

# 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.

Making a Responsible Stand for Households in America

ADDRESS (number and street)

Check if different than previously reported. (ACC)    -

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- |                                      |                                      |                                       |   |
|--------------------------------------|--------------------------------------|---------------------------------------|---|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)  | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only)            |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)  | <input checked="" type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE)                                      |

- (c) 12-Day PRE-Election Report for the:
- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) |                                       |

Election on  /  /  in the State of

- (d) 30-Day POST-Election Report for the:
- |  |                                       |  |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on  /  /  in the State of

5. Covering Period  /  /  through  /  /

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

Williamson, Les, , ,

Type or Print Name of Treasurer

Signature of Treasurer Williamson, Les, , , [Electronically Filed] Date  /  /

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

Office Use Only									
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**Making a Responsible Stand for Households in 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="2017"/>		64062.36
(b) Cash on Hand at Beginning of Reporting Period.....	178939.35	
(c) Total Receipts (from Line 19) .....	0.00	151573.05
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	178939.35	215635.41
7. Total Disbursements (from Line 31).....	11490.00	48186.06
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	167449.35	167449.35
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**Making a Responsible Stand for Households in America**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	66000.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	66000.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	61500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	0.00	127500.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	24073.05
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).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	0.00	151573.05
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	0.00	151573.05

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	8490.00	25186.06
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	8490.00	25186.06
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	11500.00
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	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	3000.00	11500.00
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)) ..	11490.00	48186.06
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	11490.00	48186.06

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	0.00	127500.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	0.00	127500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	8490.00	25186.06
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	8490.00	25186.06

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

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

FOR LINE NUMBER:  
(check only one)

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

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)

**Making a Responsible Stand for Households in America**

Full Name (Last, First, Middle Initial)

**A. CMDI**

Mailing Address 1593 SPRING HILL RD  
SUITE 400

City VIENNA State VA Zip Code 22182

Purpose of Disbursement  
SUBSCRIPTIONS

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2017  
 Primary  General  
 Other (specify) ▼  
2017

State: District:

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 29 / 2017

FEC Identification Number

C  
Transaction ID : SB21B.I1394  
Amount of Each Disbursement this Period  
250.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. FEC FINANCIAL, INC.**

Mailing Address 332 W LEE HIGHWAY  
# 303

City WARRENTON State VA Zip Code 20186

Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2017  
 Primary  General  
 Other (specify)  
2017

State: District:

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 02 / 2017

FEC Identification Number

C  
Transaction ID : SB21B.I1382  
Amount of Each Disbursement this Period  
500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. GULA GRAHAM GROUP**

Mailing Address 499 S CAPITOL STREET SW  
SUITE 420

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
FINANCE CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2017  
 Primary  General  
 Other (specify) ▼  
2017

State: District:

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 02 / 2017

FEC Identification Number

C  
Transaction ID : SB21B.I1382  
Amount of Each Disbursement this Period  
2740.00

Memo Item

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

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

3490.00

**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)

**Making a Responsible Stand for Households in America**

Full Name (Last, First, Middle Initial)

**A. AMERICAN COLLEGE OF RADIOLOGY ASSOCIATION PAC**

Mailing Address 1891 PRESTON WHITE DRIVE

City  
RESTON

State  
VA

Zip Code  
20191-4326

Purpose of Disbursement  
FUNDRAISING EVENT VENUE RENTAL

001  
 002  
 003  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2017  
 Primary  General  
 Other (specify) ▼  
2017

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 02 / 2017

FEC Identification Number

C00343459

**Transaction ID : SB21B.I1383I**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

001  
 002  
 003  
Category/  
Type

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 Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

001  
 002  
 003  
Category/  
Type

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 Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

5000.00

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

8490.00

**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)  
**Making a Responsible Stand for Households in America**

Full Name (Last, First, Middle Initial)

**A. DAVID BYRD FOR STATE REPRESENTATIVE**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		0	8		2	0	1	7		

Mailing Address PO BOX 1138

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB29.I13938**  
Amount of Each Disbursement this Period

[Redacted] 500.00

Memo Item

City WAYNESBORO State TN Zip Code 38485

Purpose of Disbursement CONTRIBUTION

**011**  
Category/  
Type

Candidate Name BYRD, DAVID, , ,

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

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF KEN YAGER**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		1	7		2	0	1	7		

Mailing Address PO BOX 684

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB29.I13939**  
Amount of Each Disbursement this Period

[Redacted] 1000.00

Memo Item

City KINGSTON State TN Zip Code 37753

Purpose of Disbursement CONTRIBUTION

**011**  
Category/  
Type

Candidate Name YAGER, KEN, , ,

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

Full Name (Last, First, Middle Initial)

**C. UNIVERSITY OF TENNESSEE COLLEGE REPUBLICANS**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		1	7		2	0	1	7		

Mailing Address 989 PHILLIP FULMER WAY

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB29.I13940**  
Amount of Each Disbursement this Period

[Redacted] 500.00

Memo Item

City KNOXVILLE State TN Zip Code 37916

Purpose of Disbursement DONATION

**012**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For: 2017  Primary  General  Other (specify) ▼  
 State: District: 2017

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

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

[Redacted] 2000.00

[Redacted]



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

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

FOR LINE NUMBER:  
(check only one)

<input 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)

**Making a Responsible Stand for Households in America**

Full Name (Last, First, Middle Initial)

**A. BRADLEY COUNTY GOP**

Mailing Address 5150 DALTON PIKE

City  
CLEVELAND

State  
TN

Zip Code  
37323

Purpose of Disbursement  
CONTRIBUTION

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2017  
 Primary  General  
 Other (specify) ▼  
2017

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			07			2017			

FEC Identification Number

Transaction ID : SB29.I13831

Amount of Each Disbursement this Period

REAGAN DAY DINNER

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/  
Type

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

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/  
Type

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

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

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

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