

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 SAVE AMERICA

ADDRESS (number and street) P.O. BOX 13570 ARLINGTON VA 22219

2. FEC IDENTIFICATION NUMBER C C00762591 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report. (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31. (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special. Election on 11/08/2022 in the State of. (d) 30-Day POST-Election Report for the: General, Runoff, Special. Election on in the State of.

5. Covering Period 10/01/2022 through 10/19/2022

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

Signature of Treasurer CRATE, BRADLEY, T., , [Electronically Filed] Date 10/27/2022

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

SAVE AMERICA

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2022"/>		105445452.02
(b) Cash on Hand at Beginning of Reporting Period.....	92280487.26	
(c) Total Receipts (from Line 19)	25559.90	21858463.80
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	92306047.16	127303915.82
7. Total Disbursements (from Line 31).....	22583163.71	57581032.37
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	69722883.45	69722883.45
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)	1458600.94	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

SAVE AMERICA

Report Covering the Period: From: 10 / 01 / 2022 To: 10 / 19 / 2022

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).....	13129.00	62594.70
(ii) Unitemized	11405.53	76379.33
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	24534.53	138974.03
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	150.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	24534.53	139124.03
12. Transfers From Affiliated/Other Party Committees.....	0.00	21703203.20
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).....	1025.37	1386.57
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	14750.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	25559.90	21858463.80
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	25559.90	21858463.80

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	1933163.71	28089244.86
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1933163.71	28089244.86
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	20000000.00	25040000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	752.97
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	752.97
29. Other Disbursements (Including Non-Federal Donations).....	650000.00	4451000.00
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)) ..	22583163.71	57580997.83
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	22583163.71	57580997.83

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)	25559.90	139124.03
34. Total Contribution Refunds (from Line 28(d))	0.00	752.97
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	25559.90	138371.06
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1933163.71	28089244.86
37. Offsets to Operating Expenditures (from Line 15, page 3).....	1025.37	1386.57
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1934189.08	28087858.29

: 97 `A -G7 9 @ @ B9 CI G`H9 LH`F9 @ H98 `HC `5 `F9 DCF HZ`G7 <98 I @ `CF `H9 A -N5 H-CB

Form/Schedule: F3XN
Transaction ID :

The Committee submits this statement to provide clarification on certain entries reflected on the Committee's Pre-General ('the Report'). With respect to any contributions by LLCs, contributors with mailing addresses outside of the United States, or non-federal committees reflected on the Report, the Committee has safeguards in place consistent with FEC regulations and guidance to ensure that all contributions are made by permissible contributors, using permissible funds. Furthermore, the Committee has reviewed all reimbursements to individuals for travel and subsistence and confirms that no further itemization is required on the Report for these expenditures under FEC regulations. Any difference in the amount of reimbursement live entries and their supporting memo entries is the result of reimbursements to vendors that did not exceed the \$200 itemization threshold for the election cycle.

Form/Schedule: F3XN
Transaction ID:

The Committee follows the three-fold process required to meet the Commission's best efforts standards. Every solicitation includes a clear and conspicuous request for contributor information and informs the contributor of the requirements of federal law for the reporting of such information. If the information is not initially received, within 30 days of receipt, the contributor receives a request to provide this information. Any follow up request clearly asks for the missing information and does not contain a solicitation for a new contribution. These requests are generally made by phone or email or by letter. This request restates the requirements of federal law for the requesting and reporting of such information. If the request is sent by mail, it includes a pre-addressed return envelope. If the information is received by the Committee, it is updated and the affected report will be amended to reflect the new information or the Committee will submit the new information via miscellaneous filing.

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 72
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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)
SAVE AMERICA

A. ALMOND, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1142 STOKES RD

City CANTON	State MS	Zip Code 39046
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	04	/	2022

Transaction ID : SA11AI.81663863

Amount of Each Receipt this Period
1000.00

Memo Item

B. CHUNG, JIN, H, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3515 146TH ST. #2B

City FLUSHING	State NY	Zip Code 11354
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED	Occupation (for Individual) INFORMATION REQUESTED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
840.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	17	/	2022

Transaction ID : SA11AI.81813707

Amount of Each Receipt this Period
220.00

Memo Item

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

Mailing Address PO BOX 401119

City HESPERIA	State CA	Zip Code 92340
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED	Occupation (for Individual) INFORMATION REQUESTED
--	--

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
10	/	04	/	2022

Transaction ID : SA11AI.81663865

Amount of Each Receipt this Period
300.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1520.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 72
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

A. MCTAVISH, ELSA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 40 BROOKHAVEN DR

City LITTLETON	State CO	Zip Code 80123
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED	Occupation (for Individual) INFORMATION REQUESTED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	17	/	2022

Transaction ID : SA11AI.81813714

Amount of Each Receipt this Period
10000.00

Memo Item
EXCESS TO BE REATTRIBUTED OR REFUNDED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
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FEC ID number of contributing federal political committee. **C** C00694323

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

Aggregate Year-to-Date ▼
82203.01

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	04	/	2022

Transaction ID : SA11AI.81633061

Amount of Each Receipt this Period
- 93.00

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. ITEMIZED IF REQUIRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
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FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
82203.01

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2022

Transaction ID : SA11AI.81659364

Amount of Each Receipt this Period
1190.30

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. ITEMIZED IF REQUIRED

SUBTOTAL of Receipts This Page (optional).....	10000.00
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 72
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

A. CHAPMAN, ANDREA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 211 IOWA ST
 City SANTA ROSA State CA Zip Code 95401
 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 ▼ 900.00

Date of Receipt 10 / 01 / 2022
Transaction ID : SA11AI.81659412
 Amount of Each Receipt this Period 100.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11AI.81659364]

B. CHEN, CHIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 950 IVY PARKWAY DR
 City HOUSTON State TX Zip Code 77077
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 10 / 03 / 2022
Transaction ID : SA11AI.81659442
 Amount of Each Receipt this Period 95.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11AI.81659364]

C. DIREWOLF, TRAVIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3118 STERLING ST
 City ABILENE State TX Zip Code 79606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USAF Occupation (for Individual) MILITARY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt 10 / 01 / 2022
Transaction ID : SA11AI.81659417
 Amount of Each Receipt this Period 45.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11AI.81659364]

SUBTOTAL of Receipts This Page (optional).....	240.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 72
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

A. MURPHY, JEFF, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3910 W 6TH AVE

City STILLWATER	State OK	Zip Code 74074
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNION PACIFIC	Occupation (for Individual) SIGNAL SUPERVISOR
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
427.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	02	/	2022

Transaction ID : SA11AI.81659422

Amount of Each Receipt this Period
42.75

Memo Item
EARMARKED THROUGH WINRED [SA11AI.81659364]

B. NICHOLS, GINGER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 101 PROMONTORY RD

City COLUMBIA	State SC	Zip Code 29209
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) CPA
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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
10	/	02	/	2022

Transaction ID : SA11AI.81659395

Amount of Each Receipt this Period
25.00

Memo Item
EARMARKED THROUGH WINRED [SA11AI.81659364]

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

Mailing Address 4805 BARTLETTS VISION DR

City BOWIE	State MD	Zip Code 20720
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
427.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	01	/	2022

Transaction ID : SA11AI.81659428

Amount of Each Receipt this Period
42.75

Memo Item
EARMARKED THROUGH WINRED [SA11AI.81659364]

SUBTOTAL of Receipts This Page (optional).....	110.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 72
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

A. WENDT, BARBARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13017 PARKTREE CT
 City NAPLES State FL Zip Code 34110
 FEC ID number of contributing 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 10 / 03 / 2022
Transaction ID : SA11AI.81659401
 Amount of Each Receipt this Period 25.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11AI.81659364]

B. WOODY, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8332 STORM CHASER DR
 City FORT WORTH State TX Zip Code 76131
 FEC ID number of contributing 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 10 / 01 / 2022
Transaction ID : SA11AI.81659439
 Amount of Each Receipt this Period 25.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11AI.81659364]

C. WINRED
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9891
 City ARLINGTON State VA Zip Code 22219
 FEC ID number of contributing federal political committee. **C** C00694323
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 82203.01

Date of Receipt 10 / 07 / 2022
Transaction ID : SA11AI.81687343
 Amount of Each Receipt this Period 427.06
 Memo Item
 TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. ITEMIZED IF REQUIRED

SUBTOTAL of Receipts This Page (optional).....	50.00
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 72
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. HALLENBECK, GEORGE, , ,

Mailing Address **22 VAN RENSELAER AVE**

City STAMFORD	State CT	Zip Code 06902
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
10 / 03 / 2022

Transaction ID : SA11AI.81687439

Amount of Each Receipt this Period
25.00

Memo Item
EARMARKED THROUGH WINRED [SA11AI.81687343]

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. MILLINGTON, ANDREW, , ,

Mailing Address **240 MONTCLAIR LN**

City SALINAS	State CA	Zip Code 93906
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) PLUMBER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
237.50

Date of Receipt
10 / 04 / 2022

Transaction ID : SA11AI.81687425

Amount of Each Receipt this Period
23.75

Memo Item
EARMARKED THROUGH WINRED [SA11AI.81687343]

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

Mailing Address **PO BOX 9891**

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
82203.01

Date of Receipt
10 / 11 / 2022

Transaction ID : SA11AI.81690242

Amount of Each Receipt this Period
697.29

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. ITEMIZED IF REQUIRED

SUBTOTAL of Receipts This Page (optional).....	48.75
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 72
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

A. HALLENBECK, GEORGE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22 VAN RENSSELAER AVE

City STAMFORD	State CT	Zip Code 06902
------------------	-------------	-------------------

FEC ID number of contributing 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
10	/	05	/	2022

Transaction ID : SA11AI.81690399

Amount of Each Receipt this Period
25.00

Memo Item
EARMARKED THROUGH WINRED [SA11AI.81690242]

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

Mailing Address PO BOX 9891

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
82203.01

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	12	/	2022

Transaction ID : SA11AI.81775526

Amount of Each Receipt this Period
732.00

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. ITEMIZED IF REQUIRED

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

Mailing Address 22 VAN RENSSELAER AVE

City STAMFORD	State CT	Zip Code 06902
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2022

Transaction ID : SA11AI.81775559

Amount of Each Receipt this Period
25.00

Memo Item
EARMARKED THROUGH WINRED [SA11AI.81775526]

SUBTOTAL of Receipts This Page (optional).....▶	50.00
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 14 OF 72
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

A. HERRICK, STEVEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 684 MARGARITA AVE

City CORONADO	State CA	Zip Code 92118
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2022

Transaction ID : SA11AI.81775561

Amount of Each Receipt this Period
47.50

Memo Item
EARMARKED THROUGH WINRED [SA11AI.81775526]

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

Mailing Address PO BOX 9891

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
82203.01

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2022

Transaction ID : SA11AI.81778779

Amount of Each Receipt this Period
217.45

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. ITEMIZED IF REQUIRED

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

Mailing Address PO BOX 9891

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

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

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
82203.01

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2022

Transaction ID : SA11AI.81790760

Amount of Each Receipt this Period
1817.16

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. ITEMIZED IF REQUIRED

SUBTOTAL of Receipts This Page (optional).....	47.50
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 72
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

A. FLETCHER, TOM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5545 OAKDALE CT
 City LEWIS CENTER State OH Zip Code 43035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) FINANCIAL ADVISOR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00
 Date of Receipt 10 / 09 / 2022
 Transaction ID : SA11AI.81790835
 Amount of Each Receipt this Period 100.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11AI.81790760]

B. HALLENBECK, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 VAN RENSSELAER AVE
 City STAMFORD State CT Zip Code 06902
 FEC ID number of contributing 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 10 / 11 / 2022
 Transaction ID : SA11AI.81790804
 Amount of Each Receipt this Period 25.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11AI.81790760]

C. HALLENBECK, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 VAN RENSSELAER AVE
 City STAMFORD State CT Zip Code 06902
 FEC ID number of contributing 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 10 / 09 / 2022
 Transaction ID : SA11AI.81790805
 Amount of Each Receipt this Period 25.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11AI.81790760]

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
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 16 OF 72
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

A. HALLENBECK, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 VAN RENSELAER AVE
 City STAMFORD State CT Zip Code 06902
 FEC ID number of contributing 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 10 / 08 / 2022
Transaction ID : SA11AI.81790806
 Amount of Each Receipt this Period 25.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11AI.81790760]

B. LE, THU, CUC THI, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10056 18TH AVE SW
 City SEATTLE State WA Zip Code 98146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELLER Occupation (for Individual) TRAVEL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 256.50

Date of Receipt 10 / 10 / 2022
Transaction ID : SA11AI.81790841
 Amount of Each Receipt this Period 42.75
 Memo Item
 EARMARKED THROUGH WINRED [SA11AI.81790760]

C. WINRED
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9891
 City ARLINGTON State VA Zip Code 22219
 FEC ID number of contributing federal political committee. **C** C00694323
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 82203.01

Date of Receipt 10 / 17 / 2022
Transaction ID : SA11AI.81806465
 Amount of Each Receipt this Period 954.51
 Memo Item
 TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. ITEMIZED IF REQUIRED

SUBTOTAL of Receipts This Page (optional).....▶ 67.75
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 72
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

A. CARR, MARIE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3673 COCHRAN HWY

City EASTMAN	State GA	Zip Code 31023
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2022

Transaction ID : SA11AI.81806825

Amount of Each Receipt this Period
47.50

Memo Item
EARMARKED THROUGH WINRED [SA11AI.81806465]

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
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FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
82203.01

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2022

Transaction ID : SA11AI.81810135

Amount of Each Receipt this Period
169.26

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. ITEMIZED IF REQUIRED

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

Mailing Address 110 GEMSTONE

City BOERNE	State TX	Zip Code 78006
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2022

Transaction ID : SA11AI.81811122

Amount of Each Receipt this Period
- 47.50

Memo Item
EARMARKED THROUGH WINRED [SA11AI.81810135]; CHARGEBACK

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 72
	<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)
SAVE AMERICA

A. BRAGG, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2125 MAMMATUS DR

City SPARKS	State NV	Zip Code 89441
----------------	-------------	-------------------

FEC ID number of contributing 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
10		16		2022

Transaction ID : SA11AI.81858870

Amount of Each Receipt this Period
45.00

Memo Item
EARMARKED THROUGH WINRED [SA11AI.81858135]

B. HALL, TIM, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 600 MUD CREEK RD

City ALBANY	State GA	Zip Code 31721
----------------	-------------	-------------------

FEC ID number of contributing 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
10		15		2022

Transaction ID : SA11AI.81858894

Amount of Each Receipt this Period
500.00

Memo Item
EARMARKED THROUGH WINRED [SA11AI.81858135]

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

Mailing Address 10871 HARROGATE PL

City SANTA ANA	State CA	Zip Code 92705
-------------------	-------------	-------------------

FEC ID number of contributing 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
10		16		2022

Transaction ID : SA11AI.81858848

Amount of Each Receipt this Period
49.50

Memo Item
EARMARKED THROUGH WINRED [SA11AI.81858135]

SUBTOTAL of Receipts This Page (optional).....	594.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 72
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

A. WINRED
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 9891

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
82203.01

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 19 / 2022
Transaction ID : SA11AI.81846947

Amount of Each Receipt this Period
378.64

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. ITEMIZED IF REQUIRED

B. NEFF, RICHARD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 103 BITTERN CT

City LADSON	State SC	Zip Code 29456
----------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)
AFFORDABLE BUSINESS MACHINES INC PRESIDENT

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
10 / 19 / 2022
Transaction ID : SA11AI.81895965

Amount of Each Receipt this Period
250.00

Memo Item
EARMARKED THROUGH WINRED [SA11AI.81895374]

C. WINRED
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 9891

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
82203.01

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 19 / 2022
Transaction ID : SA11AI.81858135

Amount of Each Receipt this Period
1545.37

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. ITEMIZED IF REQUIRED

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 72
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

A. WINRED

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

Mailing Address PO BOX 9891

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
82203.01

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2022

Transaction ID : SA11AI.81865172

Amount of Each Receipt this Period
2418.14

Memo Item
 TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. ITEMIZED IF REQUIRED

B. WINRED

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

Mailing Address PO BOX 9891

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
82203.01

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2022

Transaction ID : SA11AI.81877836

Amount of Each Receipt this Period
345.23

Memo Item
 TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. ITEMIZED IF REQUIRED

C. WINRED

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

Mailing Address PO BOX 9891

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
82203.01

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2022

Transaction ID : SA11AI.81895374

Amount of Each Receipt this Period
255.00

Memo Item
 TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. ITEMIZED IF REQUIRED

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	13129.00

**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 72
(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)
SAVE AMERICA

A. UNITEDHEALTH GROUP
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1459

City MINNEAPOLIS	State MN	Zip Code 55440
---------------------	-------------	-------------------

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 ▼
970.37

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	10	/	2022

Transaction ID : SA15.81752149

Amount of Each Receipt this Period
970.37

Memo Item
VENDOR REFUND: OVERPAYMENT

B. AMERICAN EXPRESS
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 200 VESEY ST

City NEW YORK	State NY	Zip Code 10285
------------------	-------------	-------------------

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 ▼
390.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	07	/	2022

Transaction ID : SA15.1

Amount of Each Receipt this Period
55.00

Memo Item
VENDOR REFUND: OVERPAYMENT

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1025.37
TOTAL This Period (last page this line number only).....	1025.37

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

Full Name (Last, First, Middle Initial) A. ACE SPECIALTIES, LLC		Date of Disbursement MM / DD / YYYY 10 / 12 / 2022
Mailing Address PO BOX 80427		FEC Identification Number C [] Transaction ID : SB21B.92119 Amount of Each Disbursement this Period 7795.61
City LAFAYETTE	State LA	Zip Code 70598
Purpose of Disbursement COLLATERAL: CAPS, SIGNS, & FREIGHT		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. ACUMEN SOLUTIONS GROUP LLC		Date of Disbursement MM / DD / YYYY 10 / 11 / 2022
Mailing Address 600 BROADHOLLOW ROAD SUITE 200		FEC Identification Number C [] Transaction ID : SB21B.92108 Amount of Each Disbursement this Period 2500.00
City MELVILLE	State NY	Zip Code 11747
Purpose of Disbursement INSURANCE		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. ACUMEN SOLUTIONS GROUP LLC		Date of Disbursement MM / DD / YYYY 10 / 12 / 2022
Mailing Address 600 BROADHOLLOW ROAD SUITE 200		FEC Identification Number C [] Transaction ID : SB21B.92214 Amount of Each Disbursement this Period 3000.00
City MELVILLE	State NY	Zip Code 11747
Purpose of Disbursement INSURANCE		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	13295.61
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

A. BCVM SERVICES LLC

Full Name (Last, First, Middle Initial)

Mailing Address 1512 E BROWARD BLVD
UNIT 104B

City FORT LAUDERDALE State FL Zip Code 33301

Purpose of Disbursement RADIO ADVERTISING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 12 / 2022

FEC Identification Number: C

Transaction ID : SB21B.92157

Amount of Each Disbursement this Period: 20500.00

Memo Item

B. BELMONT STRATEGIES LLC

Full Name (Last, First, Middle Initial)

Mailing Address 184 WEST BOYLSTON ST.

City WEST BOYLSTON State MA Zip Code 01583

Purpose of Disbursement COMMUNICATIONS CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 03 / 2022

FEC Identification Number: C

Transaction ID : SB21B.92103

Amount of Each Disbursement this Period: 10000.00

Memo Item

C. C&M TRANSCONTINENTAL, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 186 TALMAGE RD

City MENDHAM State NJ Zip Code 07945

Purpose of Disbursement ADVANCE CONSULTING & TRAVEL EXPENSES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 10 / 2022

FEC Identification Number: C

Transaction ID : SB21B.92111

Amount of Each Disbursement this Period: 15093.23

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 45593.23

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

A. CHAIKENLAW LTD.

Full Name (Last, First, Middle Initial)

Mailing Address **ONE ATLANTIC CENTER
1201 W. PEACHTREE STREET STE 2300**

City **ATLANTA** State **GA** Zip Code **30309**

Purpose of Disbursement **LEGAL CONSULTING**

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: **10 / 03 / 2022**

FEC Identification Number: **C**

Transaction ID : SB21B.92107

Amount of Each Disbursement this Period: **35291.34**

Memo Item

B. CHRIS KISE & ASSOCIATES, P.A.

Full Name (Last, First, Middle Initial)

Mailing Address **6788 HEARTLAND CIR**

City **TALLAHASSEE** State **FL** Zip Code **32312**

Purpose of Disbursement **LEGAL CONSULTING**

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: **10 / 18 / 2022**

FEC Identification Number: **C**

Transaction ID : SB21B.92387

Amount of Each Disbursement this Period: **370169.09**

Memo Item

C. CITY OF STERLING HEIGHTS

Full Name (Last, First, Middle Initial)

Mailing Address **40555 UTICA ROAD
PO BOX 8009**

City **STERLING HEIGHTS** State **MI** Zip Code **48311**

Purpose of Disbursement **SECURITY SERVICES**

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: **10 / 12 / 2022**

FEC Identification Number: **C**

Transaction ID : SB21B.92225

Amount of Each Disbursement this Period: **7016.56**

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ **412476.99**

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

Full Name (Last, First, Middle Initial) A. CLAYTON HENSON CONSULTING, LLC		Date of Disbursement MM / DD / YYYY 10 / 12 / 2022
Mailing Address 7341 PATCH COURT		FEC Identification Number C [] Transaction ID : SB21B.92182 Amount of Each Disbursement this Period 13317.95
City CANAL WINCHESTER	State OH	Zip Code 43110
Purpose of Disbursement STRATEGY CONSULTING & TRAVEL EXPENSES		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. COMPASS LEGAL SERVICES, INC.		Date of Disbursement MM / DD / YYYY 10 / 04 / 2022
Mailing Address 300 INDEPENDENCE AVENUE, SE		FEC Identification Number C [] Transaction ID : SB21B.92126 Amount of Each Disbursement this Period 15000.00
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement LEGAL CONSULTING		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. CONTINENTAL PLLC		Date of Disbursement MM / DD / YYYY 10 / 07 / 2022
Mailing Address 255 ALHAMBRA CIRCLE SUITE 640		FEC Identification Number C [] Transaction ID : SB21B.92222 Amount of Each Disbursement this Period 172344.11
City CORAL GABLES	State FL	Zip Code 33134
Purpose of Disbursement LEGAL CONSULTING		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	200662.06
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

Full Name (Last, First, Middle Initial)
A. DEX IMAGING

Date of Disbursement: MM / DD / YYYY
10 / 10 / 2022

Mailing Address PO BOX 17299

City CLEARWATER State FL Zip Code 33762

Purpose of Disbursement OFFICE EQUIPMENT

Candidate Name

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

State: District:

FEC Identification Number: C
Transaction ID : SB21B.92150
Amount of Each Disbursement this Period: 150.94

Memo Item

Full Name (Last, First, Middle Initial)
B. DOUGLAS COUNTY & UNINCORPORATED TOWNS

Date of Disbursement: MM / DD / YYYY
10 / 06 / 2022

Mailing Address PO BOX 218

City MINDEN State NV Zip Code 89423

Purpose of Disbursement FACILITY RENTAL

Candidate Name

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

State: District:

FEC Identification Number: C
Transaction ID : SB21B.92029
Amount of Each Disbursement this Period: 19820.00

Memo Item

Full Name (Last, First, Middle Initial)
C. EARTH & WATER LAW, LLC

Date of Disbursement: MM / DD / YYYY
10 / 12 / 2022

Mailing Address 1455 PENNSYLVANIA AVE NW STE 400

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement LEGAL CONSULTING

Candidate Name

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

State: District:

FEC Identification Number: C
Transaction ID : SB21B.92242
Amount of Each Disbursement this Period: 12935.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 32905.94

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

Full Name (Last, First, Middle Initial)
A. ELECTIONS, LLC

Date of Disbursement: MM / DD / YYYY
10 / 03 / 2022

Mailing Address: 1050 CONNECTICUT AVE NW
SUITE 500

City: WASHINGTON State: DC Zip Code: 20036

Purpose of Disbursement: LEGAL CONSULTING

Candidate Name: _____

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

Disbursement For: Primary General Other (specify) ▼

FEC Identification Number: **C** _____
Transaction ID : **SB21B.92109**
Amount of Each Disbursement this Period: 10000.00

Memo Item

Full Name (Last, First, Middle Initial)
B. EVENT STRATEGIES, INC.

Date of Disbursement: MM / DD / YYYY
10 / 12 / 2022

Mailing Address: 510 KING STREET
SUITE 410

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: AUDIO VISUAL SERVICES, EVENT STAGING EXPENSE & TRAVEL EXPENSES

Candidate Name: _____

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

Disbursement For: Primary General Other (specify) ▼

FEC Identification Number: **C** _____
Transaction ID : **SB21B.92179**
Amount of Each Disbursement this Period: 413077.94

Memo Item

Full Name (Last, First, Middle Initial)
C. GABRIEL STRATEGIES LLC

Date of Disbursement: MM / DD / YYYY
10 / 11 / 2022

Mailing Address: PO BOX 10

City: RUMSON State: NJ Zip Code: 07760

Purpose of Disbursement: STRATEGY CONSULTING

Candidate Name: _____

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

Disbursement For: Primary General Other (specify) ▼

FEC Identification Number: **C** _____
Transaction ID : **SB21B.92025**
Amount of Each Disbursement this Period: 15000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 438077.94

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

A. GEORGETOWN ADVISORY

Full Name (Last, First, Middle Initial)

Mailing Address 414 SAYRE DR.

City
PRINCETON

State
NJ

Zip Code
08540

Purpose of Disbursement
MEETING EXPENSE REIMBURSEMENT: MEALS

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			11			2022			

FEC Identification Number

C []
Transaction ID : SB21B.92029
Amount of Each Disbursement this Period
[] 400.00 []

Memo Item

B. GREATAMERICA FINANCIAL SERVICES

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 660831

City
DALLAS

State
TX

Zip Code
75266

Purpose of Disbursement
OFFICE EQUIPMENT

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			10			2022			

FEC Identification Number

C []
Transaction ID : SB21B.92150
Amount of Each Disbursement this Period
[] 573.81 []

Memo Item

C. HABBA MADAI & ASSOCIATES LLP

Full Name (Last, First, Middle Initial)

Mailing Address 1430 U.S. HIGHWAY 206, SUITE 240

City
BEDMINSTER

State
NJ

Zip Code
07921

Purpose of Disbursement
LEGAL CONSULTING

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			11			2022			

FEC Identification Number

C []
Transaction ID : SB21B.92235
Amount of Each Disbursement this Period
[] 151763.23 []

Memo Item

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

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

[]	152737.04	[]
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[]		[]
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

A. HERVE PIERRE BRAILLARD

Full Name (Last, First, Middle Initial)

Mailing Address 225 5TH AVENUE #9K

City NEW YORK State NY Zip Code 10010

Purpose of Disbursement STRATEGY CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 04 / 2022

FEC Identification Number: C

Transaction ID : SB21B.92118

Amount of Each Disbursement this Period: 18000.00

Memo Item

B. HIGH GROUND STRATEGIES LLC

Full Name (Last, First, Middle Initial)

Mailing Address 1501 42ND STREET, SUITE 500

City WEST DES MOINES State IA Zip Code 50266

Purpose of Disbursement POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 11 / 2022

FEC Identification Number: C

Transaction ID : SB21B.92103

Amount of Each Disbursement this Period: 9505.92

Memo Item

C. HUMANA

Full Name (Last, First, Middle Initial)

Mailing Address 500 WEST MAIN STREET

City LOUISVILLE State KY Zip Code 40202

Purpose of Disbursement INSURANCE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 03 / 2022

FEC Identification Number: C

Transaction ID : SB21B.9134t

Amount of Each Disbursement this Period: 394.13

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 27900.05

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

Full Name (Last, First, Middle Initial) A. JOHN F. LAURO, P.A.		Date of Disbursement MM / DD / YYYY 10 / 05 / 2022	
Mailing Address 400 N. TAMPA STREET 15TH FLOOR		FEC Identification Number C [REDACTED] Transaction ID : SB21B.92077 Amount of Each Disbursement this Period 50000.00	
City TAMPA	State FL	Zip Code 33602	Category/ Type
Purpose of Disbursement LEGAL CONSULTING			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. JPROWLEY LAW PLLC		Date of Disbursement MM / DD / YYYY 10 / 05 / 2022	
Mailing Address 8639 CHASE GLEN CIR.		FEC Identification Number C [REDACTED] Transaction ID : SB21B.92179 Amount of Each Disbursement this Period 24854.38	
City FAIRFAX STATION	State VA	Zip Code 22039	Category/ Type
Purpose of Disbursement LEGAL CONSULTING			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. JPROWLEY LAW PLLC		Date of Disbursement MM / DD / YYYY 10 / 07 / 2022	
Mailing Address 8639 CHASE GLEN CIR.		FEC Identification Number C [REDACTED] Transaction ID : SB21B.92222 Amount of Each Disbursement this Period 25000.00	
City FAIRFAX STATION	State VA	Zip Code 22039	Category/ Type
Purpose of Disbursement LEGAL CONSULTING			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

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

99854.38

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

A. MAGNOLIA MANAGEMENT LLC

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 4160 NW 58TH STREET

M	M	/	D	D	/	Y	Y	Y	Y
10			12			2022			

City
COCONUT CREEK

State
FL

Zip Code
33073

FEC Identification Number

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

C

Transaction ID : **SB21B.92269**
Amount of Each Disbursement this Period

Candidate Name

Category/
Type

9166.66

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

State: District:

B. NEW AGE CONSULTING LLC

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1712 PIONEER AVE. SUITE 500

M	M	/	D	D	/	Y	Y	Y	Y
10			14			2022			

City
CHEYENNE

State
WY

Zip Code
82001

FEC Identification Number

Purpose of Disbursement
LEGAL CONSULTING

C

Transaction ID : **SB21B.92103**
Amount of Each Disbursement this Period

Candidate Name

Category/
Type

8333.33

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

State: District:

C. OVG FACILITIES, LLC

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1100 GLENDON AVE, SUITE 2100

M	M	/	D	D	/	Y	Y	Y	Y
10			06			2022			

City
LOS ANGELES

State
CA

Zip Code
90024

FEC Identification Number

Purpose of Disbursement
FACILITY RENTAL

C

Transaction ID : **SB21B.92211**
Amount of Each Disbursement this Period

Candidate Name

Category/
Type

4788.00

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

State: District:

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

22287.99

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

A. PARSCALE STRATEGY, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 1512 E BROWARD STE #104B

City FORT LAUDERDALE State FL Zip Code 33301

Purpose of Disbursement DIGITAL CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 04 / 2022

FEC Identification Number: C

Transaction ID : SB21B.92102

Amount of Each Disbursement this Period: 10000.00

Memo Item

B. AMBROSINI, CHRISTOPHER, , ,

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 13570

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 14 / 2022

FEC Identification Number: C

Transaction ID : SB21B.92306

Amount of Each Disbursement this Period: 4583.77

Memo Item

C. BALL, LUKE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 13570

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 14 / 2022

FEC Identification Number: C

Transaction ID : SB21B.92306

Amount of Each Disbursement this Period: 3313.06

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 17896.83

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

A. BOBB, CHRISTINA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 13570

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 14 / 2022

FEC Identification Number: C

Transaction ID : SB21B.92306

Amount of Each Disbursement this Period: 6025.51

Memo Item

B. BUDOWICH, TAYLOR, , ,

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 13570

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 14 / 2022

FEC Identification Number: C

Transaction ID : SB21B.92306

Amount of Each Disbursement this Period: 4820.72

Memo Item

C. CENTINELLO, DARREN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 13570

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 14 / 2022

FEC Identification Number: C

Transaction ID : SB21B.92306

Amount of Each Disbursement this Period: 5057.17

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 15903.40

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

Full Name (Last, First, Middle Initial) A. D'ANTUONO, HAYLEY, L, ,		Date of Disbursement MM / DD / YYYY 10 / 14 / 2022	
Mailing Address P.O. BOX 13570		FEC Identification Number C [REDACTED] Transaction ID : SB21B.92306 Amount of Each Disbursement this Period 4075.03	
City ARLINGTON	State VA	Zip Code 22219	Category/ Type [REDACTED]
Purpose of Disbursement PAYROLL		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. DRISCOLL, MACKENZIE, , ,		Date of Disbursement MM / DD / YYYY 10 / 14 / 2022	
Mailing Address P.O. BOX 13570		FEC Identification Number C [REDACTED] Transaction ID : SB21B.92306 Amount of Each Disbursement this Period 973.23	
City ARLINGTON	State VA	Zip Code 22219	Category/ Type [REDACTED]
Purpose of Disbursement PAYROLL		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. FAUPEL, MADISON, , ,		Date of Disbursement MM / DD / YYYY 10 / 14 / 2022	
Mailing Address P.O. BOX 13570		FEC Identification Number C [REDACTED] Transaction ID : SB21B.92306 Amount of Each Disbursement this Period 3717.85	
City ARLINGTON	State VA	Zip Code 22219	Category/ Type [REDACTED]
Purpose of Disbursement PAYROLL		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	8766.11
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

Full Name (Last, First, Middle Initial) A. FINZER, MARY, C, ,		Date of Disbursement MM / DD / YYYY 10 / 14 / 2022	
Mailing Address P.O. BOX 13570		FEC Identification Number C [REDACTED] Transaction ID : SB21B.92306	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period [REDACTED] 2751.95
Purpose of Disbursement PAYROLL		Category/Type [REDACTED]	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. HALLIGAN, LINDSEY, , ,		Date of Disbursement MM / DD / YYYY 10 / 14 / 2022	
Mailing Address P.O. BOX 13570		FEC Identification Number C [REDACTED] Transaction ID : SB21B.92306	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period [REDACTED] 7256.43
Purpose of Disbursement PAYROLL		Category/Type [REDACTED]	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. HARP, NATALIE, , ,		Date of Disbursement MM / DD / YYYY 10 / 14 / 2022	
Mailing Address P.O. BOX 13570		FEC Identification Number C [REDACTED] Transaction ID : SB21B.92306	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period [REDACTED] 4658.23
Purpose of Disbursement PAYROLL		Category/Type [REDACTED]	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 14666.61
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

Full Name (Last, First, Middle Initial) A. HARRIS, CHAMBERLAIN, R, ,		Date of Disbursement MM / DD / YYYY 10 / 14 / 2022	
Mailing Address P.O. BOX 13570		FEC Identification Number C [REDACTED] Transaction ID : SB21B.92306 Amount of Each Disbursement this Period 3232.57	
City ARLINGTON	State VA	Zip Code 22219	Category/ Type
Purpose of Disbursement PAYROLL			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. HARRISON, WILLIAM, B, ,		Date of Disbursement MM / DD / YYYY 10 / 14 / 2022	
Mailing Address P.O. BOX 13570		FEC Identification Number C [REDACTED] Transaction ID : SB21B.92306 Amount of Each Disbursement this Period 4557.70	
City ARLINGTON	State VA	Zip Code 22219	Category/ Type
Purpose of Disbursement PAYROLL			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. LEICHTER, GRANT, , ,		Date of Disbursement MM / DD / YYYY 10 / 14 / 2022	
Mailing Address P.O. BOX 13570		FEC Identification Number C [REDACTED] Transaction ID : SB21B.92306 Amount of Each Disbursement this Period 990.11	
City ARLINGTON	State VA	Zip Code 22219	Category/ Type
Purpose of Disbursement PAYROLL			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	8780.38
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

Full Name (Last, First, Middle Initial) A. MARTIN, MARGO, M, ,		Date of Disbursement MM / DD / YYYY 10 / 14 / 2022	
Mailing Address P.O. BOX 13570		FEC Identification Number C [] Transaction ID : SB21B.92306 Amount of Each Disbursement this Period 4800.61	
City ARLINGTON	State VA	Zip Code 22219	Category/ Type []
Purpose of Disbursement PAYROLL		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. MILLER, JOANNA, , ,		Date of Disbursement MM / DD / YYYY 10 / 14 / 2022	
Mailing Address P.O. BOX 13570		FEC Identification Number C [] Transaction ID : SB21B.92306 Amount of Each Disbursement this Period 4088.64	
City ARLINGTON	State VA	Zip Code 22219	Category/ Type []
Purpose of Disbursement PAYROLL		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. MILLER, STEPHEN, , ,		Date of Disbursement MM / DD / YYYY 10 / 14 / 2022	
Mailing Address P.O. BOX 13570		FEC Identification Number C [] Transaction ID : SB21B.92306 Amount of Each Disbursement this Period 4193.64	
City ARLINGTON	State VA	Zip Code 22219	Category/ Type []
Purpose of Disbursement PAYROLL		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	13082.89
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

Full Name (Last, First, Middle Initial) A. NAUTA, WALTINE, , ,		Date of Disbursement MM / DD / YYYY 10 / 14 / 2022	
Mailing Address P.O. BOX 13570		FEC Identification Number C [] Transaction ID : SB21B.92306 Amount of Each Disbursement this Period 5227.81	
City ARLINGTON	State VA	Zip Code 22219	Category/ Type []
Purpose of Disbursement PAYROLL		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. PATTON, LYNNE, , ,		Date of Disbursement MM / DD / YYYY 10 / 14 / 2022	
Mailing Address P.O. BOX 13570		FEC Identification Number C [] Transaction ID : SB21B.92306 Amount of Each Disbursement this Period 4658.53	
City ARLINGTON	State VA	Zip Code 22219	Category/ Type []
Purpose of Disbursement PAYROLL		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. PORTER, MADISON, , ,		Date of Disbursement MM / DD / YYYY 10 / 14 / 2022	
Mailing Address P.O. BOX 13570		FEC Identification Number C [] Transaction ID : SB21B.92306 Amount of Each Disbursement this Period 2756.30	
City ARLINGTON	State VA	Zip Code 22219	Category/ Type []
Purpose of Disbursement PAYROLL		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	12642.64
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

Full Name (Last, First, Middle Initial) A. SCAVINO, DANIEL, , ,		Date of Disbursement MM / DD / YYYY 10 / 14 / 2022	
Mailing Address P.O. BOX 13570		FEC Identification Number C [REDACTED] Transaction ID : SB21B.92306 Amount of Each Disbursement this Period 4915.12	
City ARLINGTON	State VA	Zip Code 22219	Category/ Type [REDACTED]
Purpose of Disbursement PAYROLL		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) B. SHEW, ELIZABETH, K, ,		Date of Disbursement MM / DD / YYYY 10 / 14 / 2022	
Mailing Address P.O. BOX 13570		FEC Identification Number C [REDACTED] Transaction ID : SB21B.92306 Amount of Each Disbursement this Period 3843.63	
City ARLINGTON	State VA	Zip Code 22219	Category/ Type [REDACTED]
Purpose of Disbursement PAYROLL		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) C. THOMPSON, DESIREE, , ,		Date of Disbursement MM / DD / YYYY 10 / 14 / 2022	
Mailing Address P.O. BOX 13570		FEC Identification Number C [REDACTED] Transaction ID : SB21B.92306 Amount of Each Disbursement this Period 4943.02	
City ARLINGTON	State VA	Zip Code 22219	Category/ Type [REDACTED]
Purpose of Disbursement PAYROLL		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	13701.77
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

Full Name (Last, First, Middle Initial) A. THURSTON, ELIZA, C, ,		Date of Disbursement MM / DD / YYYY 10 / 14 / 2022	
Mailing Address P.O. BOX 13570		FEC Identification Number C [] Transaction ID : SB21B.92306 Amount of Each Disbursement this Period 3986.66	
City ARLINGTON	State VA	Zip Code 22219	Category/ Type []
Purpose of Disbursement PAYROLL			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. VANHOOSIER, SAM, , ,		Date of Disbursement MM / DD / YYYY 10 / 14 / 2022	
Mailing Address P.O. BOX 13570		FEC Identification Number C [] Transaction ID : SB21B.92306 Amount of Each Disbursement this Period 973.23	
City ARLINGTON	State VA	Zip Code 22219	Category/ Type []
Purpose of Disbursement PAYROLL			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. PAYCHEX		Date of Disbursement MM / DD / YYYY 10 / 14 / 2022	
Mailing Address 1450 CENTREPARK BLVD SUITE 150		FEC Identification Number C [] Transaction ID : SB21B.92306 Amount of Each Disbursement this Period 52794.77	
City WEST PALM BEACH	State FL	Zip Code 33401	Category/ Type []
Purpose of Disbursement PAYROLL TAXES AND WITHHOLDINGS			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	57754.66
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

Full Name (Last, First, Middle Initial)

A. PAYCHEX

Mailing Address 1450 CENTREPARK BLVD
SUITE 150

City WEST PALM BEACH

State FL

Zip Code 33401

Purpose of Disbursement
PAYROLL FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
10 / 14 / 2022

FEC Identification Number

C

Transaction ID : SB21B.92306

Amount of Each Disbursement this Period

259.00

Memo Item

Full Name (Last, First, Middle Initial)

B. RED CURVE SOLUTIONS

Mailing Address 138 CONANT ST
STE 201

City BEVERLY

State MA

Zip Code 01915

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
10 / 11 / 2022

FEC Identification Number

C

Transaction ID : SB21B.92129

Amount of Each Disbursement this Period

25000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. RELX INC. DBA LEXISNEXIS

Mailing Address P.O. BOX 9584

City NEW YORK

State NY

Zip Code 10087

Purpose of Disbursement
SUBSCRIPTIONS

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
10 / 11 / 2022

FEC Identification Number

C

Transaction ID : SB21B.92102

Amount of Each Disbursement this Period

2817.00

Memo Item

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

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

28076.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

Full Name (Last, First, Middle Initial) A. TRISHUL, LLC		Date of Disbursement MM / DD / YYYY 10 / 05 / 2022
Mailing Address 919 FLORIDA AVE NW SUITE 101		FEC Identification Number C [REDACTED] Transaction ID : SB21B.92178 Amount of Each Disbursement this Period 15000.00
City WASHINGTON	State DC	Zip Code 20001
Purpose of Disbursement STRATEGY CONSULTING		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. UNITEDHEALTH GROUP		Date of Disbursement MM / DD / YYYY 10 / 13 / 2022
Mailing Address PO BOX 1459		FEC Identification Number C [REDACTED] Transaction ID : SB21B.92307 Amount of Each Disbursement this Period 4980.05
City MINNEAPOLIS	State MN	Zip Code 55440
Purpose of Disbursement INSURANCE		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. VAN DER VEEN, HARTSHORN AND LEVIN		Date of Disbursement MM / DD / YYYY 10 / 12 / 2022
Mailing Address 1219 SPRUCE ST		FEC Identification Number C [REDACTED] Transaction ID : SB21B.92294 Amount of Each Disbursement this Period 100000.00
City PHILADELPHIA	State PA	Zip Code 19107
Purpose of Disbursement LEGAL CONSULTING		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

119980.05

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

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

A. **VAN DER VEEN, HARTSHORN AND LEVIN**

Full Name (Last, First, Middle Initial)

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			18			2022			

Mailing Address 1219 SPRUCE ST

FEC Identification Number

C []
Transaction ID : SB21B.92388
 Amount of Each Disbursement this Period
 [] 168942.44

City PHILADELPHIA State PA Zip Code 19107

Purpose of Disbursement
LEGAL CONSULTING

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Memo Item

B. **WINRED TECHNICAL SERVICES LLC**

Full Name (Last, First, Middle Initial)

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			03			2022			

Mailing Address 1776 WILSON BLVD
SUITE 530

FEC Identification Number

C []
Transaction ID : SB21B.92071
 Amount of Each Disbursement this Period
 [] 18.31

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement
MERCHANT FEES

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Memo Item

C. **WINRED TECHNICAL SERVICES LLC**

Full Name (Last, First, Middle Initial)

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			04			2022			

Mailing Address 1776 WILSON BLVD
SUITE 530

FEC Identification Number

C []
Transaction ID : SB21B.92091
 Amount of Each Disbursement this Period
 [] 4.84

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement
MERCHANT FEES

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Memo Item

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

[] 168965.59

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

[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

Full Name (Last, First, Middle Initial) A. WINRED TECHNICAL SERVICES LLC			Date of Disbursement MM / DD / YYYY 10 / 05 / 2022	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C [REDACTED] Transaction ID : SB21B.92137	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period [REDACTED] 25.68	
Purpose of Disbursement MERCHANT FEES		Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:				

Full Name (Last, First, Middle Initial) B. WINRED TECHNICAL SERVICES LLC			Date of Disbursement MM / DD / YYYY 10 / 06 / 2022	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C [REDACTED] Transaction ID : SB21B.92169	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period [REDACTED] 52.16	
Purpose of Disbursement MERCHANT FEES		Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:				

Full Name (Last, First, Middle Initial) C. WINRED TECHNICAL SERVICES LLC			Date of Disbursement MM / DD / YYYY 10 / 07 / 2022	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C [REDACTED] Transaction ID : SB21B.92195	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period [REDACTED] 19.17	
Purpose of Disbursement MERCHANT FEES		Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:				

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

97.01

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

Full Name (Last, First, Middle Initial) A. WINRED TECHNICAL SERVICES LLC		Date of Disbursement MM / DD / YYYY 10 / 11 / 2022
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [] Transaction ID : SB21B.92219
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period [] 28.66
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. WINRED TECHNICAL SERVICES LLC		Date of Disbursement MM / DD / YYYY 10 / 12 / 2022
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [] Transaction ID : SB21B.92264
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period [] 30.10
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. WINRED TECHNICAL SERVICES LLC		Date of Disbursement MM / DD / YYYY 10 / 13 / 2022
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [] Transaction ID : SB21B.92283
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period [] 8.95
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	[] 67.71
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

Full Name (Last, First, Middle Initial) A. WINRED TECHNICAL SERVICES LLC		Date of Disbursement MM / DD / YYYY 10 / 14 / 2022
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [REDACTED] Transaction ID : SB21B.92303
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period 74.69
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. WINRED TECHNICAL SERVICES LLC		Date of Disbursement MM / DD / YYYY 10 / 17 / 2022
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [REDACTED] Transaction ID : SB21B.92329
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period 37.99
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. WINRED TECHNICAL SERVICES LLC		Date of Disbursement MM / DD / YYYY 10 / 18 / 2022
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [REDACTED] Transaction ID : SB21B.92355
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period 4.24
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	116.92
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

A. WINRED TECHNICAL SERVICES LLC

Full Name (Last, First, Middle Initial)

Mailing Address 1776 WILSON BLVD
SUITE 530

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 19 / 2022

FEC Identification Number: C

Transaction ID : SB21B.92383

Amount of Each Disbursement this Period: 6.86

Memo Item

B. BALL, LUKE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 13570

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement
TRAVEL REIMBURSEMENT: SEE ITEMIZATIONS IF REQUIRED

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 18 / 2022

FEC Identification Number: C

Transaction ID : SB21B.92386

Amount of Each Disbursement this Period: 2216.82

Memo Item

C. BALL, LUKE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 13570

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement
ADVANCE CONSULTING & TRAVEL: MILEAGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 18 / 2022

FEC Identification Number: C

Transaction ID : SB21B.92386

Amount of Each Disbursement this Period: 1264.92

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2223.68

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

A. AMERICAN AIRLINES

Full Name (Last, First, Middle Initial)

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement REIMBURSEMENT: TRAVEL: BAGGAGE FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 07 / 2022

FEC Identification Number: C

Transaction ID : SB21B.92386

Amount of Each Disbursement this Period: 30.00

Memo Item

B. AMERICAN AIRLINES

Full Name (Last, First, Middle Initial)

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement REIMBURSEMENT: TRAVEL: BAGGAGE FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 09 / 2022

FEC Identification Number: C

Transaction ID : SB21B.92386

Amount of Each Disbursement this Period: 30.00

Memo Item

C. AMERICAN AIRLINES

Full Name (Last, First, Middle Initial)

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement REIMBURSEMENT: TRAVEL: BAGGAGE FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 10 / 2022

FEC Identification Number: C

Transaction ID : SB21B.92386

Amount of Each Disbursement this Period: 30.00

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 Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

A. DELTA AIRLINES

Full Name (Last, First, Middle Initial)

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement REIMBURSEMENT: TRAVEL: BAGGAGE FEE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 30 / 2022

FEC Identification Number: C

Transaction ID : SB21B.92386

Amount of Each Disbursement this Period: 70.00

Memo Item

B. DELTA AIRLINES

Full Name (Last, First, Middle Initial)

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement REIMBURSEMENT: TRAVEL: BAGGAGE FEE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 02 / 2022

FEC Identification Number: C

Transaction ID : SB21B.92386

Amount of Each Disbursement this Period: 70.00

Memo Item

C. GOGO AIR

Full Name (Last, First, Middle Initial)

Mailing Address 942 SOUTH SHADY GROVE ROAD

City MEMPHIS State TN Zip Code 38120

Purpose of Disbursement REIMBURSEMENT: TRAVEL: INTERNET

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 30 / 2022

FEC Identification Number: C

Transaction ID : SB21B.92386

Amount of Each Disbursement this Period: 10.00

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 Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

A. GOGO AIR

Full Name (Last, First, Middle Initial)

Mailing Address 942 SOUTH SHADY GROVE ROAD

City MEMPHIS State TN Zip Code 38120

Purpose of Disbursement REIMBURSEMENT: TRAVEL: INTERNET

Candidate Name

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

State: District:

Date of Disbursement: 10 / 02 / 2022

FEC Identification Number: C

Transaction ID : SB21B.92386

Amount of Each Disbursement this Period: 10.00

Memo Item

B. GOGO AIR

Full Name (Last, First, Middle Initial)

Mailing Address 942 SOUTH SHADY GROVE ROAD

City MEMPHIS State TN Zip Code 38120

Purpose of Disbursement REIMBURSEMENT: TRAVEL: INTERNET

Candidate Name

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

State: District:

Date of Disbursement: 10 / 07 / 2022

FEC Identification Number: C

Transaction ID : SB21B.92386

Amount of Each Disbursement this Period: 29.00

Memo Item

C. LYFT

Full Name (Last, First, Middle Initial)

Mailing Address 185 BERRY STREET #5000

City SAN FRANCISCO State CA Zip Code 94107

Purpose of Disbursement REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

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

State: District:

Date of Disbursement: 10 / 08 / 2022

FEC Identification Number: C

Transaction ID : SB21B.92386

Amount of Each Disbursement this Period: 76.24

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

Full Name (Last, First, Middle Initial) A. NATIONAL CAR RENTAL		Date of Disbursement MM / DD / YYYY 10 / 02 / 2022
Mailing Address 8420 ST. JOHN INDUSTRIAL DRIVE		FEC Identification Number C [] Transaction ID : SB21B.92386 Amount of Each Disbursement this Period [] 279.57
City ST. LOUIS	State MO	Zip Code 63114
Purpose of Disbursement REIMBURSEMENT: TRAVEL: CAR RENTAL		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. RONALD REAGAN WASHINGTON NATIONAL AIRPORT		Date of Disbursement MM / DD / YYYY 10 / 02 / 2022
Mailing Address 3401 SMITH BOULEVARD		FEC Identification Number C [] Transaction ID : SB21B.92386 Amount of Each Disbursement this Period [] 54.00
City ARLINGTON	State VA	Zip Code 20001
Purpose of Disbursement REIMBURSEMENT: PARKING EXPENSE		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. RONALD REAGAN WASHINGTON NATIONAL AIRPORT		Date of Disbursement MM / DD / YYYY 10 / 10 / 2022
Mailing Address 3401 SMITH BOULEVARD		FEC Identification Number C [] Transaction ID : SB21B.92386 Amount of Each Disbursement this Period [] 54.00
City ARLINGTON	State VA	Zip Code 20001
Purpose of Disbursement REIMBURSEMENT: PARKING EXPENSE		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET STREET
#400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 08 / 2022

FEC Identification Number

C
Transaction ID : SB21B.92386
Amount of Each Disbursement this Period
40.98

Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET STREET
#400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 09 / 2022

FEC Identification Number

C
Transaction ID : SB21B.92386
Amount of Each Disbursement this Period
55.32

Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET STREET
#400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 09 / 2022

FEC Identification Number

C
Transaction ID : SB21B.92386
Amount of Each Disbursement this Period
53.96

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET STREET
#400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 09 / 2022

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.92386

Amount of Each Disbursement this Period

[REDACTED] 25.93

Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET STREET
#400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 10 / 2022

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.92386

Amount of Each Disbursement this Period

[REDACTED] 32.90

Memo Item

Full Name (Last, First, Middle Initial)

C. BOBB, CHRISTINA, , ,

Mailing Address P.O. BOX 13570

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement TRAVEL REIMBURSEMENT: SEE ITEMIZATIONS IF REQUIRED

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 12 / 2022

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.92291

Amount of Each Disbursement this Period

[REDACTED] 514.20

Memo Item

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

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

[REDACTED] 514.20

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

A. AMERICAN AIRLINES

Full Name (Last, First, Middle Initial)

Mailing Address 4333 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 06 / 2022

FEC Identification Number: C

Transaction ID : SB21B.92291

Amount of Each Disbursement this Period: 488.20

Memo Item

B. HALLIGAN, LINDSEY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 13570

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement TRAVEL REIMBURSEMENT: SEE ITEMIZATIONS IF REQUIRED

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 12 / 2022

FEC Identification Number: C

Transaction ID : SB21B.92245

Amount of Each Disbursement this Period: 2595.16

Memo Item

C. DESTINATION CONSULTANTS LLC

Full Name (Last, First, Middle Initial)

Mailing Address 188 STRATFORD PLACE

City LAKEWOOD State NJ Zip Code 08701

Purpose of Disbursement REIMBURSEMENT: TRAVEL: LODGING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 28 / 2022

FEC Identification Number: C

Transaction ID : SB21B.92245

Amount of Each Disbursement this Period: 994.40

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2595.16

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

A. JETBLUE AIRLINES

Full Name (Last, First, Middle Initial)

Mailing Address 27-01 QUEENS PLZ N

City LONG ISLAND CITY State NY Zip Code 11101

Purpose of Disbursement REIMBURSEMENT: TRAVEL: AIR

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 19 / 2022

FEC Identification Number: C

Transaction ID : SB21B.92245

Amount of Each Disbursement this Period: 365.20

Memo Item

B. SOUTHERN DISTRICT COURT OF FLORIDA

Full Name (Last, First, Middle Initial)

Mailing Address 299 E BROWARD BLVD

City FORT LAUDERDALE State FL Zip Code 33301

Purpose of Disbursement REIMBURSEMENT: FILING FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 01 / 2022

FEC Identification Number: C

Transaction ID : SB21B.92245

Amount of Each Disbursement this Period: 76.60

Memo Item

C. SOUTHERN DISTRICT COURT OF FLORIDA

Full Name (Last, First, Middle Initial)

Mailing Address 299 E BROWARD BLVD

City FORT LAUDERDALE State FL Zip Code 33301

Purpose of Disbursement REIMBURSEMENT: FILING FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 03 / 2022

FEC Identification Number: C

Transaction ID : SB21B.92245

Amount of Each Disbursement this Period: 402.00

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 Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

Full Name (Last, First, Middle Initial)

A. SOUTHERN DISTRICT COURT OF FLORIDA

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			03			2022			

Mailing Address 299 E BROWARD BLVD

FEC Identification Number

C []
Transaction ID : SB21B.92245
 Amount of Each Disbursement this Period
 [] 200.00

City FORT LAUDERDALE State FL Zip Code 33301

Purpose of Disbursement
REIMBURSEMENT: FILING FEES

[]
Category/
Type

Candidate Name

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

Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
09			19			2022			

Mailing Address 1455 MARKET STREET #400

FEC Identification Number

C []
Transaction ID : SB21B.92245
 Amount of Each Disbursement this Period
 [] 13.67

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

[]
Category/
Type

Candidate Name

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

Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
09			19			2022			

Mailing Address 1455 MARKET STREET #400

FEC Identification Number

C []
Transaction ID : SB21B.92245
 Amount of Each Disbursement this Period
 [] 47.94

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

[]
Category/
Type

Candidate Name

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

Memo Item

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

[] 0.00

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

[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET STREET
#400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 19 / 2022

FEC Identification Number

C
Transaction ID : SB21B.92245
Amount of Each Disbursement this Period
8.85

Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET STREET
#400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 20 / 2022

FEC Identification Number

C
Transaction ID : SB21B.92245
Amount of Each Disbursement this Period
27.64

Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET STREET
#400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 21 / 2022

FEC Identification Number

C
Transaction ID : SB21B.92245
Amount of Each Disbursement this Period
123.28

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET STREET
#400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 21 / 2022

FEC Identification Number

C
Transaction ID : SB21B.92245
Amount of Each Disbursement this Period
8.97

Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET STREET
#400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 24 / 2022

FEC Identification Number

C
Transaction ID : SB21B.92245
Amount of Each Disbursement this Period
108.21

Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET STREET
#400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 29 / 2022

FEC Identification Number

C
Transaction ID : SB21B.92245
Amount of Each Disbursement this Period
109.68

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET STREET
#400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2022

FEC Identification Number

C
Transaction ID : SB21B.92245
Amount of Each Disbursement this Period
108.72

Memo Item

Full Name (Last, First, Middle Initial)

B. HARP, NATALIE, , ,

Mailing Address P.O. BOX 13570

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement REIMBURSEMENT: SEE ITEMIZATIONS IF REQUIRED

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify)

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 03 / 2022

FEC Identification Number

C
Transaction ID : SB21B.92101
Amount of Each Disbursement this Period
285.79

Memo Item

Full Name (Last, First, Middle Initial)

C. AMAZON

Mailing Address 440 TERRY AVE. NORTH

City SEATTLE State WA Zip Code 98109

Purpose of Disbursement REIMBURSEMENT: OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 12 / 2022

FEC Identification Number

C
Transaction ID : SB21B.92101
Amount of Each Disbursement this Period
20.20

Memo Item

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

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

285.79

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

A. AMAZON

Full Name (Last, First, Middle Initial)

Mailing Address 440 TERRY AVE. NORTH

City SEATTLE State WA Zip Code 98109

Purpose of Disbursement REIMBURSEMENT: OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 14 / 2022

FEC Identification Number: C

Transaction ID : SB21B.92101

Amount of Each Disbursement this Period: 64.18

Memo Item

B. AMAZON

Full Name (Last, First, Middle Initial)

Mailing Address 440 TERRY AVE. NORTH

City SEATTLE State WA Zip Code 98109

Purpose of Disbursement REIMBURSEMENT: OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 17 / 2022

FEC Identification Number: C

Transaction ID : SB21B.92101

Amount of Each Disbursement this Period: 93.92

Memo Item

C. AMAZON

Full Name (Last, First, Middle Initial)

Mailing Address 440 TERRY AVE. NORTH

City SEATTLE State WA Zip Code 98109

Purpose of Disbursement REIMBURSEMENT: OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 17 / 2022

FEC Identification Number: C

Transaction ID : SB21B.92101

Amount of Each Disbursement this Period: 17.98

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

Full Name (Last, First, Middle Initial) A. AMAZON		Date of Disbursement MM / DD / YYYY 09 / 20 / 2022
Mailing Address 440 TERRY AVE. NORTH		FEC Identification Number C [] Transaction ID : SB21B.92101 Amount of Each Disbursement this Period [] 14.97
City SEATTLE	State WA	Zip Code 98109
Purpose of Disbursement REIMBURSEMENT: OFFICE SUPPLIES		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. STAPLES		Date of Disbursement MM / DD / YYYY 09 / 20 / 2022
Mailing Address 500 STAPLES DRIVE		FEC Identification Number C [] Transaction ID : SB21B.92101! Amount of Each Disbursement this Period [] 11.01
City FRAMINGHAM	State MA	Zip Code 01702
Purpose of Disbursement REIMBURSEMENT: OFFICE SUPPLIES		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. STAPLES		Date of Disbursement MM / DD / YYYY 09 / 22 / 2022
Mailing Address 500 STAPLES DRIVE		FEC Identification Number C [] Transaction ID : SB21B.92101 Amount of Each Disbursement this Period [] 44.04
City FRAMINGHAM	State MA	Zip Code 01702
Purpose of Disbursement REIMBURSEMENT: OFFICE SUPPLIES		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

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

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

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

FOR LINE NUMBER:
(check only one)

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

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)
SAVE AMERICA

Full Name (Last, First, Middle Initial) A. HARRIS, CHAMBERLAIN, , ,		Date of Disbursement MM / DD / YYYY 10 / 03 / 2022	
Mailing Address P.O. BOX 13570		FEC Identification Number C [] Transaction ID : SB21B.92101 Amount of Each Disbursement this Period [] 265.84	
City ARLINGTON	State VA	Zip Code 22219	Category/ Type []
Purpose of Disbursement TRAVEL REIMBURSEMENT: SEE ITEMIZATIONS IF REQUIRED		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. HARRIS, CHAMBERLAIN, , ,		Date of Disbursement MM / DD / YYYY 10 / 03 / 2022	
Mailing Address P.O. BOX 13570		FEC Identification Number C [] Transaction ID : SB21B.92101 Amount of Each Disbursement this Period [] 75.00	
City ARLINGTON	State VA	Zip Code 22219	Category/ Type []
Purpose of Disbursement ADVANCE CONSULTING		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. FIELD OF GREENS		Date of Disbursement MM / DD / YYYY 10 / 03 / 2022	
Mailing Address 412 CLEMATIS ST		FEC Identification Number C [] Transaction ID : SB21B.92101 Amount of Each Disbursement this Period [] 133.63	
City WEST PALM BEACH	State FL	Zip Code 33401	Category/ Type []
Purpose of Disbursement REIMBURSEMENT: TRAVEL: FOOD		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input checked="" type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	[] 265.84
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

A. NAUTA, WALTINE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 13570

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement ADVANCE CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 05 / 2022

FEC Identification Number: C

Transaction ID : SB21B.92147

Amount of Each Disbursement this Period: 225.00

Memo Item

B. PATTON, LYNNE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 13570

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement TRAVEL REIMBURSEMENT: SEE ITEMIZATIONS IF REQUIRED

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 03 / 2022

FEC Identification Number: C

Transaction ID : SB21B.92109

Amount of Each Disbursement this Period: 764.24

Memo Item

C. HILTON

Full Name (Last, First, Middle Initial)

Mailing Address 7930 JONES BRANCH DR

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement REIMBURSEMENT: TRAVEL: LODGING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 28 / 2022

FEC Identification Number: C

Transaction ID : SB21B.92105

Amount of Each Disbursement this Period: 497.67

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 989.24

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

A. NEW YORK PRIME

Full Name (Last, First, Middle Initial)

Mailing Address 3424 PEACHTREE RD NE
STE 100

City ATLANTA State GA Zip Code 30326

Purpose of Disbursement REIMBURSEMENT: MEETING EXPENSE: MEALS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 30 / 2022

FEC Identification Number: C

Transaction ID : SB21B.92109

Amount of Each Disbursement this Period: 161.67

Memo Item

B. UBER

Full Name (Last, First, Middle Initial)

Mailing Address 1455 MARKET STREET
#400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 28 / 2022

FEC Identification Number: C

Transaction ID : SB21B.92109

Amount of Each Disbursement this Period: 46.13

Memo Item

C. UBER

Full Name (Last, First, Middle Initial)

Mailing Address 1455 MARKET STREET
#400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
10 / 01 / 2022

FEC Identification Number: C

Transaction ID : SB21B.92109

Amount of Each Disbursement this Period: 58.77

Memo Item

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

TOTAL This Period (last page this line number only)..... ▶ 1933163.71

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

A. MAKE AMERICA GREAT AGAIN INC.

Full Name (Last, First, Middle Initial)

Mailing Address C/O BULLDOG COMPLIANCE
138 CONANT STREET STE 202

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement FEDERAL CONTRIBUTION

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 03 / 2022

FEC Identification Number: C C00825851
Transaction ID : SB23.921259

Amount of Each Disbursement this Period: 20000000.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	20000000.00
TOTAL This Period (last page this line number only).....▶	20000000.00

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

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

FOR LINE NUMBER:
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

A. MICHIGANWORKS

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 75650

City WASHINGTON State DC Zip Code 20013

Purpose of Disbursement NON-FEDERAL CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 11 / 2022

FEC Identification Number: C

Transaction ID : SB29.922392

Amount of Each Disbursement this Period: 100000.00

Memo Item

B. FREE AND FAIR ARIZONA ELECTIONS

Full Name (Last, First, Middle Initial)

Mailing Address 1520 BELLE VIEW BLVD #3438

City ALEXANDRIA State VA Zip Code 22307

Purpose of Disbursement NON-FEDERAL CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 11 / 2022

FEC Identification Number: C

Transaction ID : SB29.922393

Amount of Each Disbursement this Period: 250000.00

Memo Item

C. ARISE NEVADA PAC

Full Name (Last, First, Middle Initial)

Mailing Address 6950 O'BANNON STE 100

City LAS VEGAS State NV Zip Code 89166

Purpose of Disbursement NON-FEDERAL CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 18 / 2022

FEC Identification Number: C

Transaction ID : SB29.923964

Amount of Each Disbursement this Period: 100000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 450000.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
SAVE AMERICA

Full Name (Last, First, Middle Initial) A. ARIZONA'S BOLD ERA PAC (A.B.E. PAC)		Date of Disbursement MM / DD / YYYY 10 / 11 / 2022
Mailing Address 2465 CENTREVILLE RD STE J17-714		FEC Identification Number C [] Transaction ID : SB29.922636
City HERNDON	State VA	Zip Code 20171
Purpose of Disbursement NON-FEDERAL CONTRIBUTION		Amount of Each Disbursement this Period [] 100000.00
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. INTEGRITY SOS PAC		Date of Disbursement MM / DD / YYYY 10 / 11 / 2022
Mailing Address 299 GRAY WOODS LANE		FEC Identification Number C [] Transaction ID : SB29.922720
City LAKE ANGELUS	State MI	Zip Code 48326
Purpose of Disbursement NON-FEDERAL CONTRIBUTION		Amount of Each Disbursement this Period [] 100000.00
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

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

SUBTOTAL of Disbursements This Page (optional).....▶	[] 200000.00
TOTAL This Period (last page this line number only).....▶	[] 650000.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 68 OF 72
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
SAVE AMERICA

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor GABRIEL STRATEGIES LLC			Nature of Debt (Purpose): STRATEGY CONSULTING & TRAVEL EXPENSES
Mailing Address PO BOX 10			
City RUMSON	State NJ	Zip Code 07760	

Outstanding Balance Beginning This Period 15000.00	Transaction ID : SD10.920250	
Amount Incurred This Period 16829.31	Payment This Period 15000.00	Outstanding Balance at Close of This Period 16829.31

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor ACUMEN SOLUTIONS GROUP LLC			Nature of Debt (Purpose): INSURANCE
Mailing Address 600 BROADHOLLOW ROAD SUITE 200			
City MELVILLE	State NY	Zip Code 11747	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.924162	
Amount Incurred This Period 2500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor BCVM SERVICES LLC			Nature of Debt (Purpose): RADIO ADVERTISING
Mailing Address 1512 E BROWARD BLVD UNIT 104B			
City FORT LAUDERDALE	State FL	Zip Code 33301	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.923878	
Amount Incurred This Period 14700.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 14700.00

1) SUBTOTALS This Period This Page (optional)..... ▶	34029.31
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 69 OF 72
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
SAVE AMERICA

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor EVENT STRATEGIES, INC.			Nature of Debt (Purpose): AUDIO VISUAL SERVICES, EVENT STAGING EXPENSE & TRAVEL EXPENSES
Mailing Address 510 KING STREET SUITE 410			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID : SD10.923402	
Amount Incurred This Period <input type="text" value="1012909.53"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1012909.53"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor GEORGETOWN ADVISORY			Nature of Debt (Purpose): STRATEGY CONSULTING
Mailing Address 414 SAYRE DR.			
City PRINCETON	State NJ	Zip Code 08540	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID : SD10.923234	
Amount Incurred This Period <input type="text" value="30000.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="30000.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor ORENSTEIN, JAMES, , ,			Nature of Debt (Purpose): LEGAL CONSULTING
Mailing Address 225 CADMAN PLAZA EAST			
City BROOKLYN	State NY	Zip Code 11201	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID : SD10.921159	
Amount Incurred This Period <input type="text" value="13519.54"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="13519.54"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="1056429.07"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 70 OF 72
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
SAVE AMERICA

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor MINTZ, LEVIN, COHN, FERRIS, GLOVSKY AND POPEO, P.C.			Nature of Debt (Purpose): LEGAL CONSULTING
Mailing Address ONE FINANCIAL CENTER			
City BOSTON	State MA	Zip Code 02111	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.924007	
Amount Incurred This Period 56943.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 56943.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor NEAL & HARWELL, PLC			Nature of Debt (Purpose): LEGAL CONSULTING
Mailing Address 1201 DEMONBREUN STREET SUITE 1000			
City NASHVILLE	State TN	Zip Code 37203	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.923921	
Amount Incurred This Period 2587.50	Payment This Period 0.00	Outstanding Balance at Close of This Period 2587.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor PERICLES, LLC			Nature of Debt (Purpose): COMMUNICATIONS & POLITICAL STRATEGY CONSULTING & TRAVEL EXPENSES
Mailing Address 1150 4TH ST SW APT 1002			
City WASHINGTON	State DC	Zip Code 20024	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.922861	
Amount Incurred This Period 21336.09	Payment This Period 0.00	Outstanding Balance at Close of This Period 21336.09

1) SUBTOTALS This Period This Page (optional)..... ▶	80866.59
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 71 OF 72
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)
SAVE AMERICA

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor RED CURVE SOLUTIONS			Nature of Debt (Purpose): DATA PROCESSING SERVICES
Mailing Address 138 CONANT ST STE 201			
City BEVERLY	State MA	Zip Code 01915	

Outstanding Balance Beginning This Period	Transaction ID : SD10.923324	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="28939.17"/>	<input type="text" value="0.00"/>	<input type="text" value="28939.17"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor RICHARD M. BORCHARD REGIONAL FAIRGROUNDS			Nature of Debt (Purpose): FACILITY RENTAL
Mailing Address 1213 TERRY SHAMISE BLVD			
City ROBSTOWN	State TX	Zip Code 78380	

Outstanding Balance Beginning This Period	Transaction ID : SD10.923693	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="13000.00"/>	<input type="text" value="0.00"/>	<input type="text" value="13000.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor RIGHT AIM MEDIA, LLC			Nature of Debt (Purpose): DIGITAL ADVERTISING
Mailing Address 405 S. DALE MABRY HIGHWAY, STE 351			
City TAMPA	State FL	Zip Code 33629	

Outstanding Balance Beginning This Period	Transaction ID : SD10.923856	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="22157.71"/>	<input type="text" value="0.00"/>	<input type="text" value="22157.71"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="64096.88"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 72 OF 72
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)
SAVE AMERICA

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor SILVERMAN THOMPSON SLUTKIN & WHITE, LLC			Nature of Debt (Purpose): LEGAL CONSULTING
Mailing Address 400 EAST PRATT STREET SUITE 900			
City BALTIMORE	State MD	Zip Code 21202	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID : SD10.922796	
Amount Incurred This Period <input type="text" value="151745.02"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="151745.02"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor TECHCENTRICS, INC			Nature of Debt (Purpose): IT SERVICES, OFFICE EQUIPMENT, & TRAVEL EXPENSES
Mailing Address 1217 LARONDE CT			
City ALEXANDRIA	State VA	Zip Code 22307	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID : SD10.922920	
Amount Incurred This Period <input type="text" value="21434.07"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="21434.07"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor VAN DER VEEN, HARTSHORN AND LEVIN			Nature of Debt (Purpose): LEGAL CONSULTING
Mailing Address 1219 SPRUCE ST			
City PHILADELPHIA	State PA	Zip Code 19107	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID : SD10.923646	
Amount Incurred This Period <input type="text" value="50000.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="50000.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="223179.09"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="1458600.94"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="1458600.94"/>