHWOOD DR NW

City
ATLANTA

State
GA

Zip Code
30327

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
APPLIED CERAMICS

Occupation (for Individual)
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 28 / 2020

Transaction ID : SA11AI.90185

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. MITSCH, RONALD, , ,

Mailing Address 4 CHARLEY LAKE CT

City
NORTH OAKS

State
MN

Zip Code
55127

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 / D D / Y Y Y Y Y Y
01 / 22 / 2020

Transaction ID : SA11AI.90191

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. MOORE, DAVID, , ,

Mailing Address 17915 CEDAR CREEK CANYON

City
DALLAS

State
TX

Zip Code
75252

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
KNIGHTVEST MANAGEMENT

Occupation (for Individual)
REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 22 / 2020

Transaction ID : SA11AI.90351

Amount of Each Receipt this Period

20000.00

☐ Memo Item

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

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

20500.00

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

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. MULDER, LEON, , ,

Mailing Address 310 HUBBARD AVE

City
DOON

State
IA

Zip Code
51235

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MULDER EQUIPMENT SALES INC

Occupation (for Individual)
SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 18 / 2020

Transaction ID : SA11AI.90604

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. MURPHY, ANNE, , ,

Mailing Address 19951 COLLIER ST.

City

WOODLAND HILLS

State

CA

Zip Code

91364

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 ▼

212.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 13 / 2020

Transaction ID : SA11AI.90676

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. MURPHY, ANNE, , ,

Mailing Address 19951 COLLIER ST.

City

WOODLAND HILLS

State

CA

Zip Code

91364

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 ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 21 / 2020

Transaction ID : SA11AI.90688

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

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

160.00

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

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. MURRAY, MICHAEL, , ,

Mailing Address 1433 ROSELAWN AVE W

City
ROSEVILLE

State
MN

Zip Code
55113

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 / D D / Y Y Y Y Y
02 / 26 / 2020

Transaction ID : SA11AI.90594

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. MURRAY, MICHAEL, , ,

Mailing Address 1433 ROSELAWN AVE W

City
ROSEVILLE

State
MN

Zip Code
55113

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

M M / D D / Y Y Y Y Y
03 / 26 / 2020

Transaction ID : SA11AI.90595

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. NARVAEZ, NICK, , ,

Mailing Address 3626 EWING DR

City
MANVEL

State
TX

Zip Code
77578

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 11 / 2020

Transaction ID : SA11AI.90767

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

600.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. NICHOLSON, LAURA, , ,

Mailing Address 165 N HIDDENBROOKE DR

City
ADVANCEState
NCZip Code
27006FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

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
02	/	20	/	2020

Transaction ID : SA11AI.90949

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

B. OSBORNE, DAVID, , ,

Mailing Address 3323 FAIRWAY ST

City
CLAREMOREState
OKZip Code
74019FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
03	/	20	/	2020

Transaction ID : SA11AI.91302

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. OVERMAN, STEPHEN, , ,

Mailing Address PO BOX 312124

City
NEW BRAUNFELSState
TXZip Code
78131FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

387.00

Date of Receipt

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

Transaction ID : SA11AI.91368

Amount of Each Receipt this Period

245.00

☐ Memo Item

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

995.00

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

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. OVERMAN, STEPHEN, , ,

Mailing Address PO BOX 312124

City

NEW BRAUNFELS

State

TX

Zip Code

78131

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 ▼

388.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 10 / 2020

Transaction ID : SA11AI.91346

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

B. OVERMAN, STEPHEN, , ,

Mailing Address PO BOX 312124

City

NEW BRAUNFELS

State

TX

Zip Code

78131

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 ▼

393.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 10 / 2020

Transaction ID : SA11AI.91351

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

C. OVERMAN, STEPHEN, , ,

Mailing Address PO BOX 312124

City

NEW BRAUNFELS

State

TX

Zip Code

78131

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 ▼

403.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 10 / 2020

Transaction ID : SA11AI.91357

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

16.00

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. OVERMAN, STEPHEN, , ,

Mailing Address PO BOX 312124

City
NEW BRAUNFELS

State
TX

Zip Code
78131

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 ▼

408.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 12 / 2020

Transaction ID : SA11AI.91352

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

B. OVERMAN, STEPHEN, , ,

Mailing Address PO BOX 312124

City
NEW BRAUNFELS

State
TX

Zip Code
78131

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 ▼

409.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 16 / 2020

Transaction ID : SA11AI.91347

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

C. OVERMAN, STEPHEN, , ,

Mailing Address PO BOX 312124

City
NEW BRAUNFELS

State
TX

Zip Code
78131

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 ▼

414.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 16 / 2020

Transaction ID : SA11AI.91353

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

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

11.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. OVERMAN, STEPHEN, , ,

Mailing Address PO BOX 312124

City

NEW BRAUNFELS

State

TX

Zip Code

78131

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 ▼

419.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	16	/	2020

Transaction ID : SA11AI.91354

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

B. OVERMAN, STEPHEN, , ,

Mailing Address PO BOX 312124

City

NEW BRAUNFELS

State

TX

Zip Code

78131

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 ▼

429.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	16	/	2020

Transaction ID : SA11AI.91358

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. OVERMAN, STEPHEN, , ,

Mailing Address PO BOX 312124

City

NEW BRAUNFELS

State

TX

Zip Code

78131

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 ▼

439.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	20	/	2020

Transaction ID : SA11AI.91359

Amount of Each Receipt this Period

10.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

25.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 135 OF 290
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. OVERMAN, STEPHEN, , ,

Mailing Address PO BOX 312124

City

NEW BRAUNFELS

State

TX

Zip Code

78131

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 ▼

449.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
02	/	20	/	2020

Transaction ID : SA11AI.91360

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. OVERMAN, STEPHEN, , ,

Mailing Address PO BOX 312124

City

NEW BRAUNFELS

State

TX

Zip Code

78131

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 ▼

469.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
02	/	25	/	2020

Transaction ID : SA11AI.91365

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

C. OVERMAN, STEPHEN, , ,

Mailing Address PO BOX 312124

City

NEW BRAUNFELS

State

TX

Zip Code

78131

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 ▼

479.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
02	/	28	/	2020

Transaction ID : SA11AI.91361

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

40.00

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 136 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. P'POOL, MELINDA, GAIL, ,

Mailing Address 3316 NE 42ND CT

City
FORT LAUDERDALE

State
FL

Zip Code
33308

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 19 / 2020

Transaction ID : SA11AI.92240

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. PALMER, GEOFFREY, H., ,

Mailing Address 270 N. CANON DRIVE

City
BEVERLY HILLS

State
CA

Zip Code
90210

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
G. H. PALMER ASSOCIATES

Occupation (for Individual)
REAL ESTATE DEVELOPMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 05 / 2020

Transaction ID : SA11AI.91459

Amount of Each Receipt this Period

2000000.00

☐ Memo Item

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

C. PALMER, LINDA, , ,

Mailing Address 643 VENEZIA GRANDE DR

City
NAPLES

State
FL

Zip Code
34119

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 ▼

238.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 03 / 2020

Transaction ID : SA11AI.91455

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

2000150.00

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 137 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. PALUMBO, ANTHONY, , ,

Mailing Address 18234 OKLAHOMA CT

City
ORLAND PARK

State
IL

Zip Code
60467

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COUNTRY FINANCIAL

Occupation (for Individual)
INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 14 / 2020

Transaction ID : SA11AI.91462

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. PARRISH, MARK, , ,

Mailing Address 4811 PINE NEEDLE TRL

City
MINT HILL

State
NC

Zip Code
28227

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SHOE SHOW INC

Occupation (for Individual)
STORE PLANNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 09 / 2020

Transaction ID : SA11AI.91561

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. PECORA, JOHN, , ,

Mailing Address 130 MONTADALE DR

City
PRINCETON

State
NJ

Zip Code
08540

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 / D D / Y Y Y Y Y Y
03 / 13 / 2020

Transaction ID : SA11AI.91667

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

550.00

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. PEEL, JOE, , ,

Mailing Address 3615 WOODMONT BLVD

City
NASHVILLE

State
TN

Zip Code
37215

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 ▼

240.99

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2020

Transaction ID : SA11AI.91687

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. PERELMAN, WAYNE, , ,

Mailing Address 4737 SABLE PINE CIR

City
WEST PALM BEACH

State
FL

Zip Code
33417

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 26 / 2020

Transaction ID : SA11AI.91730

Amount of Each Receipt this Period

150.00

☐ Memo Item

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

C. PETERSON, ROBERT, , ,

Mailing Address 132 PERRAUD DR

City
FOLSOM

State
CA

Zip Code
95630

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STATE OF CALIFORNIA

Occupation (for Individual)
CHIEF INFORMATION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 19 / 2020

Transaction ID : SA11AI.91833

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

500.00

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

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

FOR LINE NUMBER: PAGE 139 OF 290

(check only one)

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. PICKARD, TINA, , ,

Mailing Address 430 PICKARD RD

City
FORT VALLEY

State
GA

Zip Code
31030

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PICKARD SALES CO

Occupation (for Individual)
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 07 / 2020

Transaction ID : SA11AI.91924

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. POPA, MILITA, , ,

Mailing Address 158 CYPRESS POINT RD

City
HALF MOON BAY

State
CA

Zip Code
94019

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 22 / 2020

Transaction ID : SA11AI.92125

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. PROPP, GAIL, , ,

Mailing Address 950 PARK AVE
APT 4B

City
NEW YORK

State
NY

Zip Code
10028

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 ▼

528.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2020

Transaction ID : SA11AI.92344

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

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

700.00

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

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

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(check only one)

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. PUCKETT, DAVID, , ,

Mailing Address 2161 PARC MONCEAU DR W

City
TUPELOState
MSZip Code
38804FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (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
03 / 29 / 2020

Transaction ID : SA11AI.92369

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. RASKU, WAYNE, , ,

Mailing Address 10 BEVERLY ST
APT 2City
OXFORDState
MAZip Code
01540FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DISABLEDOccupation (for Individual)
DISABLED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 26 / 2020

Transaction ID : SA11AI.92598

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. RASKU, WAYNE, , ,

Mailing Address 10 BEVERLY ST
APT 2City
OXFORDState
MAZip Code
01540FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DISABLEDOccupation (for Individual)
DISABLED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 28 / 2020

Transaction ID : SA11AI.92568

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

351.00

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

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(check only one)

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. RASKU, WAYNE, , ,

Mailing Address 10 BEVERLY ST
APT 2

City
OXFORD

State
MA

Zip Code
01540

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DISABLED

Occupation (for Individual)
DISABLED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 28 / 2020

Transaction ID : SA11AI.92580

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. RASKU, WAYNE, , ,

Mailing Address 10 BEVERLY ST
APT 2

City
OXFORD

State
MA

Zip Code
01540

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DISABLED

Occupation (for Individual)
DISABLED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 28 / 2020

Transaction ID : SA11AI.92581

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. RASKU, WAYNE, , ,

Mailing Address 10 BEVERLY ST
APT 2

City
OXFORD

State
MA

Zip Code
01540

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DISABLED

Occupation (for Individual)
DISABLED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 28 / 2020

Transaction ID : SA11AI.92583

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

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

35.00

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 142 OF 290

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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

A. RASKU, WAYNE, , ,

Mailing Address 10 BEVERLY ST
APT 2

City
OXFORD

State
MA

Zip Code
01540

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DISABLED

Occupation (for Individual)
DISABLED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2020

Transaction ID : SA11AI.92585

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RASKU, WAYNE, , ,

Mailing Address 10 BEVERLY ST
APT 2

City
OXFORD

State
MA

Zip Code
01540

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DISABLED

Occupation (for Individual)
DISABLED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

341.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 03 / 2020

Transaction ID : SA11AI.92569

Amount of Each Receipt this Period

1.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RASKU, WAYNE, , ,

Mailing Address 10 BEVERLY ST
APT 2

City
OXFORD

State
MA

Zip Code
01540

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DISABLED

Occupation (for Individual)
DISABLED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

346.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 03 / 2020

Transaction ID : SA11AI.92575

Amount of Each Receipt this Period

5.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

31.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RASKU, WAYNE, , ,

Mailing Address 10 BEVERLY ST
APT 2

City
OXFORD

State
MA

Zip Code
01540

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DISABLED

Occupation (for Individual)
DISABLED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

371.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 03 / 2020

Transaction ID : SA11AI.92586

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RASKU, WAYNE, , ,

Mailing Address 10 BEVERLY ST
APT 2

City
OXFORD

State
MA

Zip Code
01540

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DISABLED

Occupation (for Individual)
DISABLED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

471.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 03 / 2020

Transaction ID : SA11AI.92599

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RASKU, WAYNE, , ,

Mailing Address 10 BEVERLY ST
APT 2

City
OXFORD

State
MA

Zip Code
01540

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DISABLED

Occupation (for Individual)
DISABLED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

571.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 03 / 2020

Transaction ID : SA11AI.92600

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

225.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RASKU, WAYNE, , ,

Mailing Address 10 BEVERLY ST
APT 2

City
OXFORD

State
MA

Zip Code
01540

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DISABLED

Occupation (for Individual)
DISABLED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

572.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 06 / 2020

Transaction ID : SA11AI.92570

Amount of Each Receipt this Period

1.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RASKU, WAYNE, , ,

Mailing Address 10 BEVERLY ST
APT 2

City
OXFORD

State
MA

Zip Code
01540

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DISABLED

Occupation (for Individual)
DISABLED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

577.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 06 / 2020

Transaction ID : SA11AI.92576

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RASKU, WAYNE, , ,

Mailing Address 10 BEVERLY ST
APT 2

City
OXFORD

State
MA

Zip Code
01540

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DISABLED

Occupation (for Individual)
DISABLED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

602.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 06 / 2020

Transaction ID : SA11AI.92587

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

31.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RASKU, WAYNE, , ,

Mailing Address 10 BEVERLY ST
APT 2

City
OXFORD

State
MA

Zip Code
01540

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DISABLED

Occupation (for Individual)
DISABLED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

702.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 06 / 2020

Transaction ID : SA11AI.92601

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RASKU, WAYNE, , ,

Mailing Address 10 BEVERLY ST
APT 2

City
OXFORD

State
MA

Zip Code
01540

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DISABLED

Occupation (for Individual)
DISABLED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

703.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 19 / 2020

Transaction ID : SA11AI.92571

Amount of Each Receipt this Period

1.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RASKU, WAYNE, , ,

Mailing Address 10 BEVERLY ST
APT 2

City
OXFORD

State
MA

Zip Code
01540

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DISABLED

Occupation (for Individual)
DISABLED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

708.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 19 / 2020

Transaction ID : SA11AI.92577

Amount of Each Receipt this Period

5.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

106.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RASKU, WAYNE, , ,

Mailing Address 10 BEVERLY ST
APT 2

City
OXFORD

State
MA

Zip Code
01540

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DISABLED

Occupation (for Individual)
DISABLED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

733.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 19 / 2020

Transaction ID : SA11AI.92588

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RASKU, WAYNE, , ,

Mailing Address 10 BEVERLY ST
APT 2

City
OXFORD

State
MA

Zip Code
01540

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DISABLED

Occupation (for Individual)
DISABLED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

768.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 19 / 2020

Transaction ID : SA11AI.92594

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RASKU, WAYNE, , ,

Mailing Address 10 BEVERLY ST
APT 2

City
OXFORD

State
MA

Zip Code
01540

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DISABLED

Occupation (for Individual)
DISABLED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

773.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2020

Transaction ID : SA11AI.92578

Amount of Each Receipt this Period

5.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

65.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RASKU, WAYNE, , ,

Mailing Address 10 BEVERLY ST
APT 2

City
OXFORD

State
MA

Zip Code
01540

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DISABLED

Occupation (for Individual)
DISABLED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

798.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2020

Transaction ID : SA11AI.92589

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RASKU, WAYNE, , ,

Mailing Address 10 BEVERLY ST
APT 2

City
OXFORD

State
MA

Zip Code
01540

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DISABLED

Occupation (for Individual)
DISABLED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

823.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2020

Transaction ID : SA11AI.92590

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RASKU, WAYNE, , ,

Mailing Address 10 BEVERLY ST
APT 2

City
OXFORD

State
MA

Zip Code
01540

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DISABLED

Occupation (for Individual)
DISABLED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

848.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2020

Transaction ID : SA11AI.92591

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RASKU, WAYNE, , ,

Mailing Address 10 BEVERLY ST
APT 2

City
OXFORD

State
MA

Zip Code
01540

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DISABLED

Occupation (for Individual)
DISABLED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

898.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 24 / 2020

Transaction ID : SA11AI.92595

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RASKU, WAYNE, , ,

Mailing Address 10 BEVERLY ST
APT 2

City
OXFORD

State
MA

Zip Code
01540

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DISABLED

Occupation (for Individual)
DISABLED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

948.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 24 / 2020

Transaction ID : SA11AI.92596

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RASKU, WAYNE, , ,

Mailing Address 10 BEVERLY ST
APT 2

City
OXFORD

State
MA

Zip Code
01540

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DISABLED

Occupation (for Individual)
DISABLED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

949.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 27 / 2020

Transaction ID : SA11AI.92572

Amount of Each Receipt this Period

1.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

101.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RASKU, WAYNE, , ,

Mailing Address 10 BEVERLY ST
APT 2

City
OXFORD

State
MA

Zip Code
01540

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DISABLED

Occupation (for Individual)
DISABLED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

954.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 27 / 2020

Transaction ID : SA11AI.92579

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RASKU, WAYNE, , ,

Mailing Address 10 BEVERLY ST
APT 2

City
OXFORD

State
MA

Zip Code
01540

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DISABLED

Occupation (for Individual)
DISABLED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

979.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 27 / 2020

Transaction ID : SA11AI.92592

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RASKU, WAYNE, , ,

Mailing Address 10 BEVERLY ST
APT 2

City
OXFORD

State
MA

Zip Code
01540

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DISABLED

Occupation (for Individual)
DISABLED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1079.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 27 / 2020

Transaction ID : SA11AI.92602

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

130.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. REEVES, SCOTT, , ,

Mailing Address 240 11TH ST

City
RAGLAND

State
AL

Zip Code
35131

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NATIONAL CEMENT

Occupation (for Individual)
CEMS TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 27 / 2020

Transaction ID : SA11AI.92726

Amount of Each Receipt this Period

240.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. REVETT, ELENA, , ,

Mailing Address 1606 ABACO DR
C3

City

COCONUT CREEK

State
FL

Zip Code
33066

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 ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 09 / 2020

Transaction ID : SA11AI.92810

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. REVETT, ELENA, , ,

Mailing Address 1606 ABACO DR
C3

City

COCONUT CREEK

State
FL

Zip Code
33066

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 ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2020

Transaction ID : SA11AI.92805

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

315.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. REVIE, CHARLES, , ,

Mailing Address 720 SUNDOWN CT

City
LAS CRUCES

State
NM

Zip Code
88011

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 / D D / Y Y Y Y Y Y
03 / 24 / 2020

Transaction ID : SA11AI.92818

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RIPAK, LAWRENCE, , ,

Mailing Address 5 TAMMI CT

City
KINGS PARK

State
NY

Zip Code
11754

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 ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 13 / 2020

Transaction ID : SA11AI.92998

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RIPAK, LAWRENCE, , ,

Mailing Address 5 TAMMI CT

City
KINGS PARK

State
NY

Zip Code
11754

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 ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 28 / 2020

Transaction ID : SA11AI.92999

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

750.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RIPA, LAWRENCE, , ,

Mailing Address 5 TAMMI CT

City
KINGS PARK

State
NY

Zip Code
11754

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 ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 29 / 2020

Transaction ID : SA11AI.92997

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROBERTSON, ROGER, , ,

Mailing Address 8113 SUMMIT ST

City
KANSAS CITY

State
MO

Zip Code
64117

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COMMERCE BANK

Occupation (for Individual)
COMPUTER PROGRAMMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 26 / 2020

Transaction ID : SA11AI.93115

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROBERTSON, ROGER, , ,

Mailing Address 8113 SUMMIT ST

City
KANSAS CITY

State
MO

Zip Code
64117

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COMMERCE BANK

Occupation (for Individual)
COMPUTER PROGRAMMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 29 / 2020

Transaction ID : SA11AI.93113

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

400.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ROBERTSON, ROGER, , ,

Mailing Address 8113 SUMMIT ST

City
KANSAS CITY

State
MO

Zip Code
64117

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COMMERCE BANK

Occupation (for Individual)
COMPUTER PROGRAMMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 25 / 2020

Transaction ID : SA11AI.93108

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROBINS, WALTER, , , III

Mailing Address 3001 W BINNICKER AVE

City
TAMPA

State
FL

Zip Code
33611

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
G4S SECURE SOLUTIONS

Occupation (for Individual)
SECURITY OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 28 / 2020

Transaction ID : SA11AI.93132

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROBINS, WALTER, , , III

Mailing Address 3001 W BINNICKER AVE

City
TAMPA

State
FL

Zip Code
33611

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
G4S SECURE SOLUTIONS

Occupation (for Individual)
SECURITY OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 29 / 2020

Transaction ID : SA11AI.93130

Amount of Each Receipt this Period

75.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

185.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RODACK, MARK, , ,

Mailing Address 16051 COLLINS AVENUE

City

SUNNY ISLES BEACH

State

FL

Zip Code

33160

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 18 / 2020

Transaction ID : SA11AI.93181

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RODACK, MARK, , ,

Mailing Address 16051 COLLINS AVENUE

City

SUNNY ISLES BEACH

State

FL

Zip Code

33160

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 28 / 2020

Transaction ID : SA11AI.93182

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SAILER, BECKY, , ,

Mailing Address P.O. BOX 545

City

SUPERIOR

State

MT

Zip Code

59872

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 ▼

205.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 26 / 2020

Transaction ID : SA11AI.93675

Amount of Each Receipt this Period

5.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

205.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 155 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SAILER, BECKY, , ,

Mailing Address P.O. BOX 545

City
SUPERIOR

State
MT

Zip Code
59872

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 ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 26 / 2020

Transaction ID : SA11AI.93682

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCARPA, JOHN, F, ,

Mailing Address 1676 S OCEAN BLVD

City
PALM BEACH

State
FL

Zip Code
33480

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 24 / 2020

Transaction ID : SA11AI.93869

Amount of Each Receipt this Period

100000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCHADE, DONALD, , ,

Mailing Address 2576 LANTZ RD

City
BEAVERCREEK

State
OH

Zip Code
45434

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 / D D / Y Y Y Y Y Y
03 / 18 / 2020

Transaction ID : SA11AI.93888

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100350.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SCHAFFNIT, BOBBIE, , ,

Mailing Address PO BOX 1385

City
ROCKINGHAM

State
NC

Zip Code
28380

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
03 / 23 / 2020

Transaction ID : SA11AI.93899

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCHAFFNIT, BOBBIE, , ,

Mailing Address PO BOX 1385

City
ROCKINGHAM

State
NC

Zip Code
28380

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 ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 23 / 2020

Transaction ID : SA11AI.93900

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCHMITT, ALFONS, J, ,

Mailing Address 125 PARC MONCEAU

City
PALM BEACH

State
FL

Zip Code
33480

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

30000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 19 / 2020

Transaction ID : SA11AI.93994

Amount of Each Receipt this Period

30000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

30200.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 157 OF 290
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SCHUBERT, WARREN, , ,

Mailing Address 3413 CORTINA CIR

City
COLORADO SPRINGSState
COZip Code
80918FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ORACLE/UNIVERSITY OF COLORADOOccupation (for Individual)
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	28	/	2020

Transaction ID : SA11AI.94051

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCHUFF, NANCY, , ,

Mailing Address 14412 N COTTON LN

City
SURPRISEState
AZZip Code
85388FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	23	/	2020

Transaction ID : SA11AI.94062

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCHULER, BETH, , ,

Mailing Address 1004 PEBBLE BROOK

City
NASHVILLEState
TNZip Code
37221FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYEDOccupation (for Individual)
PET CARE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	21	/	2020

Transaction ID : SA11AI.94067

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

400.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SCHULZ, REINHARD, , ,

Mailing Address 4849 NORTHRIDGE DR

City
SOMIS

State
CA

Zip Code
93066

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 ▼

205.70

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 22 / 2020

Transaction ID : SA11AI.94083

Amount of Each Receipt this Period

88.85

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCHWARZMAN, STEPHEN, A, ,

Mailing Address 740 PARK AVE

City
NEW YORK

State
NY

Zip Code
10021

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BLACKSTONE

Occupation (for Individual)
CHAIRMAN & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 31 / 2020

Transaction ID : SA11AI.94122

Amount of Each Receipt this Period

3000000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCRANTON, CHRISTOPHER, S, ,

Mailing Address 135 LOST BRIDGE DR

City
PALM BEACH GARDENS

State
FL

Zip Code
33410

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 04 / 2020

Transaction ID : SA11AI.94175

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3000338.85

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SEALE, ROBERT, , ,

Mailing Address 6627 WANITA PL

City
HOUSTON

State
TX

Zip Code
77007

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 04 / 2020

Transaction ID : SA11AI.94185

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SEALE, ROBERT, , ,

Mailing Address 6627 WANITA PL

City
HOUSTON

State
TX

Zip Code
77007

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 04 / 2020

Transaction ID : SA11AI.94186

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SEALE, ROBERT, , ,

Mailing Address 280 CAMINO SUR

City
PALM SPRINGS

State
CA

Zip Code
92262

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 22 / 2020

Transaction ID : SA11AI.94183

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1100.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SEE, JAMES, , ,

Mailing Address P.O. BOX 4421

City
CARLSBADState
CAZip Code
92018FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	5		2	0	2	0

Transaction ID : SA11AI.94231

Amount of Each Receipt this Period

245.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SEE, JAMES, , ,

Mailing Address P.O. BOX 4421

City
CARLSBADState
CAZip Code
92018FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	5		2	0	2	0

Transaction ID : SA11AI.94228

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SEE, JAMES, , ,

Mailing Address P.O. BOX 4421

City
CARLSBADState
CAZip Code
92018FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	5		2	0	2	0

Transaction ID : SA11AI.94230

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

305.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 161 OF 290
(check only one)

<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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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SHAIO, JACK, , ,

Mailing Address 19 COOLIDGE RD

City
WINCHESTERState
MAZip Code
01890FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		13		2020

Transaction ID : SA11AI.94332

Amount of Each Receipt this Period

3000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SHAIO, JACK, , ,

Mailing Address 19 COOLIDGE RD

City
WINCHESTERState
MAZip Code
01890FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		06		2020

Transaction ID : SA11AI.94333

Amount of Each Receipt this Period

4000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SIMON, ALLEN, , ,

Mailing Address 1383 N CRISS ST

City
CHANDLERState
AZZip Code
85226FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		13		2020

Transaction ID : SA11AI.94581

Amount of Each Receipt this Period

100.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

7100.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SLOWOWITZ, ISOBEL, C.,

Mailing Address 313 SYLBERT DR

City
KINGSTON

State
PA

Zip Code
18704

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 ▼

50000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 04 / 2020

Transaction ID : SA11AI.94703

Amount of Each Receipt this Period

50000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SLYPHARMA LLC

Mailing Address 223 PERUVIAN AVE

City
PALM BEACH

State
FL

Zip Code
33480

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

M M / D D / Y Y Y Y Y Y
01 / 21 / 2020

Transaction ID : SA11AI.77001

Amount of Each Receipt this Period

50000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SMENT, JEFF, , ,

Mailing Address W314 N390 LARA LN

City
DELAFIELD

State
WI

Zip Code
53018

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ISC, INC.

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 19 / 2020

Transaction ID : SA11AI.94736

Amount of Each Receipt this Period

200.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 163 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SMENT, JEFF, , ,

Mailing Address W314 N390 LARA LN

City
DELAFIELD

State
WI

Zip Code
53018

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ISC, INC.

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 19 / 2020

Transaction ID : SA11AI.94737

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SMID, MARTIN, , ,

Mailing Address 1008 GLENLAKE AVE

City
PARK RIDGE

State
IL

Zip Code
60068

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
CONTRACTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

574.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 22 / 2020

Transaction ID : SA11AI.94746

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SMITH, DICK, , ,

Mailing Address 25 LEONARD TRL
APT 412

City
FORT WORTH

State
TX

Zip Code
76114

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 / D D / Y Y Y Y Y Y
03 / 25 / 2020

Transaction ID : SA11AI.94934

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

950.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SMITH, JERRY, , ,

Mailing Address 269058 OLD TERLTON RD

City
TERLTON

State
OK

Zip Code
74081

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 / D D / Y Y Y Y Y Y
03 / 14 / 2020

Transaction ID : SA11AI.94907

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SMITH, JERRY, , ,

Mailing Address 269058 OLD TERLTON RD

City
TERLTON

State
OK

Zip Code
74081

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 ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 25 / 2020

Transaction ID : SA11AI.94930

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SMITH, ROY, , ,

Mailing Address 7566 W DIVISION RD

City
LARWILL

State
IN

Zip Code
46764

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 19 / 2020

Transaction ID : SA11AI.94929

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SNYDER, CHAD, , ,

Mailing Address 318 COMSTOCK DR

City
ELGIN

State
IL

Zip Code
60124

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 21 / 2020

Transaction ID : SA11AI.94973

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SNYDER, CHAD, , ,

Mailing Address 318 COMSTOCK DR

City
ELGIN

State
IL

Zip Code
60124

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 29 / 2020

Transaction ID : SA11AI.94966

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SOUKUP, ELAINE, , ,

Mailing Address 298 W LIBERTY LN

City
GILBERT

State
AZ

Zip Code
85233

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 ▼

203.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 26 / 2020

Transaction ID : SA11AI.95057

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

330.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SOUKUP, ELAINE, , ,

Mailing Address 298 W LIBERTY LN

City
GILBERT

State
AZ

Zip Code
85233

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 ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 26 / 2020

Transaction ID : SA11AI.95054

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SOUKUP, ELAINE, , ,

Mailing Address 298 W LIBERTY LN

City
GILBERT

State
AZ

Zip Code
85233

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 ▼

258.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 26 / 2020

Transaction ID : SA11AI.95058

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SOUTHWOOD, ROSEMARY, , ,

Mailing Address 1811 SE CLAYBOURNE ST

City
PORTLAND

State
OR

Zip Code
97202

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 / D D / Y Y Y Y Y Y
02 / 01 / 2020

Transaction ID : SA11AI.95074

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

305.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SPARKS, BROOKE, , ,

Mailing Address 2476 CARTERS GROVE LN

City
GERMANTOWN

State
TN

Zip Code
38138

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 / D D / Y Y Y Y Y Y
03 / 09 / 2020

Transaction ID : SA11AI.95123

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SPIEGEL, JOSEPH, , ,

Mailing Address 3465 N. PINES WAY
#104-25000

City
WILSON

State
WY

Zip Code
83014

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DALEK CAPITAL MANAGEMENT

Occupation (for Individual)
FINANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 25 / 2020

Transaction ID : SA11AI.95150

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STARCEVICH, KIEL, , ,

Mailing Address 1286 NICOLAS LN

City
NORTH LIBERTY

State
IA

Zip Code
52317

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PIZZAS

Occupation (for Individual)
DIRECT STORE DELIVERY

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

235.99

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 19 / 2020

Transaction ID : SA11AI.95243

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

550.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STEPHENS, WARREN, A, ,

Mailing Address 111 CENTER ST.

City
LITTLE ROCKState
ARZip Code
72201FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STEPHENS, INC.Occupation (for Individual)
PRESIDENT AND CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000000.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
01	28	2020

Transaction ID : SA11AI.95323

Amount of Each Receipt this Period

1000000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STEVENS, LINDA, , ,

Mailing Address 150 W HEMLOCK PL

City
ELMAState
WAZip Code
98541FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
03	26	2020

Transaction ID : SA11AI.95346

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STEWART, JAMES, , ,Mailing Address 205 E 92ND ST
APT 37BCity
NEW YORKState
NYZip Code
10128FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
01	23	2020

Transaction ID : SA11AI.95380

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

1001020.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STORM, FRANCIS, , , III

Mailing Address 3408 THORNHILL CT

City

EL DORADO HILLS

State

CA

Zip Code

95762

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		26		2020

Transaction ID : SA11AI.95453

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STOUT, JANET, , ,

Mailing Address 1353 AWATUKEE TRL

City

HUDSON

State

WI

Zip Code

54016

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF-EMPLOYED

Occupation (for Individual)

BOOKKEEPER

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		05		2020

Transaction ID : SA11AI.95471

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STOUT, JANET, , ,

Mailing Address 1353 AWATUKEE TRL

City

HUDSON

State

WI

Zip Code

54016

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF-EMPLOYED

Occupation (for Individual)

BOOKKEEPER

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

505.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		29		2020

Transaction ID : SA11AI.95468

Amount of Each Receipt this Period

5.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

605.00

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STOUT, RICHARD, , ,

Mailing Address 1353 AWATUKEE TRAIL

City
HUDSON

State
WI

Zip Code
54016

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
RENTALS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 29 / 2020

Transaction ID : SA11AI.95470

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STRIBULA, JOSEPH, , ,

Mailing Address 8 TOBOGGAN HILL PATH

City

COLD SPRING HARBOR

State

NY

Zip Code

11724

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 29 / 2020

Transaction ID : SA11AI.95498

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STROHL, LARRY, , ,

Mailing Address 6657 S FRANKLIN ST

City

CENTENNIAL

State

CO

Zip Code

80121

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 ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 22 / 2020

Transaction ID : SA11AI.95515

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

450.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STROHL, LARRY, , ,

Mailing Address 6657 S FRANKLIN ST

City
CENTENNIAL

State
CO

Zip Code
80121

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 ▼

301.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 22 / 2020

Transaction ID : SA11AI.95516

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SWANSTROM, GORDON, , ,

Mailing Address 5410 ZARA AVE

City
RICHMOND

State
CA

Zip Code
94805

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 22 / 2020

Transaction ID : SA11AI.95624

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TABB, MARVIN, , ,

Mailing Address 16440 KELLY COVE DR

City
FORT MYERS

State
FL

Zip Code
33908

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 ▼

256.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 27 / 2020

Transaction ID : SA11AI.95691

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

450.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TARAN, OLGA, , ,

Mailing Address 16130 SE 5TH ST

City
BELLEVUE

State
WA

Zip Code
98008

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UNEMPLOYED

Occupation (for Individual)
UNEMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.98

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 21 / 2020

Transaction ID : SA11AI.95753

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TARAN, OLGA, , ,

Mailing Address 16130 SE 5TH ST

City
BELLEVUE

State
WA

Zip Code
98008

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UNEMPLOYED

Occupation (for Individual)
UNEMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.98

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 21 / 2020

Transaction ID : SA11AI.95755

Amount of Each Receipt this Period

28.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TARAN, OLGA, , ,

Mailing Address 16130 SE 5TH ST

City
BELLEVUE

State
WA

Zip Code
98008

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UNEMPLOYED

Occupation (for Individual)
UNEMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

267.98

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 21 / 2020

Transaction ID : SA11AI.95756

Amount of Each Receipt this Period

28.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

81.00

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)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TARAN, OLGA, , ,

Mailing Address 16130 SE 5TH ST

City
BELLEVUE

State
WA

Zip Code
98008

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UNEMPLOYED

Occupation (for Individual)
UNEMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.98

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 28 / 2020

Transaction ID : SA11AI.95735

Amount of Each Receipt this Period

1.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TARAN, OLGA, , ,

Mailing Address 16130 SE 5TH ST

City
BELLEVUE

State
WA

Zip Code
98008

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UNEMPLOYED

Occupation (for Individual)
UNEMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.97

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 28 / 2020

Transaction ID : SA11AI.95738

Amount of Each Receipt this Period

4.99

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TARAN, OLGA, , ,

Mailing Address 16130 SE 5TH ST

City
BELLEVUE

State
WA

Zip Code
98008

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UNEMPLOYED

Occupation (for Individual)
UNEMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

278.97

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 28 / 2020

Transaction ID : SA11AI.95743

Amount of Each Receipt this Period

5.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10.99

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TARAN, OLGA, , ,

Mailing Address 16130 SE 5TH ST

City
BELLEVUEState
WAZip Code
98008FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UNEMPLOYEDOccupation (for Individual)
UNEMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.97

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 28 / 2020

Transaction ID : SA11AI.95744

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TARAN, OLGA, , ,

Mailing Address 16130 SE 5TH ST

City
BELLEVUEState
WAZip Code
98008FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UNEMPLOYEDOccupation (for Individual)
UNEMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.97

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 28 / 2020

Transaction ID : SA11AI.95747

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TARAN, OLGA, , ,

Mailing Address 16130 SE 5TH ST

City
BELLEVUEState
WAZip Code
98008FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UNEMPLOYEDOccupation (for Individual)
UNEMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

323.97

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 28 / 2020

Transaction ID : SA11AI.95754

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

45.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TAUBE, TAD, , ,

Mailing Address 1050 RALSTON AVE

City
BELMONT

State
CA

Zip Code
94002

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TAUBE INVESTMENTS, INC.

Occupation (for Individual)
CHAIRMAN/CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 27 / 2020

Transaction ID : SA11AI.95776

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TAUBE, TAD, , ,

Mailing Address 1050 RALSTON AVE

City
BELMONT

State
CA

Zip Code
94002

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TAUBE INVESTMENTS, INC.

Occupation (for Individual)
CHAIRMAN/CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 28 / 2020

Transaction ID : SA11AI.95777

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TEGETHOFF, LINDA, , ,

Mailing Address 3603 INVERNESS DR

City
HUTCHINSON

State
KS

Zip Code
67503

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 / D D / Y Y Y Y Y Y
02 / 01 / 2020

Transaction ID : SA11AI.95829

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

750.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TEGETHOFF, LINDA, , ,

Mailing Address 3603 INVERNESS DR

City
HUTCHINSON

State
KS

Zip Code
67503

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 ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 14 / 2020

Transaction ID : SA11AI.95828

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TENNEY, DUNCAN, , ,

Mailing Address 26 W CHEYENNE MTN BLVD

City
COLORADO SPRINGS

State
CO

Zip Code
80906

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DVE, LLC

Occupation (for Individual)
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 25 / 2020

Transaction ID : SA11AI.95842

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TENNEY, DUNCAN, , ,

Mailing Address 26 W CHEYENNE MTN BLVD

City
COLORADO SPRINGS

State
CO

Zip Code
80906

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DVE, LLC

Occupation (for Individual)
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 26 / 2020

Transaction ID : SA11AI.95843

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

600.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TENNEY, DUNCAN, , ,

Mailing Address 26 W CHEYENNE MTN BLVD

City
 COLORADO SPRINGS

State
 CO

Zip Code
 80906

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
 DVE, LLC

Occupation (for Individual)
 EXECUTIVE

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
 03 / 10 / 2020

Transaction ID : SA11AI.95844

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TENNEY, DUNCAN, , ,

Mailing Address 26 W CHEYENNE MTN BLVD

City
 COLORADO SPRINGS

State
 CO

Zip Code
 80906

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
 DVE, LLC

Occupation (for Individual)
 EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 11 / 2020

Transaction ID : SA11AI.95845

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TENNEY, DUNCAN, , ,

Mailing Address 26 W CHEYENNE MTN BLVD

City
 COLORADO SPRINGS

State
 CO

Zip Code
 80906

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
 DVE, LLC

Occupation (for Individual)
 EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 26 / 2020

Transaction ID : SA11AI.95846

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

750.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. THOMASON, WILLIAM, , ,

Mailing Address 3915 THOMASSON MILL RD

City
GOODVIEW

State
VA

Zip Code
24095

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

M M / D D / Y Y Y Y Y Y
03 / 28 / 2020

Transaction ID : SA11AI.95945

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TILLEY, STEVEN, , ,

Mailing Address 130 WINDERMERE DR

City
PALMYRA

State
PA

Zip Code
17078

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 / D D / Y Y Y Y Y Y
03 / 20 / 2020

Transaction ID : SA11AI.96051

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TRACY, P, J, ,

Mailing Address 1025 PARK PL
APT 154

City
MISHAWAKA

State
IN

Zip Code
46545

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 / D D / Y Y Y Y Y Y
03 / 18 / 2020

Transaction ID : SA11AI.96199

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1600.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TRACY, P J, , ,

Mailing Address 1025 PARK PL
APT 154

City
MISHAWAKA

State
IN

Zip Code
46545

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 / D D / Y Y Y Y Y Y
02 / 18 / 2020

Transaction ID : SA11AI.96196

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TRACY, P J, , ,

Mailing Address 1025 PARK PL
APT 154

City
MISHAWAKA

State
IN

Zip Code
46545

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

M M / D D / Y Y Y Y Y Y
02 / 18 / 2020

Transaction ID : SA11AI.96197

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TRAMMER, JEROME, , ,

Mailing Address 7467 MISSION GORGE RD
#50

City
SANTEE

State
CA

Zip Code
92071

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 12 / 2020

Transaction ID : SA11AI.96207

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TRAMMER, JEROME, , ,

Mailing Address 7467 MISSION GORGE RD
#50

City
SANTEE

State
CA

Zip Code
92071

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 18 / 2020

Transaction ID : SA11AI.96205

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TRAPP, BETSY, , ,

Mailing Address 350 WHISPERING CREEK RD

City
WEST MONROE

State
LA

Zip Code
71291

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 ▼

233.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 28 / 2020

Transaction ID : SA11AI.96234

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TRAPP, BETSY, , ,

Mailing Address 350 WHISPERING CREEK RD

City
WEST MONROE

State
LA

Zip Code
71291

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 ▼

264.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 30 / 2020

Transaction ID : SA11AI.96231

Amount of Each Receipt this Period

31.56

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

131.56

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. UIHLEIN, ELIZABETH, A, ,

Mailing Address 1396 N WAUKEGAN RD

City
LAKE FORESTState
ILZip Code
60045-1147FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ULINEOccupation (for Individual)
PRESIDENT

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
03 / 12 / 2020

Transaction ID : SA11AI.96417

Amount of Each Receipt this Period

250000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. UIHLEIN, ELIZABETH, A, ,

Mailing Address 1396 N WAUKEGAN RD

City
LAKE FORESTState
ILZip Code
60045-1147FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ULINEOccupation (for Individual)
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 17 / 2020

Transaction ID : SA11AI.96418

Amount of Each Receipt this Period

250000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. UIHLEIN, RICHARD, , ,

Mailing Address 12575 ULINE DR

City
PLEASANT PRAIRIEState
WIZip Code
53158FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ULINEOccupation (for Individual)
CEO

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
03 / 04 / 2020

Transaction ID : SA11AI.96416

Amount of Each Receipt this Period

250000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

750000.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ULOTH, RAYMOND, , ,

Mailing Address 669 CAMERON COURT

City
KENNER

State
LA

Zip Code
70065

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 ▼

230.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2020

Transaction ID : SA11AI.96425

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VAN DENEND, GARY, , ,

Mailing Address 133 N 3RD ST

City
RIPLEY

State
OH

Zip Code
45167

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GLENRO, INC.

Occupation (for Individual)
MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 12 / 2020

Transaction ID : SA11AI.96520

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VAN DENEND, GARY, , ,

Mailing Address 133 N 3RD ST

City
RIPLEY

State
OH

Zip Code
45167

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GLENRO, INC.

Occupation (for Individual)
MANAGEMENT

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
02 / 25 / 2020

Transaction ID : SA11AI.96521

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

700.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VANDER ELS, BRUCE, , ,

Mailing Address 905 CHICKADEE DR

City
PORT ORANGE

State
FL

Zip Code
32127

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 ▼

211.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 16 / 2020

Transaction ID : SA11AI.96558

Amount of Each Receipt this Period

28.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VANDER ELS, BRUCE, , ,

Mailing Address 905 CHICKADEE DR

City
PORT ORANGE

State
FL

Zip Code
32127

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 ▼

246.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 16 / 2020

Transaction ID : SA11AI.96559

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VANDER ELS, BRUCE, , ,

Mailing Address 905 CHICKADEE DR

City
PORT ORANGE

State
FL

Zip Code
32127

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 ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 27 / 2020

Transaction ID : SA11AI.96556

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

83.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VANDER ELS, BRUCE, , ,

Mailing Address 905 CHICKADEE DR

City
PORT ORANGE

State
FL

Zip Code
32127

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 ▼

271.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 29 / 2020

Transaction ID : SA11AI.96555

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VANDER ELS, BRUCE, , ,

Mailing Address 905 CHICKADEE DR

City
PORT ORANGE

State
FL

Zip Code
32127

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 ▼

321.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 29 / 2020

Transaction ID : SA11AI.96563

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VAUGHN, MELINDA, , ,

Mailing Address 7 LICK FORK RD

City
SCARBRO

State
WV

Zip Code
25917

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 ▼

202.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 08 / 2020

Transaction ID : SA11AI.96616

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VAUGHN, MELINDA, , ,

Mailing Address 7 LICK FORK RD

City
SCARBRO

State
WV

Zip Code
25917

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 ▼

222.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 08 / 2020

Transaction ID : SA11AI.96617

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VAUGHN, MELINDA, , ,

Mailing Address 7 LICK FORK RD

City
SCARBRO

State
WV

Zip Code
25917

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 ▼

241.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 10 / 2020

Transaction ID : SA11AI.96613

Amount of Each Receipt this Period

19.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VAUGHN, MELINDA, , ,

Mailing Address 7 LICK FORK RD

City
SCARBRO

State
WV

Zip Code
25917

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 ▼

261.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 10 / 2020

Transaction ID : SA11AI.96618

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

59.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VAUGHN, MELINDA, , ,

Mailing Address 7 LICK FORK RD

City
SCARBRO

State
WV

Zip Code
25917

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 ▼

262.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 23 / 2020

Transaction ID : SA11AI.96611

Amount of Each Receipt this Period

1.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VAUGHN, MELINDA, , ,

Mailing Address 7 LICK FORK RD

City
SCARBRO

State
WV

Zip Code
25917

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 ▼

297.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 23 / 2020

Transaction ID : SA11AI.96624

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WEBER, SHIRLEY, , ,

Mailing Address 7578 CYPRESS AVE

City
FONTANA

State
CA

Zip Code
92336

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 ▼

221.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2020

Transaction ID : SA11AI.97082

Amount of Each Receipt this Period

150.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

186.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WEBER, SHIRLEY, , ,

Mailing Address 7578 CYPRESS AVE

City
FONTANA

State
CA

Zip Code
92336

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 ▼

231.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 14 / 2020

Transaction ID : SA11AI.97076

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WEBER, SHIRLEY, , ,

Mailing Address 7578 CYPRESS AVE

City
FONTANA

State
CA

Zip Code
92336

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 ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 28 / 2020

Transaction ID : SA11AI.97079

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WEBER, SHIRLEY, , ,

Mailing Address 7578 CYPRESS AVE

City
FONTANA

State
CA

Zip Code
92336

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 ▼

416.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 28 / 2020

Transaction ID : SA11AI.97083

Amount of Each Receipt this Period

150.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

195.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WEIDNER GOLDSTEIN, JEAN, , ,

Mailing Address 990 BLVD OF THE ARTS
#601

City
SARASOTA

State
FL

Zip Code
34236

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 / D D / Y Y Y Y Y
03 / 04 / 2020

Transaction ID : SA11AI.97108

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WEIDNER GOLDSTEIN, JEAN, , ,

Mailing Address 990 BLVD OF THE ARTS
#601

City
SARASOTA

State
FL

Zip Code
34236

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 ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 13 / 2020

Transaction ID : SA11AI.97107

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WHITE, B, , ,

Mailing Address 9176 SYDNEY LN

City
BRENTWOOD

State
TN

Zip Code
37027

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 ▼

200.90

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 12 / 2020

Transaction ID : SA11AI.97307

Amount of Each Receipt this Period

100.45

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

450.45

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WHITESIDE, BRET, , ,

Mailing Address 3048 VALLEY OF HEARTS DELIGHT PL

City
SAN JOSE

State
CA

Zip Code
95136

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
ENGINEERING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 29 / 2020

Transaction ID : SA11AI.97320

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WHITING, JUDITH, , ,

Mailing Address 4764 CALLE LAS BRISAS

City
SANTA BARBARA

State
CA

Zip Code
93110

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 / D D / Y Y Y Y Y Y
01 / 18 / 2020

Transaction ID : SA11AI.97322

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WIMER, WILLIAM, , ,

Mailing Address 11 DOE RUN LN

City
LANCASTER

State
PA

Zip Code
17603

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 29 / 2020

Transaction ID : SA11AI.97567

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

450.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WOLD, ELAINE, J, ,

Mailing Address 1515 S FEDERAL HWY STE 201

City
BOCA RATON

State
FL

Zip Code
33432

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 ▼

500000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 03 / 2020

Transaction ID : SA11AI.97624

Amount of Each Receipt this Period

500000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WOLFF, NANCY, , ,

Mailing Address 3407 PRINCEWOOD CT

City
ARLINGTON

State
TX

Zip Code
76016

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UT ARLINGTON

Occupation (for Individual)
MATH ADJUNCT PROFESSOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 19 / 2020

Transaction ID : SA11AI.97641

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WOODBURY, ROGER, , ,

Mailing Address 38401 S SKYLINE DR

City
TUCSON

State
AZ

Zip Code
85739

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 / D D / Y Y Y Y Y Y
03 / 14 / 2020

Transaction ID : SA11AI.97696

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

500150.00

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Use separate schedule(s)
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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WOODHOUSE, MARILYN, , ,

Mailing Address 650 RAMBLEWOOD RD

City
HOUSTON

State
TX

Zip Code
77079

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 / D D / Y Y Y Y Y
01 / 23 / 2020

Transaction ID : SA11AI.97707

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WOODHOUSE, MARILYN, , ,

Mailing Address 650 RAMBLEWOOD RD

City
HOUSTON

State
TX

Zip Code
77079

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

M M / D D / Y Y Y Y Y
01 / 30 / 2020

Transaction ID : SA11AI.97708

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WOODHOUSE, MARILYN, , ,

Mailing Address 650 RAMBLEWOOD RD

City
HOUSTON

State
TX

Zip Code
77079

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 ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 08 / 2020

Transaction ID : SA11AI.97706

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

600.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 192 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WOODHOUSE, MARILYN, , ,

Mailing Address 650 RAMBLEWOOD RD

City
HOUSTON

State
TX

Zip Code
77079

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 ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 14 / 2020

Transaction ID : SA11AI.97709

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WOODHOUSE, MARILYN, , ,

Mailing Address 650 RAMBLEWOOD RD

City
HOUSTON

State
TX

Zip Code
77079

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 ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 29 / 2020

Transaction ID : SA11AI.97710

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WOODHOUSE, MARILYN, , ,

Mailing Address 650 RAMBLEWOOD RD

City
HOUSTON

State
TX

Zip Code
77079

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 ▼

1350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2020

Transaction ID : SA11AI.97711

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

750.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WOODHOUSE, MARILYN, , ,

Mailing Address 650 RAMBLEWOOD RD

City
HOUSTON

State
TX

Zip Code
77079

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 ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 29 / 2020

Transaction ID : SA11AI.97712

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WRIEDEN, FREDERICK, , ,

Mailing Address 7700 WOLF RUN SHOALS RD

City

FAIRFAX STATION

State

VA

Zip Code

22039

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DRAINAGE AND EROSION SOLUTIONS

Occupation (for Individual)
CONSTRUCTION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 12 / 2020

Transaction ID : SA11AI.97755

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WRIGHT, GEORGE, , ,

Mailing Address 4423 BAYBERRY ROW

City

SAN ANTONIO

State

TX

Zip Code

78249

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 ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 15 / 2020

Transaction ID : SA11AI.97782

Amount of Each Receipt this Period

199.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

699.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WRIGHT, GEORGE, , ,

Mailing Address 4423 BAYBERRY ROW

City
SAN ANTONIO

State
TX

Zip Code
78249

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 ▼

503.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2020

Transaction ID : SA11AI.97783

Amount of Each Receipt this Period

199.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WRIGHT, GEORGE, , ,

Mailing Address 4423 BAYBERRY ROW

City
SAN ANTONIO

State
TX

Zip Code
78249

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 ▼

702.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 05 / 2020

Transaction ID : SA11AI.97784

Amount of Each Receipt this Period

199.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. YOUNG, DIANE, , ,

Mailing Address 507 AZALEA DR

City
ROCKVILLE

State
MD

Zip Code
20850

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 ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 09 / 2020

Transaction ID : SA11AI.97943

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

648.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ZACCARDI, BRETT, , ,

Mailing Address 419 PARK AVE S

City
NEW YORK

State
NY

Zip Code
10016

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
MARKETING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

MM / DD / YYYY
01 / 16 / 2020

Transaction ID : SA11AI.97965

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ZACHA, ROBIN, , ,

Mailing Address 6605 W 80TH ST

City
LOS ANGELES

State
CA

Zip Code
90045

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
REALTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

MM / DD / YYYY
03 / 21 / 2020

Transaction ID : SA11AI.97969

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ZINN, DAVID, , ,

Mailing Address 720 E 6TH ST

City
ANNISTON

State
AL

Zip Code
36207

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NEPHROLOGY & HYPERTENSION CONSULTANTS

Occupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
02 / 18 / 2020

Transaction ID : SA11AI.98036

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ZINN, DAVID, , ,

Mailing Address **720 E 6TH ST**

City
ANNISTON

State
AL

Zip Code
36207

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NEPHROLOGY & HYPERTENSION CONSULTANTS

Occupation (for Individual)

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

03 / 19 / 2020

Transaction ID : SA11AI.98037

Amount of Each Receipt this Period

500.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

500.00

9043871.62

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 197 OF 290
(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. IBEW LOCAL 102 PAC

Mailing Address 50 PARSIPPANY RD

City
PARSIPPANY

State
NJ

Zip Code
07054

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 25 / 2020

Transaction ID : SA11C.76999

Amount of Each Receipt this Period

25000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

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 / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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 / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

25000.00

25000.00

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)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STRIPE

Mailing Address 3180 18TH STREET

City

SAN FRANCISCO

State

CA

Zip Code

94110

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 ▼

1524.03

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 27 / 2020

Transaction ID : SA15.76992

Amount of Each Receipt this Period

1523.93

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STRIPE

Mailing Address 3180 18TH STREET

City

SAN FRANCISCO

State

CA

Zip Code

94110

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 ▼

1524.21

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 11 / 2020

Transaction ID : SA15.76973

Amount of Each Receipt this Period

0.18

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STRIPE

Mailing Address 3180 18TH STREET

City

SAN FRANCISCO

State

CA

Zip Code

94110

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 ▼

1524.56

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 11 / 2020

Transaction ID : SA15.76977

Amount of Each Receipt this Period

0.35

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1524.46

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 199 OF 290
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110FEC 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 ▼

1525.26

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
02	/	11	/	2020

Transaction ID : SA15.76978

Amount of Each Receipt this Period

0.70

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110FEC 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 ▼

1525.96

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
02	/	11	/	2020

Transaction ID : SA15.76979

Amount of Each Receipt this Period

0.70

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110FEC 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 ▼

1526.66

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
02	/	11	/	2020

Transaction ID : SA15.76980

Amount of Each Receipt this Period

0.70

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

SUBTOTAL of Receipts This Page (optional)..... ►

2.10

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

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☐ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCO

State
CA

Zip Code
94110

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 ▼

1535.77

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 12 / 2020

Transaction ID : SA15.76983

Amount of Each Receipt this Period

9.11

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCO

State
CA

Zip Code
94110

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 ▼

1544.88

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 12 / 2020

Transaction ID : SA15.76984

Amount of Each Receipt this Period

9.11

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCO

State
CA

Zip Code
94110

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 ▼

1553.99

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 12 / 2020

Transaction ID : SA15.76985

Amount of Each Receipt this Period

9.11

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

27.33

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 201 OF 290
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110FEC 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 ▼

1572.29

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
02	/	12	/	2020

Transaction ID : SA15.76987

Amount of Each Receipt this Period

18.30

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110FEC 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 ▼

1590.59

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
02	/	12	/	2020

Transaction ID : SA15.76988

Amount of Each Receipt this Period

18.30

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110FEC 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 ▼

1608.89

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
02	/	12	/	2020

Transaction ID : SA15.76989

Amount of Each Receipt this Period

18.30

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

SUBTOTAL of Receipts This Page (optional)..... ►

54.90

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 202 OF 290

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCO

State
CA

Zip Code
94110

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 ▼

1618.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 13 / 2020

Transaction ID : SA15.76986

Amount of Each Receipt this Period

9.11

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCO

State
CA

Zip Code
94110

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 ▼

1618.02

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 13 / 2020

Transaction ID : SA15.76970

Amount of Each Receipt this Period

0.02

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCO

State
CA

Zip Code
94110

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 ▼

1618.16

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 14 / 2020

Transaction ID : SA15.76972

Amount of Each Receipt this Period

0.14

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

9.27

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 203 OF 290

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCO

State
CA

Zip Code
94110

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 ▼

1636.46

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 14 / 2020

Transaction ID : SA15.76990

Amount of Each Receipt this Period

18.30

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCO

State
CA

Zip Code
94110

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 ▼

1636.64

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 15 / 2020

Transaction ID : SA15.76974

Amount of Each Receipt this Period

0.18

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCO

State
CA

Zip Code
94110

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 ▼

1636.82

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 15 / 2020

Transaction ID : SA15.76975

Amount of Each Receipt this Period

0.18

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

18.66

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 204 OF 290

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STRIPE

Mailing Address 3180 18TH STREET

City

SAN FRANCISCO

State

CA

Zip Code

94110

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 ▼

1640.32

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 18 / 2020

Transaction ID : SA15.76982

Amount of Each Receipt this Period

3.50

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STRIPE

Mailing Address 3180 18TH STREET

City

SAN FRANCISCO

State

CA

Zip Code

94110

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 ▼

1640.57

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 20 / 2020

Transaction ID : SA15.76976

Amount of Each Receipt this Period

0.25

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STRIPE

Mailing Address 3180 18TH STREET

City

SAN FRANCISCO

State

CA

Zip Code

94110

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 ▼

1641.27

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2020

Transaction ID : SA15.76981

Amount of Each Receipt this Period

0.70

☐ Memo Item

VENDOR REFUND: FEE REVERSAL

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4.45

1641.17

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 205 OF 290
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE

City
MCLEAN

State
VA

Zip Code
22101

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 ▼

2040.29

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 31 / 2020

Transaction ID : SA17.76994

Amount of Each Receipt this Period

2040.29

☐ Memo Item
INTEREST

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE

City
MCLEAN

State
VA

Zip Code
22101

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 ▼

12114.73

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 31 / 2020

Transaction ID : SA17.76996

Amount of Each Receipt this Period

10074.44

☐ Memo Item
INTEREST

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE

City
MCLEAN

State
VA

Zip Code
22101

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 ▼

14078.68

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 29 / 2020

Transaction ID : SA17.76993

Amount of Each Receipt this Period

1963.95

☐ Memo Item
INTEREST

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

14078.68

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 206 OF 290

<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE

City
MCLEANState
VAZip Code
22101FEC 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 ▼

26911.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		29		2020

Transaction ID : SA17.76997

Amount of Each Receipt this Period

12832.82

☐ Memo Item
 INTEREST

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE

City
MCLEANState
VAZip Code
22101FEC 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 ▼

27742.47

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2020

Transaction ID : SA17.76991

Amount of Each Receipt this Period

830.97

☐ Memo Item
 INTEREST

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE

City
MCLEANState
VAZip Code
22101FEC 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 ▼

33651.72

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2020

Transaction ID : SA17.76995

Amount of Each Receipt this Period

5909.25

☐ Memo Item
 INTEREST
SUBTOTAL of Receipts This Page (optional).....▶

19573.04

TOTAL This Period (last page this line number only).....▶

33651.72

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 207 OF 290

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. 1ST BANKCARDMailing Address **COMMERCIAL CARD PAYMENT PROCESSING
P.O. BOX 2818**City
OMAHAState
NEZip Code
68103-2818Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76835]: BANK FEE

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
0	1			2	7			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.98159**

Amount of Each Disbursement this Period

39.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. 1ST BANKCARDMailing Address **COMMERCIAL CARD PAYMENT PROCESSING
P.O. BOX 2818**City
OMAHAState
NEZip Code
68103-2818Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76835]: BANK FEE

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
0	1			2	8			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.98156**

Amount of Each Disbursement this Period

5.37

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. 1ST BANKCARDMailing Address **COMMERCIAL CARD PAYMENT PROCESSING
P.O. BOX 2818**City
OMAHAState
NEZip Code
68103-2818Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76836]: BANK FEE

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
0	1			2	8			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.98158**

Amount of Each Disbursement this Period

15.29

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0	0	0	0	0	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---	---	---	---	---

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 208 OF 290

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. 1ST BANKCARDMailing Address **COMMERCIAL CARD PAYMENT PROCESSING**
P.O. BOX 2818City
OMAHAState
NEZip Code
68103-2818Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76836]: BANK FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	8			2	0	2	0		

FEC Identification Number

C **Transaction ID : SB21B.98160**

Amount of Each Disbursement this Period

 39.00☒ Memo Item

Full Name (Last, First, Middle Initial)

B. 1ST BANKCARDMailing Address **COMMERCIAL CARD PAYMENT PROCESSING**
P.O. BOX 2818City
OMAHAState
NEZip Code
68103-2818Purpose of Disbursement
CREDIT CARD PAYMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			3	0			2	0	2	0		

FEC Identification Number

C **Transaction ID : SB21B.76835**

Amount of Each Disbursement this Period

 606.30☐ Memo Item

Full Name (Last, First, Middle Initial)

C. 1ST BANKCARDMailing Address **COMMERCIAL CARD PAYMENT PROCESSING**
P.O. BOX 2818City
OMAHAState
NEZip Code
68103-2818Purpose of Disbursement
CREDIT CARD PAYMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			3	0			2	0	2	0		

FEC Identification Number

C **Transaction ID : SB21B.76836**

Amount of Each Disbursement this Period

 1679.31☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 2285.61

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 209 OF 290

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. 1ST BANKCARDMailing Address **COMMERCIAL CARD PAYMENT PROCESSING**
P.O. BOX 2818City
OMAHAState
NEZip Code
68103-2818Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76925]: BANK FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2020

FEC Identification Number

C**Transaction ID : SB21B.98155**

Amount of Each Disbursement this Period

2.54

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. 1ST BANKCARDMailing Address **COMMERCIAL CARD PAYMENT PROCESSING**
P.O. BOX 2818City
OMAHAState
NEZip Code
68103-2818Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76924]: BANK FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2020

FEC Identification Number

C**Transaction ID : SB21B.98157**

Amount of Each Disbursement this Period

14.74

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. 1ST BANKCARDMailing Address **COMMERCIAL CARD PAYMENT PROCESSING**
P.O. BOX 2818City
OMAHAState
NEZip Code
68103-2818Purpose of Disbursement
CREDIT CARD PAYMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		06		2020

FEC Identification Number

C**Transaction ID : SB21B.76924**

Amount of Each Disbursement this Period

4815.34

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4815.34

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 210 OF 290

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. 1ST BANKCARD

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		06		2020

Mailing Address **COMMERCIAL CARD PAYMENT PROCESSING**
P.O. BOX 2818City
OMAHAState
NEZip Code
68103-2818Purpose of Disbursement
CREDIT CARD PAYMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C **Transaction ID : SB21B.76925**

Amount of Each Disbursement this Period

 12312.26☐ Memo Item

Full Name (Last, First, Middle Initial)

B. 1ST BANKCARD

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		24		2020

Mailing Address **COMMERCIAL CARD PAYMENT PROCESSING**
P.O. BOX 2818City
OMAHAState
NEZip Code
68103-2818Purpose of Disbursement
CREDIT CARD PAYMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C **Transaction ID : SB21B.76926**

Amount of Each Disbursement this Period

 3540.87☐ Memo Item

Full Name (Last, First, Middle Initial)

C. 1ST BANKCARD

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		24		2020

Mailing Address **COMMERCIAL CARD PAYMENT PROCESSING**
P.O. BOX 2818City
OMAHAState
NEZip Code
68103-2818Purpose of Disbursement
CREDIT CARD PAYMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C **Transaction ID : SB21B.76927**

Amount of Each Disbursement this Period

 3613.33☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 19466.46

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 211 OF 290

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. AMERICA AIRLINES

Mailing Address 4333 AMON CARTER BLVD

City
FORTH WORTHState
TXZip Code
76155Purpose of Disbursement
REIMBURSEMENT {SB21B.76871}:TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			0	7			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.98073**

Amount of Each Disbursement this Period

268.30

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICA AIRLINES

Mailing Address 4333 AMON CARTER BLVD

City
FORTH WORTHState
TXZip Code
76155Purpose of Disbursement
REIMBURSEMENT {SB21B.76964}:TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	7			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.98076**

Amount of Each Disbursement this Period

1024.80

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICA AIRLINES

Mailing Address 4333 AMON CARTER BLVD

City
FORTH WORTHState
TXZip Code
76155Purpose of Disbursement
REIMBURSEMENT {SB21B.76964}:TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.98074**

Amount of Each Disbursement this Period

133.40

☒ 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 PageFOR LINE NUMBER:
(check only one)

PAGE 212 OF 290

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. AMERICA AIRLINES

Mailing Address 4333 AMON CARTER BLVD

City
FORTH WORTHState
TXZip Code
76155Purpose of Disbursement
REIMBURSEMENT {SB21B.76964}:TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	0		

FEC Identification Number

C **Transaction ID : SB21B.98075**

Amount of Each Disbursement this Period

 423.39☒ Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICA FIRST POLICIES, INC.Mailing Address 1400 CRYSTAL DRIVE
STE 850City
ARLINGTONState
VAZip Code
22202Purpose of Disbursement
IN-KIND - PAYROLL / OFFICE EXPENSES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			3	1			2	0	2	0		

FEC Identification Number

C **Transaction ID : SB21B.98213**

Amount of Each Disbursement this Period

 225037.00☐ Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BLVD

City
FORT WORTHState
TXZip Code
76155Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76836]: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	5			2	0	2	0		

FEC Identification Number

C **Transaction ID : SB21B.98123**

Amount of Each Disbursement this Period

 88.40☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 225037.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BLVD

City
FORT WORTHState
TXZip Code
76155Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76836]: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	5			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.98124**

Amount of Each Disbursement this Period

88.40

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BLVD

City
FORT WORTHState
TXZip Code
76155Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76924]: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	9			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.98121**

Amount of Each Disbursement this Period

18.48

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BLVD

City
FORT WORTHState
TXZip Code
76155Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76924]: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	9			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.98125**

Amount of Each Disbursement this Period

263.40

☒ 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 PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BLVD

City
FORT WORTHState
TXZip Code
76155Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76924]: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		28		2020

FEC Identification Number

C**Transaction ID : SB21B.98128**

Amount of Each Disbursement this Period

556.80

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BLVD

City
FORT WORTHState
TXZip Code
76155Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76926]: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		12		2020

FEC Identification Number

C**Transaction ID : SB21B.98126**

Amount of Each Disbursement this Period

386.80

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BLVD

City
FORT WORTHState
TXZip Code
76155Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76926]: TRAVEL: AIR: CREDIT

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		16		2020

FEC Identification Number

C**Transaction ID : SB21B.98126**

Amount of Each Disbursement this Period

- 386.80

☒ 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 PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BLVD

City
FORT WORTHState
TXZip Code
76155Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76926]: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		16		2020

FEC Identification Number

C**Transaction ID : SB21B.98122**

Amount of Each Disbursement this Period

31.78

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BLVD

City
FORT WORTHState
TXZip Code
76155Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76926]: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		16		2020

FEC Identification Number

C**Transaction ID : SB21B.98127**

Amount of Each Disbursement this Period

504.40

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. AM STRATEGY GROUP

Mailing Address 4722 9TH STREET, NW

City
WASHINGTONState
DCZip Code
20011Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		03		2020

FEC Identification Number

C**Transaction ID : SB21B.98225**

Amount of Each Disbursement this Period

33500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

33500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 216 OF 290

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. AMTRAK

Mailing Address 1 MASSACHUSETTS AVE NW

City
WASHINGTONState
DCZip Code
20001Purpose of Disbursement
REIMBURSEMENT [SB21B.76922]:TRAVEL: RAIL

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		1	7			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.98077**

Amount of Each Disbursement this Period

196.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. AMTRAK

Mailing Address 1 MASSACHUSETTS AVE NW

City
WASHINGTONState
DCZip Code
20001Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76836]: TRAVEL: RAIL

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			1	2			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.98140**

Amount of Each Disbursement this Period

716.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. AMTRAK

Mailing Address 1 MASSACHUSETTS AVE NW

City
WASHINGTONState
DCZip Code
20001Purpose of Disbursement
REIMBURSEMENT [SB21B.76922]:TRAVEL: RAIL

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			1	7			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.98078**

Amount of Each Disbursement this Period

321.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. AMTRAK

Mailing Address 1 MASSACHUSETTS AVE NW

City
WASHINGTONState
DCZip Code
20001Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76836]: TRAVEL: RAIL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				18				2019					

FEC Identification Number

C**Transaction ID : SB21B.98133**

Amount of Each Disbursement this Period

215.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. AMTRAK

Mailing Address 1 MASSACHUSETTS AVE NW

City
WASHINGTONState
DCZip Code
20001Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76836]: TRAVEL: RAIL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				18				2019					

FEC Identification Number

C**Transaction ID : SB21B.98134**

Amount of Each Disbursement this Period

215.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. AMTRAK

Mailing Address 1 MASSACHUSETTS AVE NW

City
WASHINGTONState
DCZip Code
20001Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76836]: TRAVEL: RAIL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				18				2019					

FEC Identification Number

C**Transaction ID : SB21B.98137**

Amount of Each Disbursement this Period

315.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. AMTRAK

Mailing Address 1 MASSACHUSETTS AVE NW

City
WASHINGTONState
DCZip Code
20001Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76836]: TRAVEL: RAIL: CREDIT

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1				1	0		2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.98129**

Amount of Each Disbursement this Period

- 215.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. AMTRAK

Mailing Address 1 MASSACHUSETTS AVE NW

City
WASHINGTONState
DCZip Code
20001Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76924]: TRAVEL: RAIL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				1	8		2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.98135**

Amount of Each Disbursement this Period

215.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. AMTRAK

Mailing Address 1 MASSACHUSETTS AVE NW

City
WASHINGTONState
DCZip Code
20001Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76924]: TRAVEL: RAIL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				1	8		2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.98136**

Amount of Each Disbursement this Period

215.00

☒ 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 PageFOR LINE NUMBER:
(check only one)

PAGE 220 OF 290

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. AMTRAK

Mailing Address 1 MASSACHUSETTS AVE NW

City
WASHINGTONState
DCZip Code
20001Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76924]: TRAVEL: RAIL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	6			2	0	2	0		

FEC Identification Number

C **Transaction ID : SB21B.98139**

Amount of Each Disbursement this Period

 315.00☒ Memo Item

Full Name (Last, First, Middle Initial)

B. AMTRAK

Mailing Address 1 MASSACHUSETTS AVE NW

City
WASHINGTONState
DCZip Code
20001Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76924]: TRAVEL: RAIL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	4			2	0	2	0		

FEC Identification Number

C **Transaction ID : SB21B.98131**

Amount of Each Disbursement this Period

 153.00☒ Memo Item

Full Name (Last, First, Middle Initial)

C. BASELICE & ASSOCIATES, INCMailing Address 4131 SPICEWOOD SPRINGS ROAD
SUITE O-2City
AUSTINState
TXZip Code
78759Purpose of Disbursement
POLLING EXPENSE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	6			2	0	2	0		

FEC Identification Number

C **Transaction ID : SB21B.76873**

Amount of Each Disbursement this Period

 29700.00☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

<input type="text"/>	29700.00
<input type="text"/>	

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 221 OF 290

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. BASSWOOD RESEARCH

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		28		2020

Mailing Address **AIR RIGHTS CENTER, NORTH TOWER**
4550 MONTGOMERY AVECity
BETHESDAState
MDZip Code
20814Purpose of Disbursement
POLLING EXPENSE

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.76838**

Amount of Each Disbursement this Period

75668.00☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BULLDOG COMPLIANCE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		20		2020

Mailing Address **138 CONANT ST**
2ND FLOORCity
BEVERLYState
MAZip Code
01915Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.76874**

Amount of Each Disbursement this Period

3000.00☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BULLDOG COMPLIANCE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		26		2020

Mailing Address **138 CONANT ST**
2ND FLOORCity
BEVERLYState
MAZip Code
01915Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.76928**

Amount of Each Disbursement this Period

3001.25☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶**81669.25**

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 222 OF 290

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. CAPITAL RESEARCH GROUP, LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		04		2020

Mailing Address 1220 L STREET NW
SUITE 100-467City
WASHINGTONState
DCZip Code
20005Purpose of Disbursement
RESEARCH CONSULTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.76929**

Amount of Each Disbursement this Period

7500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CONVERT DIGITAL

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		10		2020

Mailing Address 45 NORTH HILL DR.
SUITE 100City
WARRENTONState
VAZip Code
20186Purpose of Disbursement
DIGITAL FUNDRAISING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.76875**

Amount of Each Disbursement this Period

165419.77

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CONVERT DIGITAL

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		11		2020

Mailing Address 45 NORTH HILL DR.
SUITE 100City
WARRENTONState
VAZip Code
20186Purpose of Disbursement
DIGITAL FUNDRAISING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.76931**

Amount of Each Disbursement this Period

36235.26

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

209155.03

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 223 OF 290

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. CONVERT DIGITALMailing Address 45 NORTH HILL DR.
SUITE 100City
WARRENTONState
VAZip Code
20186Purpose of Disbursement
DIGITAL FUNDRAISING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	1			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.76931**

Amount of Each Disbursement this Period

36267.11

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CORTES, STEVEN, C, ,

Mailing Address 3717 N HERMITAGE

City
CHICAGOState
ILZip Code
60613Purpose of Disbursement
COMMUNICATIONS CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	2			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.76870**

Amount of Each Disbursement this Period

3750.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CORTES, STEVEN, C, ,

Mailing Address 3717 N HERMITAGE

City
CHICAGOState
ILZip Code
60613Purpose of Disbursement
COMMUNICATIONS CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	9			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.76921**

Amount of Each Disbursement this Period

7500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

47517.11

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. DELTA AIRLINESMailing Address 1030 DELTA BLVD
SUITE 200City
ATLANTAState
GAZip Code
30354Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76924]: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	9		2	0	2	0

FEC Identification Number

C**Transaction ID : SB21B.98144**

Amount of Each Disbursement this Period

282.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. DOUG COULTER PHOTOGRAPHY

Mailing Address 1415 HORSESHOE CREEK LANE

City
CUMMINGState
GAZip Code
30041Purpose of Disbursement
EVENT EXPENSE: PHOTOGRAPHY

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	0		2	0	2	0

FEC Identification Number

C**Transaction ID : SB21B.76932**

Amount of Each Disbursement this Period

2842.44

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. EAU PALM BEACH RESORT

Mailing Address 100 S OCEAN BLVD

City
MANALAPANState
FLZip Code
33462Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76926]: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	9		2	0	2	0

FEC Identification Number

C**Transaction ID : SB21B.98144**

Amount of Each Disbursement this Period

798.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2842.44

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. EAU PALM BEACH RESORT

Mailing Address 100 S OCEAN BLVD

City
MANALAPANState
FLZip Code
33462Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76926]: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	9			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.98149**

Amount of Each Disbursement this Period

798.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. EAU PALM BEACH RESORT

Mailing Address 100 S OCEAN BLVD

City
MANALAPANState
FLZip Code
33462Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76926]: TRAVEL: LODGING: CREDIT

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3				1	2		2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.98146**

Amount of Each Disbursement this Period

- 312.64

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. EAU PALM BEACH RESORT

Mailing Address 100 S OCEAN BLVD

City
MANALAPANState
FLZip Code
33462Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76926]: TRAVEL: LODGING: CREDIT

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3				1	2		2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.98147**

Amount of Each Disbursement this Period

- 297.14

☒ 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 PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. FEDEX OFFICE

Mailing Address 2110 CRYSTAL DRIVE STE B

City
ARLINGTONState
VAZip Code
22202Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76835]: PRINTING EXPENSE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			1	8			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.98153**

Amount of Each Disbursement this Period

126.94

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. FEDEX OFFICE

Mailing Address 2110 CRYSTAL DRIVE STE B

City
ARLINGTONState
VAZip Code
22202Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76835]: PRINTING EXPENSE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			1	9			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.98150**

Amount of Each Disbursement this Period

52.90

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. FEDEX OFFICE

Mailing Address 2110 CRYSTAL DRIVE STE B

City
ARLINGTONState
VAZip Code
22202Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76835]: PRINTING EXPENSE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			1	9			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.98151**

Amount of Each Disbursement this Period

63.47

☒ 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 PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. FEDEX OFFICE

Mailing Address 2110 CRYSTAL DRIVE STE B

City
ARLINGTONState
VAZip Code
22202Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76835]: PRINTING EXPENSE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				19				2019					

FEC Identification Number

C**Transaction ID : SB21B.98152**

Amount of Each Disbursement this Period

116.37

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. FORMSTACK, LLCMailing Address 11671 LANTERN RD
#300City
FISHERSState
INZip Code
46038Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76925]: SUBSCRIPTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
01				30				2020					

FEC Identification Number

C**Transaction ID : SB21B.98162**

Amount of Each Disbursement this Period

59.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. FORMSTACK, LLCMailing Address 11671 LANTERN RD
#300City
FISHERSState
INZip Code
46038Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76925]: SUBSCRIPTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
03				02				2020					

FEC Identification Number

C**Transaction ID : SB21B.98163**

Amount of Each Disbursement this Period

59.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 229 OF 290

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. FOUR SEASON PALM BEACH

Mailing Address 2800 S OCEAN BLVD

City
PALM BEACHState
FLZip Code
33480Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76925]: EVENT EXPENSE: FACILITY
RENTAL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		02		2020

FEC Identification Number

C**Transaction ID : SB21B.98166**

Amount of Each Disbursement this Period

7000.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. FOUR SEASON PALM BEACH

Mailing Address 2800 S OCEAN BLVD

City
PALM BEACHState
FLZip Code
33480Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76927]: EVENT EXPENSE: FACILITY
RENTAL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		16		2020

FEC Identification Number

C**Transaction ID : SB21B.98165**

Amount of Each Disbursement this Period

3613.33

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. HILTON NEW YORK

Mailing Address 1335 AVENUE OF THE AMERICAS

City
NEW YORKState
NYZip Code
10019Purpose of Disbursement
REIMBURSEMENT [SB21B.76922]: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2019

FEC Identification Number

C**Transaction ID : SB21B.98080**

Amount of Each Disbursement this Period

419.90

☒ 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 DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. HILTON NEW YORK

Mailing Address 1335 AVENUE OF THE AMERICAS

City
NEW YORKState
NYZip Code
10019Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76924]: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	9			2	0	2	0		

FEC Identification Number

C **Transaction ID : SB21B.98169**

Amount of Each Disbursement this Period

 239.88☒ Memo Item

Full Name (Last, First, Middle Initial)

B. HILTON NEW YORK

Mailing Address 1335 AVENUE OF THE AMERICAS

City
NEW YORKState
NYZip Code
10019Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76924]: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	9			2	0	2	0		

FEC Identification Number

C **Transaction ID : SB21B.98170**

Amount of Each Disbursement this Period

 239.88☒ Memo Item

Full Name (Last, First, Middle Initial)

C. HILTON NEW YORK

Mailing Address 1335 AVENUE OF THE AMERICAS

City
NEW YORKState
NYZip Code
10019Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76924]: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	4			2	0	2	0		

FEC Identification Number

C **Transaction ID : SB21B.98168**

Amount of Each Disbursement this Period

 113.66☒ 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 PageFOR LINE NUMBER:
(check only one)

PAGE 231 OF 290

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. HILTON NEW YORK

Mailing Address 1335 AVENUE OF THE AMERICAS

City
NEW YORKState
NYZip Code
10019Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76924]: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		24		2020

FEC Identification Number

C **Transaction ID : SB21B.98171**

Amount of Each Disbursement this Period

 371.83☒ Memo Item

Full Name (Last, First, Middle Initial)

B. JETBLUE

Mailing Address 6322 S 3000 E STE G20

City
SALT LAKE CITYState
UTZip Code
84121-6922Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76924]: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		02		2020

FEC Identification Number

C **Transaction ID : SB21B.98173**

Amount of Each Disbursement this Period

 463.40☒ Memo Item

Full Name (Last, First, Middle Initial)

C. JONES DAYMailing Address PO BOX 7805
BEN FRANKLIN STATIONCity
WASHINGTONState
DCZip Code
20044Purpose of Disbursement
LEGAL CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		23		2020

FEC Identification Number

C **Transaction ID : SB21B.98236**

Amount of Each Disbursement this Period

 240114.89☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

240114.89

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. JONES DAY

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	2			2	0	2	0		

Mailing Address PO BOX 7805

BEN FRANKLIN STATION

City
WASHINGTONState
DCZip Code
20044Purpose of Disbursement
LEGAL CONSULTING

Candidate Name

Category/
Type

FEC Identification Number

C**Transaction ID : SB21B.98231**

Amount of Each Disbursement this Period

102861.25

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. LAZ PARKING

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	3			2	0	2	0		

Mailing Address 1700 PENNSYLVANIA AVE NW

City
WASHINGTONState
DCZip Code
20006Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76925]: MEETING EXPENSE: PARKING

Candidate Name

Category/
Type

FEC Identification Number

C**Transaction ID : SB21B.98174**

Amount of Each Disbursement this Period

56.00

☒ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. LAZ PARKING

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	8			2	0	2	0		

Mailing Address 1700 PENNSYLVANIA AVE NW

City
WASHINGTONState
DCZip Code
20006Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76925]: MEETING EXPENSE: PARKING

Candidate Name

Category/
Type

FEC Identification Number

C**Transaction ID : SB21B.98175**

Amount of Each Disbursement this Period

56.00

☒ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

102861.25

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. LL BEAN

Mailing Address 95 MAIN ST

City
FREEPORTState
MEZip Code
04032Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76925]: CONTRIBUTOR COLLATERAL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	4			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.98176**

Amount of Each Disbursement this Period

4825.12

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. LYFTMailing Address 185 BERRY ST
SUITE 5000City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
REIMBURSEMENT [SB21B.76921]: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.98081**

Amount of Each Disbursement this Period

10.41

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. LYFTMailing Address 185 BERRY ST
SUITE 5000City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
REIMBURSEMENT [SB21B.76921]: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	2			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.98082**

Amount of Each Disbursement this Period

7.97

☒ 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 PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. LYFT

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	3			2	0	2	0		

Mailing Address 185 BERRY ST
SUITE 5000City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
REIMBURSEMENT [SB21B.76921]:TRAVEL: GROUND TRANSPORTATION

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.98083

Amount of Each Disbursement this Period

8.41

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. LYFT

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	9			2	0	2	0		

Mailing Address 185 BERRY ST
SUITE 5000City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
REIMBURSEMENT [SB21B.76921]:TRAVEL: GROUND TRANSPORTATION

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.98084

Amount of Each Disbursement this Period

7.78

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. M&B ANALYTICS

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	7			2	0	2	0		

Mailing Address P.O. BOX 2583

City
ALEXANDRIAState
VAZip Code
22301Purpose of Disbursement
DATA AND ANALYTICS CONSULTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.76844

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

5000.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. M&B ANALYTICS

Mailing Address P.O. BOX 2583

City
ALEXANDRIAState
VAZip Code
22301Purpose of Disbursement
DATA AND ANALYTICS CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		04		2020

FEC Identification Number

C**Transaction ID : SB21B.76880**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. M&B ANALYTICS

Mailing Address P.O. BOX 2583

City
ALEXANDRIAState
VAZip Code
22301Purpose of Disbursement
DATA AND ANALYTICS CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		04		2020

FEC Identification Number

C**Transaction ID : SB21B.76933**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MCMAHON, LINDA, E, ,

Mailing Address 1055 WASHINGTON BLVD.

City
STAMFORDState
CTZip Code
06901Purpose of Disbursement
IN-KIND - TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2020

FEC Identification Number

C**Transaction ID : SB21B.98211**

Amount of Each Disbursement this Period

123014.40

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

133014.40

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. MINTZ, LEVIN, COHN, FERRIS, GLOVSKY AND POPEO, P.C

Mailing Address 666 THIRD AVENUE

City
NEW YORKState
NYZip Code
10017Purpose of Disbursement
LEGAL CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	8			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.76934**

Amount of Each Disbursement this Period

107635.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MIRADOR HDDC LLC

Mailing Address 4930 18TH ST N

City
ARLINGTONState
VAZip Code
22207Purpose of Disbursement
EVENT STAGING EXPENSE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	5			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.76882**

Amount of Each Disbursement this Period

22800.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. OLYMPIC MEDIA LLCMailing Address 2402 POTOMAC AVE
#102City
ALEXANDRIAState
VAZip Code
22301Purpose of Disbursement
EMAIL MARKETING EXPENSE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.76884**

Amount of Each Disbursement this Period

8790.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

139225.65

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. ONMESSAGE INC.Mailing Address 705 MELVIN AVE
#105City
ANNAPOLISState
MDZip Code
21401Purpose of Disbursement
POLLING EXPENSE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		21		2020

FEC Identification Number

C**Transaction ID : SB21B.76885**

Amount of Each Disbursement this Period

24982.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ONMESSAGE INC.Mailing Address 705 MELVIN AVE
#105City
ANNAPOLISState
MDZip Code
21401Purpose of Disbursement
POLLING EXPENSE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		21		2020

FEC Identification Number

C**Transaction ID : SB21B.76886**

Amount of Each Disbursement this Period

29700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ONMESSAGE INC.Mailing Address 705 MELVIN AVE
#105City
ANNAPOLISState
MDZip Code
21401Purpose of Disbursement
POLLING EXPENSE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		21		2020

FEC Identification Number

C**Transaction ID : SB21B.76887**

Amount of Each Disbursement this Period

30770.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

85452.50

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. ONMESSAGE INC.Mailing Address 705 MELVIN AVE
#105City
ANNAPOLISState
MDZip Code
21401Purpose of Disbursement
RESEARCH CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3				1	0		2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.76935**

Amount of Each Disbursement this Period

22500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. OPINION INSIGHT, LLCMailing Address ATTN: ADAM GELLER
18 VILLAGE COURTCity
HAZLETState
NJZip Code
07730Purpose of Disbursement
POLLING EXPENSE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1				3	0		2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.76846**

Amount of Each Disbursement this Period

107580.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. REVV LLCMailing Address 1776 WILSON BLVD
STE 530City
ARLINGTONState
VAZip Code
22209Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76836]: MERCHANT FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
	1	2			0	5		2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.98177**

Amount of Each Disbursement this Period

43.14

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

130080.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. REVV LLCMailing Address 1776 WILSON BLVD
STE 530City
ARLINGTONState
VAZip Code
22209Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76836]: MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	2			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.98178**

Amount of Each Disbursement this Period

49.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. REVV LLCMailing Address 1776 WILSON BLVD
STE 530City
ARLINGTONState
VAZip Code
22209Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76924]: MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	3			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.98179**

Amount of Each Disbursement this Period

49.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. REVV LLCMailing Address 1776 WILSON BLVD
STE 530City
ARLINGTONState
VAZip Code
22209Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76924]: MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	2			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.98180**

Amount of Each Disbursement this Period

49.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. SADLER, KELLY, J, ,

Mailing Address 1400 CRYSTAL DRIVE SUITE 850

City
ARLINGTONState
VAZip Code
22020Purpose of Disbursement
REIMBURSEMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		04		2020

FEC Identification Number

C**Transaction ID : SB21B.76922**

Amount of Each Disbursement this Period

1474.51

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SHUTTERSTOCKMailing Address 350 FIFTH AVE
21ST FLOORCity
NEW YORKState
NYZip Code
10118Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76924]: PRODUCTION COST: IMAGING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		19		2020

FEC Identification Number

C**Transaction ID : SB21B.98182**

Amount of Each Disbursement this Period

29.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. SHUTTERSTOCKMailing Address 350 FIFTH AVE
21ST FLOORCity
NEW YORKState
NYZip Code
10118Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76924]: PRODUCTION COST: IMAGING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		19		2020

FEC Identification Number

C**Transaction ID : SB21B.98184**

Amount of Each Disbursement this Period

99.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1474.51

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. SHUTTERSTOCKMailing Address 350 FIFTH AVE
21ST FLOORCity
NEW YORKState
NYZip Code
10118Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76926]: PRODUCTION COST: IMAGING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	6			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.98183**

Amount of Each Disbursement this Period

29.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. SHUTTERSTOCKMailing Address 350 FIFTH AVE
21ST FLOORCity
NEW YORKState
NYZip Code
10118Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76926]: PRODUCTION COST: IMAGING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	9			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.98185**

Amount of Each Disbursement this Period

99.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. SOUTHWEST AIRLINES

Mailing Address 2702 LOVE FIELD DRIVE

City
DALLASState
TXZip Code
75235Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76926]: TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	1			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.98186**

Amount of Each Disbursement this Period

243.98

☒ 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 PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	8			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.76851**

Amount of Each Disbursement this Period

111.67

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	9			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.76852**

Amount of Each Disbursement this Period

15.68

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	0			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.76853**

Amount of Each Disbursement this Period

12.09

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

139.44

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	3		2	0	2	0

FEC Identification Number

C**Transaction ID : SB21B.76854**

Amount of Each Disbursement this Period

55.67

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	4		2	0	2	0

FEC Identification Number

C**Transaction ID : SB21B.76855**

Amount of Each Disbursement this Period

17.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	5		2	0	2	0

FEC Identification Number

C**Transaction ID : SB21B.76856**

Amount of Each Disbursement this Period

86.76

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

160.23

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	6			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.76857**

Amount of Each Disbursement this Period

21.83

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	7			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.76858**

Amount of Each Disbursement this Period

28.21

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	1			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.76855**

Amount of Each Disbursement this Period

145.06

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

195.10

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	2		2	0	2	0

FEC Identification Number

C**Transaction ID : SB21B.76860**

Amount of Each Disbursement this Period

126.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	3		2	0	2	0

FEC Identification Number

C**Transaction ID : SB21B.76861**

Amount of Each Disbursement this Period

601.16

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	4		2	0	2	0

FEC Identification Number

C**Transaction ID : SB21B.76862**

Amount of Each Disbursement this Period

807.80

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1535.76

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	8			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.76863**

Amount of Each Disbursement this Period

822.09

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	9			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.76864**

Amount of Each Disbursement this Period

435.14

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			3	0			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.76865**

Amount of Each Disbursement this Period

129.42

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1386.65

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		31		2020

FEC Identification Number

C**Transaction ID : SB21B.76866**

Amount of Each Disbursement this Period

86.88

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2020

FEC Identification Number

C**Transaction ID : SB21B.76888**

Amount of Each Disbursement this Period

265.85

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2020

FEC Identification Number

C**Transaction ID : SB21B.76888**

Amount of Each Disbursement this Period

212.72

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

565.45

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<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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Full Name (Last, First, Middle Initial)

A. STRIPE

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City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	5			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.76890**

Amount of Each Disbursement this Period

23.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	6			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.76891**

Amount of Each Disbursement this Period

116.44

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	7			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.76892**

Amount of Each Disbursement this Period

563.36

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

703.30

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		10		2020

FEC Identification Number

C**Transaction ID : SB21B.76893**

Amount of Each Disbursement this Period

134.02

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		11		2020

FEC Identification Number

C**Transaction ID : SB21B.76894**

Amount of Each Disbursement this Period

560.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		12		2020

FEC Identification Number

C**Transaction ID : SB21B.76895**

Amount of Each Disbursement this Period

442.95

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1137.05

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	3			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.76896**

Amount of Each Disbursement this Period

62.33

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	4			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.76897**

Amount of Each Disbursement this Period

151.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	8			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.76898**

Amount of Each Disbursement this Period

294.82

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

508.65

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		19		2020

FEC Identification Number

C**Transaction ID : SB21B.76899**

Amount of Each Disbursement this Period

401.78

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		20		2020

FEC Identification Number

C**Transaction ID : SB21B.76900**

Amount of Each Disbursement this Period

939.76

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		21		2020

FEC Identification Number

C**Transaction ID : SB21B.76901**

Amount of Each Disbursement this Period

482.10

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1823.64

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 252 OF 290

<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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A. STRIPE

Mailing Address 3180 18TH STREET

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SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		24		2020

FEC Identification Number

C**Transaction ID : SB21B.76902**

Amount of Each Disbursement this Period

578.84

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		25		2020

FEC Identification Number

C**Transaction ID : SB21B.76903**

Amount of Each Disbursement this Period

391.97

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		26		2020

FEC Identification Number

C**Transaction ID : SB21B.76904**

Amount of Each Disbursement this Period

544.19

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1515.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<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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A. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	7			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.76905**

Amount of Each Disbursement this Period

451.58

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	8			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.76906**

Amount of Each Disbursement this Period

286.32

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	2			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.76934**

Amount of Each Disbursement this Period

327.38

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1065.28

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

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A. STRIPE

Mailing Address 3180 18TH STREET

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SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	3			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.76937**

Amount of Each Disbursement this Period

326.53

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	4			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.76938**

Amount of Each Disbursement this Period

975.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	5			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.76938**

Amount of Each Disbursement this Period

325.08

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1626.86

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		06		2020

FEC Identification Number

C**Transaction ID : SB21B.76940**

Amount of Each Disbursement this Period

261.42

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		09		2020

FEC Identification Number

C**Transaction ID : SB21B.76941**

Amount of Each Disbursement this Period

418.52

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		10		2020

FEC Identification Number

C**Transaction ID : SB21B.76942**

Amount of Each Disbursement this Period

376.70

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1056.64

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	1			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.76943**

Amount of Each Disbursement this Period

1068.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	2			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.76944**

Amount of Each Disbursement this Period

363.06

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	3			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.76945**

Amount of Each Disbursement this Period

496.53

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1927.69

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	6			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.76946**

Amount of Each Disbursement this Period

253.85

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	7			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.76947**

Amount of Each Disbursement this Period

400.84

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	8			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.76948**

Amount of Each Disbursement this Period

982.84

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1637.53

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		19		2020

FEC Identification Number

C**Transaction ID : SB21B.76949**

Amount of Each Disbursement this Period

512.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		20		2020

FEC Identification Number

C**Transaction ID : SB21B.76950**

Amount of Each Disbursement this Period

841.07

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		23		2020

FEC Identification Number

C**Transaction ID : SB21B.76951**

Amount of Each Disbursement this Period

533.64

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1887.36

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	4			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.76952**

Amount of Each Disbursement this Period

505.91

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	5			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.76953**

Amount of Each Disbursement this Period

1202.82

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	6			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.76954**

Amount of Each Disbursement this Period

617.21

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2325.94

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 260 OF 290

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		27		2020

FEC Identification Number

C**Transaction ID : SB21B.76955**

Amount of Each Disbursement this Period

1230.72

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		30		2020

FEC Identification Number

C**Transaction ID : SB21B.76956**

Amount of Each Disbursement this Period

560.38

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 3180 18TH STREET

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2020

FEC Identification Number

C**Transaction ID : SB21B.76957**

Amount of Each Disbursement this Period

456.81

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2247.91

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 261 OF 290

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. TARGET

Mailing Address 3101 JEFFERSON DAVIS HWY

City
ALEXANDRIAState
VAZip Code
22305Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76835]: PACKAGING SUPPLIES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2019

FEC Identification Number

C**Transaction ID : SB21B.98187**

Amount of Each Disbursement this Period

10.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. TARGET

Mailing Address 3101 JEFFERSON DAVIS HWY

City
ALEXANDRIAState
VAZip Code
22305Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76835]: PACKAGING SUPPLIES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		19		2019

FEC Identification Number

C**Transaction ID : SB21B.98207**

Amount of Each Disbursement this Period

50.88

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY, LLCMailing Address 2311 WILSON BLVD
SUITE 200City
ARLINGTONState
VAZip Code
22201Purpose of Disbursement
ONLINE ADVERTISING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		07		2020

FEC Identification Number

C**Transaction ID : SB21B.76907**

Amount of Each Disbursement this Period

15000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

15000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 262 OF 290

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. TARGETED VICTORY, LLCMailing Address 2311 WILSON BLVD
SUITE 200City
ARLINGTONState
VAZip Code
22201Purpose of Disbursement
ONLINE ADVERTISING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	7			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.76908**

Amount of Each Disbursement this Period

20000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY, LLCMailing Address 2311 WILSON BLVD
SUITE 200City
ARLINGTONState
VAZip Code
22201Purpose of Disbursement
ONLINE ADVERTISING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	7			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.76909**

Amount of Each Disbursement this Period

150000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY, LLCMailing Address 2311 WILSON BLVD
SUITE 200City
ARLINGTONState
VAZip Code
22201Purpose of Disbursement
ONLINE ADVERTISING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	9			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.7691C**

Amount of Each Disbursement this Period

100000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

270000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. TARGETED VICTORY, LLCMailing Address 2311 WILSON BLVD
SUITE 200City
ARLINGTONState
VAZip Code
22201Purpose of Disbursement
ONLINE ADVERTISING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	4			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.76911**

Amount of Each Disbursement this Period

10750.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY, LLCMailing Address 2311 WILSON BLVD
SUITE 200City
ARLINGTONState
VAZip Code
22201Purpose of Disbursement
ONLINE ADVERTISING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	9			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.76958**

Amount of Each Disbursement this Period

274944.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY, LLCMailing Address 2311 WILSON BLVD
SUITE 200City
ARLINGTONState
VAZip Code
22201Purpose of Disbursement
ONLINE ADVERTISING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	2			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.76958**

Amount of Each Disbursement this Period

10750.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

296444.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 264 OF 290

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. THE PALAZZO LAS VEGAS

Mailing Address 3355 S LAS VEGAS BLVD

City
LAS VEGASState
NVZip Code
89109Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76926]: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	1			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.98205**

Amount of Each Disbursement this Period

254.25

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. THE PALAZZO LAS VEGAS

Mailing Address 3355 S LAS VEGAS BLVD

City
LAS VEGASState
NVZip Code
89109Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76926]: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	1			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.98206**

Amount of Each Disbursement this Period

395.98

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. TRUMP INTERNATIONAL HOTEL D.C.

Mailing Address 1100 PENNSYLVANIA AVE NW

City
WASHINGTONState
DCZip Code
20004Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76836]: MEETING EXPENSE: MEALS

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			1	8			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.98192**

Amount of Each Disbursement this Period

91.40

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0	0	0	0	0	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 265 OF 290

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. TRUMP INTERNATIONAL HOTEL D.C.

Mailing Address 1100 PENNSYLVANIA AVE NW

City
WASHINGTONState
DCZip Code
20004Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76836]: MEETING EXPENSE: MEALS

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	3			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.98191**

Amount of Each Disbursement this Period

34.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. TRUMP INTERNATIONAL HOTEL D.C.

Mailing Address 1100 PENNSYLVANIA AVE NW

City
WASHINGTONState
DCZip Code
20004Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76925]: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	3			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.98193**

Amount of Each Disbursement this Period

254.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. TRUMP INTERNATIONAL HOTEL D.C.

Mailing Address 1100 PENNSYLVANIA AVE NW

City
WASHINGTONState
DCZip Code
20004Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76924]: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	3			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.98194**

Amount of Each Disbursement this Period

256.50

☒ 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 PageFOR LINE NUMBER:
(check only one)

PAGE 266 OF 290

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. TRUMP INTERNATIONAL HOTEL LAS VEGAS

Mailing Address 2000 FASHION SHOW DR.

City
LAS VEGASState
NVZip Code
89109Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76926]: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	3			2	0	2	0		

FEC Identification Number

C **Transaction ID : SB21B.98188**

Amount of Each Disbursement this Period

 253.97☒ Memo Item

Full Name (Last, First, Middle Initial)

B. TRUMP INTERNATIONAL HOTEL LAS VEGAS

Mailing Address 2000 FASHION SHOW DR.

City
LAS VEGASState
NVZip Code
89109Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76926]: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	3			2	0	2	0		

FEC Identification Number

C **Transaction ID : SB21B.98189**

Amount of Each Disbursement this Period

 253.97☒ Memo Item

Full Name (Last, First, Middle Initial)

C. TRUMP INTERNATIONAL HOTEL LAS VEGAS

Mailing Address 2000 FASHION SHOW DR.

City
LAS VEGASState
NVZip Code
89109Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76836]: MEETING EXPENSE: MEALS

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	8			2	0	2	0		

FEC Identification Number

C **Transaction ID : SB21B.98195**

Amount of Each Disbursement this Period

 53.92☒ 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 PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. TRUMP OLD POST OFFICE LLC

Mailing Address 1100 PENNSYLVANIA AVE. NW

City
WASHINGTONState
DCZip Code
20004Purpose of Disbursement
EVENT EXPENSE: CATERING SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		11		2020

FEC Identification Number

C**Transaction ID : SB21B.76912**

Amount of Each Disbursement this Period

28754.88

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TRUMP OLD POST OFFICE LLC

Mailing Address 1100 PENNSYLVANIA AVE. NW

City
WASHINGTONState
DCZip Code
20004Purpose of Disbursement
EVENT EXPENSE: CATERING SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		19		2020

FEC Identification Number

C**Transaction ID : SB21B.76913**

Amount of Each Disbursement this Period

8597.85

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. UBERMailing Address 1455 MARKET ST
STE 400City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.76922]: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		17		2019

FEC Identification Number

C**Transaction ID : SB21B.98097**

Amount of Each Disbursement this Period

10.24

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

37352.73

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 268 OF 290

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBERMailing Address 1455 MARKET ST
STE 400City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.76922]:TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	7			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.98098**

Amount of Each Disbursement this Period

9.55

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBERMailing Address 1455 MARKET ST
STE 400City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.76922]:TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	9			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.98099**

Amount of Each Disbursement this Period

19.31

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBERMailing Address 1455 MARKET ST
STE 400City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.76922]:TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	9			2	0	1	9		

FEC Identification Number

C**Transaction ID : SB21B.98100**

Amount of Each Disbursement this Period

35.08

☒ 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 PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2019

Mailing Address 1455 MARKET ST
STE 400City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.76922]:TRAVEL: GROUND TRANSPORTATION

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.98101

Amount of Each Disbursement this Period

13.58

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		05		2019

Mailing Address 1455 MARKET ST
STE 400City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.76922]:TRAVEL: GROUND TRANSPORTATION

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.98102

Amount of Each Disbursement this Period

13.36

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		10		2019

Mailing Address 1455 MARKET ST
STE 400City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.76922]:TRAVEL: GROUND TRANSPORTATION

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.98103

Amount of Each Disbursement this Period

34.37

☒ 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 PageFOR LINE NUMBER:
(check only one)

PAGE 270 OF 290

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	0		2	0	1	9

Mailing Address 1455 MARKET ST
STE 400City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.76922]:TRAVEL: GROUND TRANSPORTATION

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.98104

Amount of Each Disbursement this Period

15.86

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	2		2	0	1	9

Mailing Address 1455 MARKET ST
STE 400City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.76922]:TRAVEL: GROUND TRANSPORTATION

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.98105

Amount of Each Disbursement this Period

35.79

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	5		2	0	1	9

Mailing Address 1455 MARKET ST
STE 400City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.76922]:TRAVEL: GROUND TRANSPORTATION

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.98106

Amount of Each Disbursement this Period

30.99

☒ 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 PageFOR LINE NUMBER:
(check only one)

PAGE 271 OF 290

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		17		2019

Mailing Address 1455 MARKET ST
STE 400City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.76922]:TRAVEL: GROUND TRANSPORTATION

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.98107

Amount of Each Disbursement this Period

35.62

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		22		2019

Mailing Address 1455 MARKET ST
STE 400City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.76922]:TRAVEL: GROUND TRANSPORTATION

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.98108

Amount of Each Disbursement this Period

13.11

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		03		2019

Mailing Address 1455 MARKET ST
STE 400City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.76922]:TRAVEL: GROUND TRANSPORTATION

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.98109

Amount of Each Disbursement this Period

11.57

☒ 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 PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBERMailing Address 1455 MARKET ST
STE 400City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.76871]:TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				07				2019					

FEC Identification Number

C**Transaction ID : SB21B.98089**

Amount of Each Disbursement this Period

26.65

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBERMailing Address 1455 MARKET ST
STE 400City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.76871]:TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				09				2019					

FEC Identification Number

C**Transaction ID : SB21B.98088**

Amount of Each Disbursement this Period

28.02

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBERMailing Address 1455 MARKET ST
STE 400City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.76871]:TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				14				2019					

FEC Identification Number

C**Transaction ID : SB21B.98088**

Amount of Each Disbursement this Period

15.43

☒ 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 PageFOR LINE NUMBER:
(check only one)

PAGE 273 OF 290

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		14		2019

Mailing Address 1455 MARKET ST
STE 400City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.76871]:TRAVEL: GROUND TRANSPORTATION

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.98087

Amount of Each Disbursement this Period

1.49

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		16		2019

Mailing Address 1455 MARKET ST
STE 400City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.76922]:TRAVEL: GROUND TRANSPORTATION

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.98110

Amount of Each Disbursement this Period

11.03

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		17		2019

Mailing Address 1455 MARKET ST
STE 400City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.76871]:TRAVEL: GROUND TRANSPORTATION

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.98088

Amount of Each Disbursement this Period

23.07

☒ 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 PageFOR LINE NUMBER:
(check only one)

PAGE 274 OF 290

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBERMailing Address 1455 MARKET ST
STE 400City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.76922]:TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				17				2019					

FEC Identification Number

C

Transaction ID : SB21B.98111

Amount of Each Disbursement this Period

44.83

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBERMailing Address 1455 MARKET ST
STE 400City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.76922]:TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				17				2019					

FEC Identification Number

C

Transaction ID : SB21B.98112

Amount of Each Disbursement this Period

12.09

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBERMailing Address 1455 MARKET ST
STE 400City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.76922]:TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
01				03				2020					

FEC Identification Number

C

Transaction ID : SB21B.98113

Amount of Each Disbursement this Period

11.18

☒ 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 PageFOR LINE NUMBER:
(check only one)

PAGE 275 OF 290

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	0		2	0	2	0

Mailing Address 1455 MARKET ST
STE 400City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.76923]:TRAVEL: GROUND TRANSPORTATION

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.98092

Amount of Each Disbursement this Period

29.18

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	0		2	0	2	0

Mailing Address 1455 MARKET ST
STE 400City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.76922]:TRAVEL: GROUND TRANSPORTATION

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.98114

Amount of Each Disbursement this Period

9.94

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	4		2	0	2	0

Mailing Address 1455 MARKET ST
STE 400City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.76922]:TRAVEL: GROUND TRANSPORTATION

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.98115

Amount of Each Disbursement this Period

8.23

☒ 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 PageFOR LINE NUMBER:
(check only one)

PAGE 276 OF 290

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	1			2	0	2	0		

Mailing Address 1455 MARKET ST
STE 400City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.76922]:TRAVEL: GROUND TRANSPORTATION

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.98116

Amount of Each Disbursement this Period

9.18

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			3	1			2	0	2	0		

Mailing Address 1455 MARKET ST
STE 400City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.76923]:TRAVEL: GROUND TRANSPORTATION

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.98090

Amount of Each Disbursement this Period

29.02

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			3	1			2	0	2	0		

Mailing Address 1455 MARKET ST
STE 400City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.76923]:TRAVEL: GROUND TRANSPORTATION

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.98091

Amount of Each Disbursement this Period

34.17

☒ 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 PageFOR LINE NUMBER:
(check only one)

PAGE 277 OF 290

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBERMailing Address 1455 MARKET ST
STE 400City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.76922]: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	3			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.98117**

Amount of Each Disbursement this Period

10.52

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBERMailing Address 1455 MARKET ST
STE 400City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76924]: TRAVEL: GROUND
TRANSPORTATION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	3			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.98198**

Amount of Each Disbursement this Period

10.07

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBERMailing Address 1455 MARKET ST
STE 400City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76924]: TRAVEL: GROUND
TRANSPORTATION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	3			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.98200**

Amount of Each Disbursement this Period

32.21

☒ 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 PageFOR LINE NUMBER:
(check only one)

PAGE 278 OF 290

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		10		2020

Mailing Address 1455 MARKET ST
STE 400City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76924]: TRAVEL: GROUND
TRANSPORTATION
Candidate NameCategory/
Type

FEC Identification Number

C

Transaction ID : SB21B.98199

Amount of Each Disbursement this Period

12.98

☒ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. UBER

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		12		2020

Mailing Address 1455 MARKET ST
STE 400City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.76963]: TRAVEL: GROUND TRANSPORTATION
Candidate NameCategory/
Type

FEC Identification Number

C

Transaction ID : SB21B.98118

Amount of Each Disbursement this Period

27.34

☒ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. UBER

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		12		2020

Mailing Address 1455 MARKET ST
STE 400City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.76963]: TRAVEL: GROUND TRANSPORTATION
Candidate NameCategory/
Type

FEC Identification Number

C

Transaction ID : SB21B.98111

Amount of Each Disbursement this Period

10.83

☒ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

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 PageFOR LINE NUMBER:
(check only one)

PAGE 279 OF 290

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	3			2	0	2	0		

Mailing Address 1455 MARKET ST
STE 400City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.76964]:TRAVEL: GROUND TRANSPORTATION

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.98095

Amount of Each Disbursement this Period

31.23

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	3			2	0	2	0		

Mailing Address 1455 MARKET ST
STE 400City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.76964]:TRAVEL: GROUND TRANSPORTATION

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.98096

Amount of Each Disbursement this Period

20.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	3			2	0	2	0		

Mailing Address 1455 MARKET ST
STE 400City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76924]: TRAVEL: GROUND
TRANSPORTATION

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.98197

Amount of Each Disbursement this Period

9.96

☒ 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 PageFOR LINE NUMBER:
(check only one)

PAGE 280 OF 290

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UBER

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2020

Mailing Address 1455 MARKET ST
STE 400City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.76964]: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C **Transaction ID : SB21B.98094**

Amount of Each Disbursement this Period

 41.71☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2020

Mailing Address 1455 MARKET ST
STE 400City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
1ST BANKCARD PMT [SB21B.76924]: TRAVEL: GROUND
TRANSPORTATION

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C **Transaction ID : SB21B.98196**

Amount of Each Disbursement this Period

 8.40☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		15		2020

Mailing Address 1455 MARKET ST
STE 400City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
REIMBURSEMENT [SB21B.76964]: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C **Transaction ID : SB21B.98093**

Amount of Each Disbursement this Period

 7.87☒ 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 DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 281 OF 290

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. UNITED AIRLINES

Mailing Address 233 S WACKER DR

City
CHICAGOState
ILZip Code
60606

Purpose of Disbursement

1ST BANKCARD PMT [SB21B.76926]: TRAVEL: AIR

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	5			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.98201**

Amount of Each Disbursement this Period

2	4	0	0										
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☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UNITED AIRLINES

Mailing Address 233 S WACKER DR

City
CHICAGOState
ILZip Code
60606

Purpose of Disbursement

1ST BANKCARD PMT [SB21B.76926]: TRAVEL: AIR

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	5			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.98202**

Amount of Each Disbursement this Period

7	2	0	0										
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☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UNITED AIRLINES

Mailing Address 233 S WACKER DR

City
CHICAGOState
ILZip Code
60606

Purpose of Disbursement

1ST BANKCARD PMT [SB21B.76926]: TRAVEL: AIR

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	5			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.98203**

Amount of Each Disbursement this Period

2	9	6	4	0									
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☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0	0	0											
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. WALSH, BRIAN, , ,

Mailing Address 1400 CRYSTAL DRIVE SUITE 850

City
ARLINGTONState
VAZip Code
22020Purpose of Disbursement
REIMBURSEMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	7			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.76871**

Amount of Each Disbursement this Period

369.76

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WALSH, BRIAN, , ,

Mailing Address 1400 CRYSTAL DRIVE SUITE 850

City
ARLINGTONState
VAZip Code
22020Purpose of Disbursement
REIMBURSEMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	8			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.76923**

Amount of Each Disbursement this Period

106.37

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WALSH, BRIAN, , ,

Mailing Address 1400 CRYSTAL DRIVE SUITE 850

City
ARLINGTONState
VAZip Code
22020Purpose of Disbursement
REIMBURSEMENT: SEE MEMO ENTRIES IF REQUIRED

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	6			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.76964**

Amount of Each Disbursement this Period

1682.60

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2158.73

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. WHITE HOUSE MILITARY OFFICE TREASURY

Mailing Address 1600 PENNSYLVANIA AVE NW

City
WASHINGTONState
DCZip Code
20500Purpose of Disbursement
EVENT EXPENSE: TRAVEL REIMBURSEMENT

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		07		2020

FEC Identification Number

C**Transaction ID : SB21B.76917**

Amount of Each Disbursement this Period

165.72

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WHITE HOUSE MILITARY OFFICE TREASURY

Mailing Address 1600 PENNSYLVANIA AVE NW

City
WASHINGTONState
DCZip Code
20500Purpose of Disbursement
EVENT EXPENSE: TRAVEL AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		07		2020

FEC Identification Number

C**Transaction ID : SB21B.76918**

Amount of Each Disbursement this Period

4950.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WHITE HOUSE MILITARY OFFICE TREASURY

Mailing Address 1600 PENNSYLVANIA AVE NW

City
WASHINGTONState
DCZip Code
20500Purpose of Disbursement
EVENT EXPENSE: TRAVEL AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		07		2020

FEC Identification Number

C**Transaction ID : SB21B.76919**

Amount of Each Disbursement this Period

21531.30

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

26647.02

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. XACT DATA DISCOVERYMailing Address 5800 FOXRIDGE DR
STE 406City
MISSIONState
KSZip Code
66202Purpose of Disbursement
DATA ANALYSIS

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			3	1			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.76867**

Amount of Each Disbursement this Period

903.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. XACT DATA DISCOVERYMailing Address 5800 FOXRIDGE DR
STE 406City
MISSIONState
KSZip Code
66202Purpose of Disbursement
DATA ANALYSIS

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	4			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.76960**

Amount of Each Disbursement this Period

2971.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. XACT DATA DISCOVERYMailing Address 5800 FOXRIDGE DR
STE 406City
MISSIONState
KSZip Code
66202Purpose of Disbursement
DATA ANALYSIS

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	7			2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.76961**

Amount of Each Disbursement this Period

1030.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4904.73

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

Full Name (Last, First, Middle Initial)

A. YONDR

Mailing Address 1427 VALENCIA ST

City
SAN FRANCISCOState
CAZip Code
94110Purpose of Disbursement
EVENT EXPENSE: EQUIPMENT RENTALS

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
01		30		2020

FEC Identification Number

C**Transaction ID : SB21B.76868**

Amount of Each Disbursement this Period

4675.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4675.00

2181339.13

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 286 OF 290

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

AM STRATEGY GROUP

Nature of Debt (Purpose):

FUNDRAISING CONSULTING

Mailing Address 4722 9TH STREET, NW

City
WASHINGTONState
DCZip Code
20011

Outstanding Balance Beginning This Period

33500.00

Transaction ID : SD10.76830

Amount Incurred This Period

0.00

Payment This Period

33500.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

BASSWOOD RESEARCH

Nature of Debt (Purpose):

POLLING EXPENSE

Mailing Address AIR RIGHTS CENTER, NORTH TOWER
4550 MONTGOMERY AVECity
BETHESDAState
MDZip Code
20814

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.98215

Amount Incurred This Period

53843.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

53843.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

CAPITAL RESEARCH GROUP, LLC

Nature of Debt (Purpose):

RESEARCH CONSULTING

Mailing Address 1220 L STREET NW
SUITE 100-467City
WASHINGTONState
DCZip Code
20005

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.98221

Amount Incurred This Period

7500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7500.00

1) SUBTOTALS This Period This Page (optional)..... ►

61343.50

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 287 OF 290

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

JONES DAY

Nature of Debt (Purpose):
LEGAL CONSULTINGMailing Address PO BOX 7805
BEN FRANKLIN STATIONCity
WASHINGTONState
DCZip Code
20044

Outstanding Balance Beginning This Period

240114.89

Transaction ID : SD10.76821

Amount Incurred This Period

0.00

Payment This Period

240114.89

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

JONES DAY

Nature of Debt (Purpose):
LEGAL CONSULTINGMailing Address PO BOX 7805
BEN FRANKLIN STATIONCity
WASHINGTONState
DCZip Code
20044

Outstanding Balance Beginning This Period

102861.25

Transaction ID : SD10.76832

Amount Incurred This Period

0.00

Payment This Period

102861.25

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

JONES DAY

Nature of Debt (Purpose):
LEGAL CONSULTINGMailing Address PO BOX 7805
BEN FRANKLIN STATIONCity
WASHINGTONState
DCZip Code
20044

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.98214

Amount Incurred This Period

177513.09

Payment This Period

0.00

Outstanding Balance at Close of This Period

177513.09

1) SUBTOTALS This Period This Page (optional)..... ►

177513.09

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 288 OF 290

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

JONES DAYNature of Debt (Purpose):
LEGAL CONSULTINGMailing Address PO BOX 7805
BEN FRANKLIN STATIONCity
WASHINGTONState
DCZip Code
20044

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.98242

Amount Incurred This Period

145600.81

Payment This Period

0.00

Outstanding Balance at Close of This Period

145600.81

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ONMESSAGE INC.Nature of Debt (Purpose):
POLLING EXPENSEMailing Address 705 MELVIN AVE
#105City
ANNAPOLISState
MDZip Code
21401

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.98217

Amount Incurred This Period

60302.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

60302.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

OPINION INSIGHT, LLCNature of Debt (Purpose):
POLLING EXPENSEMailing Address ATTN: ADAM GELLER
18 VILLAGE COURTCity
HAZLETState
NJZip Code
07730

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.98216

Amount Incurred This Period

81620.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

81620.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

287523.31

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 289 OF 290

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

TARGETED VICTORY, LLC

Nature of Debt (Purpose):
DIGITAL FUNDRAISINGMailing Address 2311 WILSON BLVD
SUITE 200City
ARLINGTONState
VAZip Code
22201

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.98218

Amount Incurred This Period

30083.99

Payment This Period

0.00

Outstanding Balance at Close of This Period

30083.99

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

TARGETED VICTORY, LLC

Nature of Debt (Purpose):
DIGITAL ADVERTISINGMailing Address 2311 WILSON BLVD
SUITE 200City
ARLINGTONState
VAZip Code
22201

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.98219

Amount Incurred This Period

80000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

80000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

TARGETED VICTORY, LLC

Nature of Debt (Purpose):
DIGITAL FUNDRAISINGMailing Address 2311 WILSON BLVD
SUITE 200City
ARLINGTONState
VAZip Code
22201

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.98220

Amount Incurred This Period

61869.84

Payment This Period

0.00

Outstanding Balance at Close of This Period

61869.84

1) SUBTOTALS This Period This Page (optional)..... ►

171953.83

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 290 OF 290

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

AMERICA FIRST ACTION, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

TARGETED VICTORY, LLC

Nature of Debt (Purpose):
DIGITAL CONSULTINGMailing Address 2311 WILSON BLVD
SUITE 200City
ARLINGTONState
VAZip Code
22201

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.98222

Amount Incurred This Period

7500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)..... ►

7500.00

2) TOTALS This Period (last page this line number only)..... ►

705833.73

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

0.00

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

705833.73