

# 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**  
**NEW JOURNEY PAC, INC.**

ADDRESS (number and street) **499 S CAPITOL ST SW**  
**STE 405**  
 Check if different than previously reported. (ACC) **WASHINGTON DC 20003-4018**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00709691** 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period   /   /      through   /   /

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

Signature of Treasurer DATWYLER, THOMAS, , , [Electronically Filed] Date   /   /

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

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Page 2

Write or Type Committee Name

**NEW JOURNEY PAC, INC.**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>	<input type="text" value="7425.22"/>	<input type="text" value="7425.22"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="80290.21"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="315339.10"/>	<input type="text" value="1463379.24"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="395629.31"/>	<input type="text" value="1470804.46"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="207064.71"/>	<input type="text" value="1282451.38"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="188564.60"/>	<input type="text" value="188353.08"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="448842.16"/>	

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

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Page 3

Write or Type Committee Name

**NEW JOURNEY PAC, INC.**

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).....	133027.55	430930.45
(ii) Unitemized .....	182231.55	1031205.03
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	315259.10	1462135.48
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	315259.10	1462135.48
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	80.00	1243.76
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)).....▶	315339.10	1463379.24
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	315339.10	1463379.24

**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 .....	167255.75	1124781.26
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	167255.75	1124781.26
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	39628.96	150870.12
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 .....	180.00	6800.00
(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)).....	180.00	6800.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	207064.71	1282451.38
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	207064.71	1282451.38

**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) .....	315259.10	1462135.48
34. Total Contribution Refunds (from Line 28(d)) .....	180.00	6800.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	315079.10	1455335.48
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	167255.75	1124781.26
37. Offsets to Operating Expenditures (from Line 15, page 3).....	80.00	1243.76
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	167175.75	1123537.50

**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 6 OF 267
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**NEW JOURNEY PAC, INC.**

**A. ADAMS, SAMUEL, B, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9 FRANKLIN CREEK RD S  
 City SAVANNAH State GA Zip Code 31411-2825  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) REGIONAL TRAILER REPAIR Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2020  
**Transaction ID : AEF64037A457C4B2BA37**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. ADKINS, ANNIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3524 ENSIGN CIRCLE  
 City DELRAY BEACH State FL Zip Code 33483-8024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) LAW OFFICE OF ANNIE J ADKINS LLC Occupation (for Individual) LAWYER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 01 / 2020  
**Transaction ID : A64FFF91ED7FF4B26889**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. ADKINS, ANNIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3524 ENSIGN CIRCLE  
 City DELRAY BEACH State FL Zip Code 33483-8024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) LAW OFFICE OF ANNIE J ADKINS LLC Occupation (for Individual) LAWYER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 03 / 2020  
**Transaction ID : A637010C641DE4189A42**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. ADLER, ELIZABETH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1460 UNIVERSITY AVE  
 City SAN JOSE State CA Zip Code 95126-1639  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2300.00

Date of Receipt 08 / 03 / 2020  
**Transaction ID : A3525C5F1E39848BF929**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. ADLER, ELIZABETH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1460 UNIVERSITY AVE  
 City SAN JOSE State CA Zip Code 95126-1639  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2300.00

Date of Receipt 08 / 03 / 2020  
**Transaction ID : AECB8013ADA9345258D5**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. ADLER, ELIZABETH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1460 UNIVERSITY AVE  
 City SAN JOSE State CA Zip Code 95126-1639  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2350.00

Date of Receipt 08 / 04 / 2020  
**Transaction ID : A5AC290ED194043CE8A7**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	200.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. ADLER, ELIZABETH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1460 UNIVERSITY AVE  
 City SAN JOSE State CA Zip Code 95126-1639  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2450.00

Date of Receipt 08 / 16 / 2020  
**Transaction ID : A807EF8595C414C9D93D**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. ADLER, ELIZABETH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1460 UNIVERSITY AVE  
 City SAN JOSE State CA Zip Code 95126-1639  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2950.00

Date of Receipt 08 / 20 / 2020  
**Transaction ID : A18EE112E0F3F4F92B6C**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. ADLER, ELIZABETH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1460 UNIVERSITY AVE  
 City SAN JOSE State CA Zip Code 95126-1639  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3050.00

Date of Receipt 08 / 30 / 2020  
**Transaction ID : AE88FAEF7383E4D8FADC**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	700.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. AGOSTINO, SHELLEY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9075 SUNSET LN NW  
 City SEABECK State WA Zip Code 98380-9531  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 11 / 2020  
**Transaction ID : AE1EFDDEB46D24F12999**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. AIKIN, PATRICIA, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11545 N PA BE SHAN TRL HOME  
 City CHARLEVOIX State MI Zip Code 49720-2113  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 28 / 2020  
**Transaction ID : A47C59D84E19941699E6**  
 Amount of Each Receipt this Period 75.00  
 Memo Item

**C. ALBRITTON, JANIS, S, MRS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9051 SHORT CHIP CIR  
 City PORT SAINT LUCIE State FL Zip Code 34986-3099  
 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 ▼ 301.00

Date of Receipt 08 / 06 / 2020  
**Transaction ID : AE96BFC5F4CD743F7B38**  
 Amount of Each Receipt this Period 101.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	276.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. ALLIBONE, GEORGE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3749 INWOOD DR  
 City HOUSTON State TX Zip Code 77019-3001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 19 / 2020  
**Transaction ID : A74C04D189DA6497ABEC**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. AMDUR, LEORA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10091 NW 39TH CT  
 City CORAL SPRINGS State FL Zip Code 33065-1528  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GREATER AMERICAN SERVICES Occupation (for Individual) ACCOUNTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 12 / 2020  
**Transaction ID : A8DD2E64701B045DEB0E**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. ASBURY, WILLIAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5877 ELDERWOOD DRIVE  
 5877 ELDERWOOD DR.  
 City DALLAS State TX Zip Code 75230  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 16 / 2020  
**Transaction ID : A766E31988ECE4199899**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	200.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. AYSSEH, ALFRED, G, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25 SUTTON PL S  
 APT 15G

City NEW YORK State NY Zip Code 10022-2461

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 08 / 26 / 2020  
**Transaction ID : A3B15E88BDB13479EBA7**

Amount of Each Receipt this Period  
 100.00

Memo Item

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

Mailing Address 9901 TRINIDAD DR

City EL PASO State TX Zip Code 79925-6073

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

Name of Employer (for Individual) MONTERREY LTD Occupation (for Individual) CPM

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 275.00

Date of Receipt  
 08 / 03 / 2020  
**Transaction ID : A43CCF5041E224D4DB08**

Amount of Each Receipt this Period  
 25.00

Memo Item

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

Mailing Address 9901 TRINIDAD DR

City EL PASO State TX Zip Code 79925-6073

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

Name of Employer (for Individual) MONTERREY LTD Occupation (for Individual) CPM

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
 275.00

Date of Receipt  
 08 / 03 / 2020  
**Transaction ID : AF0B2AE561C7E412DAD8**

Amount of Each Receipt this Period  
 25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	150.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 267
<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)  
**NEW JOURNEY PAC, INC.**

**A. BACA, RAYMUNDO, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9901 TRINIDAD DR  
 City EL PASO State TX Zip Code 79925-6073  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MONTERREY LTD Occupation (for Individual) CPM  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 07 / 2020  
**Transaction ID : AC8EF1EFFC1AB49A582D**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. BACA, RAYMUNDO, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9901 TRINIDAD DR  
 City EL PASO State TX Zip Code 79925-6073  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MONTERREY LTD Occupation (for Individual) CPM  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 10 / 2020  
**Transaction ID : ABAD0518731A84C28BDB**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. BACA, RAYMUNDO, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9901 TRINIDAD DR  
 City EL PASO State TX Zip Code 79925-6073  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MONTERREY LTD Occupation (for Individual) CPM  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 08 / 24 / 2020  
**Transaction ID : A71E0F066C9C34C4C9E8**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	100.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 267
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)  
**NEW JOURNEY PAC, INC.**

**A. BACHE, BRIAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5712 205TH ST CT E  
 City SPANAWAY State WA Zip Code 98387-4731  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AKRON GENERAL MEDICAL CENTER Occupation (for Individual) FAMILY PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 08 / 05 / 2020  
**Transaction ID : AE5452317BF0543C493D**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. BACHE, BRIAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5712 205TH ST CT E  
 City SPANAWAY State WA Zip Code 98387-4731  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AKRON GENERAL MEDICAL CENTER Occupation (for Individual) FAMILY PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 08 / 05 / 2020  
**Transaction ID : A0FB48085F26E48889F**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. BAGNATO, VICTOR, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 288 HARTWELL ROAD (LOWER)  
 City BUFFALO State NY Zip Code 14216-1802  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 08 / 10 / 2020  
**Transaction ID : A78B936FA512C4585A4B**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	75.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 267
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**NEW JOURNEY PAC, INC.**

**A. BASSLER, ALFRED, S, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 16480 FREDERICK RD  
 City WOODBINE State MD Zip Code 21797-8516  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 06 / 2020  
**Transaction ID : A30134FCF043344C095F**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. BATEMAN, THOMAS, B, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 40 RIVERSIDE AVE APT RL2SB  
 City RED BANK State NJ Zip Code 07701-1025  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 271.55

Date of Receipt 08 / 04 / 2020  
**Transaction ID : A778B788AB05B45F0ABB**  
 Amount of Each Receipt this Period 51.55  
 Memo Item

**C. BEAIRD, MARTHA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6408 WILLIAMS PARKWAY  
 City DALLAS State TX Zip Code 75205-1717  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 6100.00

Date of Receipt 08 / 16 / 2020  
**Transaction ID : A608218DDF39446729B9**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	401.55
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. BEARDSLEY, H, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 8457  
 City WARNER ROBINS State GA Zip Code 31095-8457  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NGC Occupation (for Individual) MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 222.00

Date of Receipt 08 / 16 / 2020  
**Transaction ID : AFD28C271C91A49B7911**  
 Amount of Each Receipt this Period 111.00  
 Memo Item

**B. BENJAMIN, FRANKIE, N, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2286 BURGETT RD  
 City MOBILE State AL Zip Code 36605-2801  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 13 / 2020  
**Transaction ID : A447AB164F0654F3A9FE**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. BERNSTEIN, DAVIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 228 HOLLYWOOD DR  
 City COPPELL State TX Zip Code 75019-7308  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) USAA Occupation (for Individual) PRODUCT OWNER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 08 / 30 / 2020  
**Transaction ID : A709B858D974B4082AC9**  
 Amount of Each Receipt this Period 1500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1861.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. BIGGIO, ROBERT, C, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 785 NORGATE  
 City WESTFIELD State NJ Zip Code 07090-3426  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DISABLED Occupation (for Individual) DISABLED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 06 / 2020  
**Transaction ID : A2CA32F8E069F456B9A1**  
 Amount of Each Receipt this Period 150.00  
 Memo Item

**B. BINNING, MARY LOUISE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5042 WESTGROVE DR  
 City DALLAS State TX Zip Code 75248-6042  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CITI Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 19 / 2020  
**Transaction ID : AC59687C73F974614AD8**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. BINNING, MARY LOUISE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5042 WESTGROVE DR  
 City DALLAS State TX Zip Code 75248-6042  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CITI Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 08 / 30 / 2020  
**Transaction ID : A4A1C67058BDE4EE9890**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1650.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. BIRDSONG, GEORGE, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 1400  
 City SUFFOLK State VA Zip Code 23439-1400  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 24 / 2020  
**Transaction ID : A4113E4B715CF468983B**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. BLAKE, ANNE, S, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 881 DANVILLE BLVD  
 City DANVILLE State CA Zip Code 94526-1718  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 31 / 2020  
**Transaction ID : ACA10CCCB18F046339CA**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. BLAKELEY, JENNIFER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1228 COLONIAL DR  
 City LEXINGTON State KY Zip Code 40504-2025  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 20 / 2020  
**Transaction ID : A4D107F9E9FA345C4B41**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	400.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. BOETTCHER, ALLEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 238  
 City BOTTINEAU State ND Zip Code 58318-0238  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DC MANAGEMENT Occupation (for Individual) SERVICES  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 31 / 2020  
**Transaction ID : A56F2505B9388458EAB8**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. BOONE, ANNA J, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2601 BUSHWOOD ROAD  
 City LOUISVILLE State KY Zip Code 40223-5109  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 03 / 2020  
**Transaction ID : A3442392D18C34598803**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. BOONE, ANNA J, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2601 BUSHWOOD ROAD  
 City LOUISVILLE State KY Zip Code 40223-5109  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 25 / 2020  
**Transaction ID : AEC572D2305D14499BA8**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	300.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. BOSSERMAN, BAYARD, E, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 OAKNOLL CT  
 APT 428

City IOWA CITY State IA Zip Code 52246-5250

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 600.00

Date of Receipt  
 08 / 10 / 2020  
**Transaction ID : A6154208DBBD4588B82**

Amount of Each Receipt this Period  
 500.00

Memo Item

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

Mailing Address 13202 WORD OF LIFE DRIVE  
 #154

City HUDSON State FL Zip Code 34669-2466

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 328.00

Date of Receipt  
 08 / 04 / 2020  
**Transaction ID : A7B9123D6DB1D413CB05**

Amount of Each Receipt this Period  
 50.00

Memo Item

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

Mailing Address PO BOX 8090

City RUIDOSO State NM Zip Code 88355-8090

FEC ID number of contributing 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  
 08 / 16 / 2020  
**Transaction ID : A539D3AD778944869BF8**

Amount of Each Receipt this Period  
 100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	650.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. BOWSER, GEORGE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 3140  
 City DILLON State CO Zip Code 80435-3140  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 31 / 2020  
**Transaction ID : A560C1252DB56433B986**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. BOYCE, SANDRA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 437 WHISKEY HILL RD  
 City WOODSIDE State CA Zip Code 94062-2535  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 18 / 2020  
**Transaction ID : ACC1271E25E5B4D8FA09**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. BOZZICK, THOMAS, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 29 BLACKSTONE DR  
 City PRINCETON State NJ Zip Code 08540-7964  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 26 / 2020  
**Transaction ID : AE3CA32CD73544FF5A15**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1350.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 21 OF 267
<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)  
**NEW JOURNEY PAC, INC.**

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

Mailing Address 14938 JOY LN SW

City PORT ORCHARD	State WA	Zip Code 98367-9434
----------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2020

**Transaction ID : A25683DE8FAA843F5874**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 965 S. EL MOLINO AVE.

City PASADENA	State CA	Zip Code 91106-4454
------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2020

**Transaction ID : A36E8EF2601FB4ABD90D**

Amount of Each Receipt this Period  
40.00

Memo Item

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

Mailing Address 12849 49TH ST SW

City BELFIELD	State ND	Zip Code 58622-9216
------------------	-------------	------------------------

FEC ID number of contributing 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
08		13		2020

**Transaction ID : AAC64C33989644458E3**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	640.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 22 OF 267
<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)  
**NEW JOURNEY PAC, INC.**

**A. BRITT, SHARON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4569 PACIFIC LN  
 City EUREKA State CA Zip Code 95503-9716  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 30 / 2020  
**Transaction ID : A5B297CFE8FCA4E62BA4**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. BRIXIUS, DAN, W, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 401 N TIMBERLINE RD LOT 56  
 City FORT COLLINS State CO Zip Code 80524-1415  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 10 / 2020  
**Transaction ID : ADAA90ADA5D844D04B38**  
 Amount of Each Receipt this Period 150.00  
 Memo Item

**C. BROWN, BARBARA, B, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 738 CONWAY GLEN DR NW  
 City ATLANTA State GA Zip Code 30327-3601  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 14 / 2020  
**Transaction ID : A3CE8EAEFE0A94004A38**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	450.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. BROWN, GARY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5669 W COPPERHEAD DR  
 City TUCSON State AZ Zip Code 85742-8343  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DSSVC Occupation (for Individual) SALES  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 16 / 2020  
**Transaction ID : A95E0D785EBE74CD1A9C**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. BROWN, JIM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 115 DEER PARK RD  
 City HACKETTSTOWN State NJ Zip Code 07840-4673  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 03 / 2020  
**Transaction ID : ACCE72C668A6E49F38FC**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. BROWN, JIM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 115 DEER PARK RD  
 City HACKETTSTOWN State NJ Zip Code 07840-4673  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 17 / 2020  
**Transaction ID : AE2A375B90A2D4303B2A**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 267
	<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"/> 18

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. BROWN, MYLES, L, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 332 N LEXINGTON DR

City FOLSOM	State CA	Zip Code 95630-7604
----------------	-------------	------------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CPA
--	------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
08		28		2020

**Transaction ID : AFCF92F2843EF40C388C**

Amount of Each Receipt this Period  
250.00

Memo Item

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

Mailing Address 100 BOERNE STAGE AIRFIELD

City BOERNE	State TX	Zip Code 78006-5149
----------------	-------------	------------------------

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

Name of Employer (for Individual) BOERNE STAGE AIRPORT	Occupation (for Individual) PROPRIETOR
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
08		10		2020

**Transaction ID : AD553113F25BE4058A88**

Amount of Each Receipt this Period  
100.00

Memo Item

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

Mailing Address 100 BOERNE STAGE AIRFIELD

City BOERNE	State TX	Zip Code 78006-5149
----------------	-------------	------------------------

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

Name of Employer (for Individual) BOERNE STAGE AIRPORT	Occupation (for Individual) PROPRIETOR
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
08		10		2020

**Transaction ID : A70F14901997E4154A95**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	450.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 267
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**NEW JOURNEY PAC, INC.**

**A. BRYANT, ROBERT, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 68  
 City CARROLLTON State MO Zip Code 64633-0068  
 Date of Receipt 08 / 31 / 2020  
 Transaction ID : **AB5E65F8E65584A77BEF**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

FEC ID number of contributing 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

**B. BRYDEN, ELIZABETH, M, MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1 W 67TH ST APT 611  
 City NEW YORK State NY Zip Code 10023-6200  
 Date of Receipt 08 / 31 / 2020  
 Transaction ID : **A81E07B0AD3E14DDB9F2**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

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

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

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date 4510.00

**C. BURT, WILLIAM, F, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1 HARVEST CIR UNIT 3  
 City LINCOLN State MA Zip Code 01773-3215  
 Date of Receipt 08 / 26 / 2020  
 Transaction ID : **A3BB476D857404D71849**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

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

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1350.00

**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 26 OF 267
	(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)  
**NEW JOURNEY PAC, INC.**

**A. BUZBY, SCOTT, H, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4150 INDIAN RIVER BLVD  
 City VERO BEACH State FL Zip Code 32967-7224  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 07 / 2020  
**Transaction ID : AAAE3C080AFB5450ABA5**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. CAMPBELL, NATALIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 32 RIDGE RD  
 City PLEASANT RIDGE State MI Zip Code 48069-1119  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 05 / 2020  
**Transaction ID : AFAE7B25DC05F4EB1AB5**  
 Amount of Each Receipt this Period 300.00  
 Memo Item

**C. CANARY, RICHARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1795 MCCAULEY ROAD  
 City CLEARWATER State FL Zip Code 33765-1542  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) JEWELRY MAKER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 29 / 2020  
**Transaction ID : A7E81C618FD1C4A5D8D5**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 27 OF 267
	(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)  
**NEW JOURNEY PAC, INC.**

**A. CANARY, RICHARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1795 MCCAULEY ROAD  
 City CLEARWATER State FL Zip Code 33765-1542  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) JEWELRY MAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 30 / 2020  
**Transaction ID : A91803B03C2CC42698EB**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. CARLSON, ALICE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2730 LEEWARD LN  
 City NAPLES State FL Zip Code 34103-4034  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) CONSULT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 20 / 2020  
**Transaction ID : A9109E6FCC47B4C3BBA0**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. CARR, SHERAH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3450 YOUTH MONROE ROAD  
 City LOGANVILLE State GA Zip Code 30052-4327  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 03 / 2020  
**Transaction ID : A968063DCD5DF47A5902**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	350.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. CARSON, DEBORAH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 721 WASSERFALL RD  
 City FREDERICKSBURG State TX Zip Code 78624-6269  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NONE Occupation (for Individual) NONE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 23 / 2020  
**Transaction ID : A9986B9D445FD4842997**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. CARTER, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1228 GLOVERVILLE TERRACE  
 City THE VILLAGES State FL Zip Code 32162-8732  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 29 / 2020  
**Transaction ID : AE082380667604E8D8A0**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. CASH, FRANCIS, W, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 663 HERMITAGE CIR  
 City PALM BEACH GARDENS State FL Zip Code 33410-1612  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 03 / 2020  
**Transaction ID : AD66DA50486A54EBE856**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	350.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. CERVANTES, ANNA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10802 ROSETON AVENUE

City SANTA FE SPRINGS	State CA	Zip Code 90670-4344
--------------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 03 / 2020

**Transaction ID : A5F27BD58C329454780A**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. CERVANTES, ANNA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10802 ROSETON AVENUE

City SANTA FE SPRINGS	State CA	Zip Code 90670-4344
--------------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 20 / 2020

**Transaction ID : AB131783D7827420192C**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. CERVANTES, ANNA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10802 ROSETON AVENUE

City SANTA FE SPRINGS	State CA	Zip Code 90670-4344
--------------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 24 / 2020

**Transaction ID : AD192EB32B6874B95B7C**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	75.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. CHARLIP, HERMAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11839 N 109TH ST  
 City SCOTTSDALE State AZ Zip Code 85259-3047  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) CPA  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 03 / 2020  
**Transaction ID : A8C415160F0FB4FEEA3D**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. CHERBAK, PETER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 35 WEST 26TH STREET  
 City UPLAND State CA Zip Code 91784-1121  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 12 / 2020  
**Transaction ID : A7C9DB775E6F7484F82D**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. CHILDS, WILLIAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3538 EASTWIND STREET  
 City INDIANAPOLIS State IN Zip Code 46227-8047  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 31 / 2020  
**Transaction ID : A6477306F332341D1AC4**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	400.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. CHRISTENSEN, JAMES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2067 E PHEASANT CIR  
 City HOLLADAY State UT Zip Code 84121-1341  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SECURITY NATIONAL Occupation (for Individual) EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 08 / 20 / 2020  
**Transaction ID : A6FD797F37343466A975**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. CHUCK, AILEEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8144 VILLAGE 8  
 City CAMARILLO State CA Zip Code 93012-6928  
 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 08 / 13 / 2020  
**Transaction ID : A3CF8F99D07424A02A32**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. CLARK, RICHARD, K, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4171 LORENZO FARM RD  
 City CAZENOVIA State NY Zip Code 13035-9341  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 24 / 2020  
**Transaction ID : A77A7E202846E4933A34**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	600.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. CLOUD, NANCY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 60 MARINE STREET  
 City SAINT AUGUSTINE State FL Zip Code 32084-5037  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) HOTEL OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2020  
**Transaction ID : A44F201F6657848CA986**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. COLLINS, JOHN, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 700 OCEAN AVE UNIT 129  
 City SPRING LAKE State NJ Zip Code 07762-3502  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2020  
**Transaction ID : A89E6414E22584128B48**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. CONSTANTINE, PAUL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 49 SAINT GEORGE PL  
 City PALM BEACH GARDENS State FL Zip Code 33418-4024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 08 / 22 / 2020  
**Transaction ID : A69FE28D48E6E4DA5861**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	800.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 267
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. CORUM, SARAH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3258 DUNCAN AV  
 City CLOVIS State CA Zip Code 93619-5006  
 FEC ID number of contributing 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 08 / 20 / 2020  
**Transaction ID : ABA9F225FF5404148905**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. CRAVER, THEODORE, F, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6 INDIAN HILL LN  
 City HILTON HEAD ISLAND State SC Zip Code 29926-1259  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 08 / 26 / 2020  
**Transaction ID : AEEFBC4C3F8754C14999**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. CREWS, BILL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4319 STUART AVE  
 City RICHMOND State VA Zip Code 23221-1828  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 08 / 08 / 2020  
**Transaction ID : A0013EB94B78647FE982**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. CREWS, BILL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4319 STUART AVE  
 City RICHMOND State VA Zip Code 23221-1828  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 08 / 24 / 2020  
**Transaction ID : AE357AF7556B44FBFA69**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. CROCKETT, CARMEN, D, MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1113 CANDELA LN  
 City GRAND LEDGE State MI Zip Code 48837-2258  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 11 / 2020  
**Transaction ID : A18C5621AD11D4949BED**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. CUMMINS, JOAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6741 BIRCHTON POINT DR APT 200  
 City DUBLIN State OH Zip Code 43017-7639  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 03 / 2020  
**Transaction ID : A417B4D94CB4747C9BFB**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. CURRAN, WILLIAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 20 LEEDER HILL DR # 300A  
 City HAMDEN State CT Zip Code 06517-2730  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 08 / 31 / 2020  
**Transaction ID : ACA5410BBEE3A4233AC2**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. DALTON, KENNETH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 332 S. HUNTINGTON AVE.  
 City SAN DIMAS State CA Zip Code 91773-2488  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 10 / 2020  
**Transaction ID : ADE11F3A70C034345A16**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. DALZELL, THOMAS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4729 E ARCADIA LN  
 City PHOENIX State AZ Zip Code 85018-2851  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2020  
**Transaction ID : A29118EAB248048A0A18**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	850.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. DAMON, ALBERT, W, MR., III**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 101 PINE HILL RD

City WAKEFIELD	State RI	Zip Code 02879-2824
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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 ▼  
550.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2020

**Transaction ID : A0CAC60A7DCE6486EBFE**

Amount of Each Receipt this Period  
100.00

Memo Item

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

Mailing Address 60 VENETIAN DRIVE N205

City DELRAY BEACH	State FL	Zip Code 33483-6940
----------------------	-------------	------------------------

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

Name of Employer (for Individual) DAVIES & JOHNSON INC.	Occupation (for Individual) CFP
--	------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		12		2020

**Transaction ID : A46179DDCB4184109996**

Amount of Each Receipt this Period  
100.00

Memo Item

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

Mailing Address 60 VENETIAN DRIVE N205

City DELRAY BEACH	State FL	Zip Code 33483-6940
----------------------	-------------	------------------------

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

Name of Employer (for Individual) DAVIES & JOHNSON INC.	Occupation (for Individual) CFP
--	------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2020

**Transaction ID : AFDFCFA91B5D14C88942**

Amount of Each Receipt this Period  
500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	700.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. DECUYPERE, JEFF, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13500 EAST U AVE  
 City VICKSBURG State MI Zip Code 49097-8581  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) HVAC CONTRACTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 08 / 16 / 2020  
**Transaction ID : A8BEA0923833340F0827**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. DECUYPERE, JEFF, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13500 EAST U AVE  
 City VICKSBURG State MI Zip Code 49097-8581  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) HVAC CONTRACTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 08 / 19 / 2020  
**Transaction ID : A1FDD4CD1D5694BAD8F9**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. DEMILLE, CECIL, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3172 LUCINDA LN  
 City SANTA BARBARA State CA Zip Code 93105-2036  
 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 08 / 31 / 2020  
**Transaction ID : A5A2DCB249A024247835**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	300.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. DENNY, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 32 VILLAGE RD  
 City SEA BRIGHT State NJ Zip Code 07760-2233  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 19 / 2020  
**Transaction ID : A6903444D795B4ABD9BF**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. DICKINSON, SCOTT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3418 GREENWAY DRIVE  
 City JUPITER State FL Zip Code 33458-8719  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AVIATION Occupation (for Individual) TRANSPORTATION  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 05 / 2020  
**Transaction ID : A8854D8BD7FB1448DAEA**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. DIETERLE 3, MIKE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4615 BENITO CT  
 City LAKEWOOD RANCH State FL Zip Code 34211-8523  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AMERISURE Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 16 / 2020  
**Transaction ID : AC9F0E6B51DDA41F0A04**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	325.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. DILLON, CHIP, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15 CYPRESS POINT DR  
 City PINEHURST State NC Zip Code 28374-7133  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2020  
**Transaction ID : A032F7B6209BC4013B3F**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. DOANE, DARYL, ANN, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 499 S CAPITOL ST SW STE 405  
 City WASHINGTON State DC Zip Code 20003-4018  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 28 / 2020  
**Transaction ID : ACB7CA8C5F5824BAFB37**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. DODD, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 130 CHEMISTRY LN  
 City SPRING MILLS State PA Zip Code 16875-8223  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PALATIN Occupation (for Individual) CHEMIST  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2020  
**Transaction ID : AED743BD9F0854884B8B**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

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

Mailing Address 81 GILBERT RD

City HO HO KUS	State NJ	Zip Code 07423-1405
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	24	/	2020

**Transaction ID : A2BAA79F4662344FBBBB**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

Mailing Address 2610 E CHERRY HILL RD

City COEUR D ALENE	State ID	Zip Code 83814-6085
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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 ▼  
215.00

Date of Receipt  

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

**Transaction ID : AAB07DE0CA8544681901**

Amount of Each Receipt this Period  
25.00

Memo Item

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

Mailing Address 2610 E CHERRY HILL RD

City COEUR D ALENE	State ID	Zip Code 83814-6085
-----------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	30	/	2020

**Transaction ID : A20D28F6D82614C0EA2D**

Amount of Each Receipt this Period  
35.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1060.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. DOTINGA, JAMES, W, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4026 SALTSPRING DR  
 City FERNDALE State WA Zip Code 98248-9538  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) LAWN TRASH CARE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 08 / 28 / 2020  
**Transaction ID : A333FAD6D8D2C4869ABB**  
 Amount of Each Receipt this Period 40.00  
 Memo Item

**B. DOWNS, GORDON, LEE, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7500 CALLE NOBLEZA  
 City BAKERSFIELD State CA Zip Code 93309-0806  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 31 / 2020  
**Transaction ID : A9722A50EED7B4B1CBFD**  
 Amount of Each Receipt this Period 300.00  
 Memo Item

**C. DOWNS, RONALD, H, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6207 FOXCROFT RD  
 City ALEXANDRIA State VA Zip Code 22307-1104  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 26 / 2020  
**Transaction ID : A5C7D9CE1CFCA44E2B34**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	590.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. DRESSER, THOMAS, P, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3904 FRONTENAC PL  
 City COLUMBIA State MO Zip Code 65203-5810  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 28 / 2020  
**Transaction ID : A97C9E52383C24091983**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. DRUMMOND, A, CAROLINE, MRS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 266 RICE BLUFF RD  
 City PAWLEYS ISL State SC Zip Code 29585-7971  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 03 / 2020  
**Transaction ID : A5EE7746AE1DA4518950**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. DUKE, DALE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 14531 CAVALLI RD SE  
 City OLALLA State WA Zip Code 98359-7516  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) BUSINESS OWNER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 26 / 2020  
**Transaction ID : A448056C8BCBF423CB77**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	450.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 267
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**NEW JOURNEY PAC, INC.**

**A. DUTY, JOHN, W, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1215 SHORELINE DR  
 City SAN MATEO State CA Zip Code 94404-2057  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 11 / 2020  
**Transaction ID : AD63BF6D645A3452D8F8**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. ELLIOTT, TOMAS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 845 COVINGTON RD  
 City LOS ALTOS State CA Zip Code 94024-5049  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 14 / 2020  
**Transaction ID : A1C0E49D267F544F1A44**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. EMIGH, CARLA, E, MISS,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 16219 SE 19TH ST  
 City VANCOUVER State WA Zip Code 98683-4428  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 26 / 2020  
**Transaction ID : A1979A7632E6648B7AC3**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1270.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. EWING, TOM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 27760 SOMERSET LN  
 City SAN JUAN CAPO State CA Zip Code 92675-5402  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 24 / 2020  
**Transaction ID : A6693FF52C7CC4579967**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. FAISON, SANDI, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3920 MARLOWE ST  
 City WEST UNIVERSITY PLACE State TX Zip Code 77005-2046  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) WIFE/MOM  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 15 / 2020  
**Transaction ID : A15A09119BF96452FAE7**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. FALSTAD, CAROLINE, H, MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7500 YORK AVE S APT 319  
 City MINNEAPOLIS State MN Zip Code 55435-4749  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 237.00

Date of Receipt 08 / 04 / 2020  
**Transaction ID : A427EAB782917456B919**  
 Amount of Each Receipt this Period 75.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	350.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. FARNSWORTH, LYNN ANN, , MRS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13699 S MOUNT CORTINA WAY

City RIVERTON	State UT	Zip Code 84065-6906
------------------	-------------	------------------------

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 ▼  
250.00

Date of Receipt  
08 / 31 / 2020  
**Transaction ID : AF41CD4B858164EF7BDF**

Amount of Each Receipt this Period  
50.00

Memo Item

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

Mailing Address 2250 AUBURN RAVINE DR

City LINCOLN	State CA	Zip Code 95648-2803
-----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
08 / 13 / 2020  
**Transaction ID : A7CE07C9C55034EE4B64**

Amount of Each Receipt this Period  
50.00

Memo Item

**C. FERRARO, MICHAEL, A, MR., USAF RET**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2813 OTSEGO DR

City HERNDON	State VA	Zip Code 20171-2444
-----------------	-------------	------------------------

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 ▼  
203.00

Date of Receipt  
08 / 04 / 2020  
**Transaction ID : A56EFCEAC599B451D9DA**

Amount of Each Receipt this Period  
40.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	140.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. FIEBIG, DAVE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 42160 WOODWARD AVE  
 UNIT 68  
 City BLOOMFIELD HILLS State MI Zip Code 48304-5161  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 24 / 2020  
**Transaction ID : A6D90A38DF6CA4996AFB**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. FIKES, SUE, , MRS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8148 FM 2549  
 City HEARNE State TX Zip Code 77859-2363  
 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 08 / 26 / 2020  
**Transaction ID : A97157502C1C649D8B05**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. FINNER, THOMAS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3038 SANTEE CT  
 City INDIAN LAND State SC Zip Code 29707-7002  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 19 / 2020  
**Transaction ID : A84A9FA6C35B54DFEAEED**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	400.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. FINNER, THOMAS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3038 SANTEE CT  
 City INDIAN LAND State SC Zip Code 29707-7002  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 31 / 2020  
**Transaction ID : A12241CEB0F694A5896F**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. FITZHUGH, GRAYSON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6921 GLEN ELLYN DR  
 City LOVELAND State OH Zip Code 45140-9496  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 08 / 30 / 2020  
**Transaction ID : AB2794892F84E48EDB8E**  
 Amount of Each Receipt this Period 150.00  
 Memo Item

**C. FLYNN, M, ELAINE, MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 966 CHEROKEE RD UNIT 102  
 City LOUISVILLE State KY Zip Code 40204-4312  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 19 / 2020  
**Transaction ID : A844AE9976C61469495E**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	450.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. FORD, VIRGINIA, GORDON, MRS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9600 GREEN VERDUGO DR

City SUNLAND	State CA	Zip Code 91040-1636
-----------------	-------------	------------------------

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 ▼  
250.00

Date of Receipt  

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

**Transaction ID : A2A309DA2F3254003BB6**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. FOSTER, RICHARD, A, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 233 W 5TH ST

City EMPORIUM	State PA	Zip Code 15834-1009
------------------	-------------	------------------------

FEC ID number of contributing 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
08		13		2020

**Transaction ID : AEDD08AAC7E81435EAFE**

Amount of Each Receipt this Period  
150.00

Memo Item

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

Mailing Address PO BOX 2149

City LAKE PLACID	State NY	Zip Code 12946-6149
---------------------	-------------	------------------------

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

Name of Employer (for Individual) TEMPEST CAPITAL LTD	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
550.00

Date of Receipt  

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

**Transaction ID : A714CD7B9106A44EF8D9**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. FOUNTAIN, KEVIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 2149  
 City LAKE PLACID State NY Zip Code 12946-6149  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) TEMPEST CAPITAL LTD Occupation (for Individual) OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 16 / 2020  
**Transaction ID : A70463A09007340A1B05**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. FOWLER, WENDY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 63007 TERRY DR  
 City BEND State OR Zip Code 97701-9341  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE APPRAISER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 29 / 2020  
**Transaction ID : ADF68E46D131548FB969**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. FRANK, BRUCE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2269 MAYWOOD AVE  
 City SAN JOSE State CA Zip Code 95128-3447  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 21 / 2020  
**Transaction ID : AA4E9A0FD9FDB4E45B51**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	400.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 50 OF 267
	(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)  
**NEW JOURNEY PAC, INC.**

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

Mailing Address 551 PINE VALLEY ROAD SOUTHEAST

City MARIETTA	State GA	Zip Code 30067-4827
------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1750.00

Date of Receipt  

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

**Transaction ID : AC24A681BBB84440D84B**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 551 PINE VALLEY ROAD SOUTHEAST

City MARIETTA	State GA	Zip Code 30067-4827
------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2020

**Transaction ID : A5759198B67F44FE29F2**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 7597 DEXTER HILLS DR

City CORDOVA	State TN	Zip Code 38016-8713
-----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2020

**Transaction ID : AEBF2EB44EA504DE5AF2**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1050.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. FRYE, DAWN, L, MISS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1224 MARIGOLD LN

City LONGVIEW	State TX	Zip Code 75604-2826
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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 ▼  
250.00

Date of Receipt  

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

**Transaction ID : AA7F9FCEF57074393849**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. GAARDE, JOHN, F, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2384 N SAN MIGUEL DR

City GRAND JCT	State CO	Zip Code 81507-1416
-------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2020

**Transaction ID : AC7B0452943124FCD887**

Amount of Each Receipt this Period  
300.00

Memo Item

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

Mailing Address 3979 COUNTY ROAD 826

City ANNA	State TX	Zip Code 75409-3016
--------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
8000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		14		2020

**Transaction ID : A68F74323C36E4EA29FB**

Amount of Each Receipt this Period  
4000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4400.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 267
	<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

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)  
**NEW JOURNEY PAC, INC.**

**A. GENSLER, THOMAS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 23115 WEST Q ROAD  
 City ELKHORN State NE Zip Code 68022-3120  
 FEC ID number of contributing 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 08 / 16 / 2020  
**Transaction ID : AD7C96A6D03AF41D5B6A**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

**B. GEORGE, PAUL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 209 VENNARD AVE  
 City LAFAYETTE State LA Zip Code 70501-6527  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SIDEWINDER PUMPS INC Occupation (for Individual) PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 28 / 2020  
**Transaction ID : AC5A82895C9A34BB985E**  
 Amount of Each Receipt this Period 300.00  
 Memo Item

**C. GERTNER, STEPHEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2140 STOCKER MILL RD  
 City EASTON State PA Zip Code 18045-7414  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 03 / 2020  
**Transaction ID : AA7541FFCF1074A59A44**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	600.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 53 OF 267
	(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)  
**NEW JOURNEY PAC, INC.**

**A. GIBSON, LAWRENCE, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5945 N HARTFORD CT  
 City PARK CITY State KS Zip Code 67219-2255  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 278.00

Date of Receipt 08 / 14 / 2020  
**Transaction ID : AD32103C70D2641C3B3E**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. GILBERT, LAMBERT, O, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8548 VINE VALLEY DR  
 City SUN VALLEY State CA Zip Code 91352-3659  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 08 / 31 / 2020  
**Transaction ID : AFE692C24038B4042BD0**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. GILES, CLIFFORD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PSC 47 BOX 641  
 City APO State AE Zip Code 09470-0007  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AAFES Occupation (for Individual) RETAIL CUSTOMER SERVICE  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 08 / 03 / 2020  
**Transaction ID : A8E919974B3AE4547B4B**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1150.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. GILES, CLIFFORD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PSC 47 BOX 641  
 City APO State AE Zip Code 09470-0007  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AAFES Occupation (for Individual) RETAIL CUSTOMER SERVICE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 08 / 19 / 2020  
**Transaction ID : A7BB690D7F7B149F8A25**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. GOLDSTONE, ARTHUR, H, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 300  
 City LITTLE COMPTON State RI Zip Code 02837-0300  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 24 / 2020  
**Transaction ID : AD58C649B45C74C17A8F**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. GOOD, ANN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5522 HOMEVILLE RD  
 City OXFORD State PA Zip Code 19363-1015  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 21 / 2020  
**Transaction ID : A3C0DC9F01A2945CDA62**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	375.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. GOODWIN, BRIDGETT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 443 ADAMS ST  
 City PLYMOUTH State MI Zip Code 48170-1211  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 08 / 31 / 2020  
**Transaction ID : AF1ED7F211B2B4344B5E**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. GOODYEAR, PRISCILLA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10042 SIGNET CIRCLE  
 City HUNTINGTON BEACH State CA Zip Code 92646-6631  
 FEC ID number of contributing 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 08 / 02 / 2020  
**Transaction ID : A5AB3352419C341ACAB9**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. GRAY, DONALD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 23233 N PIMA RD STE 113  
 City SCOTTSDALE State AZ Zip Code 85255-8387  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GRAY & ASSOCIATES Occupation (for Individual) OWNER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 30 / 2020  
**Transaction ID : ABE0F2D38292E43A2938**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1350.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

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

Mailing Address 46 GOODNOW RD

City PRINCETON	State MA	Zip Code 01541-1602
-------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  

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

**Transaction ID : AEC04B4AD7EEB406CB2E**

Amount of Each Receipt this Period  
100.00

Memo Item

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

Mailing Address 46 GOODNOW RD

City PRINCETON	State MA	Zip Code 01541-1602
-------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
800.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2020

**Transaction ID : A4D8E6A4E19E84380AB2**

Amount of Each Receipt this Period  
100.00

Memo Item

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

Mailing Address 16614 MOORBROOK AVENUE

City CERRITOS	State CA	Zip Code 90703-1407
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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 ▼  
206.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2020

**Transaction ID : AB779656CCFB341E8BDC**

Amount of Each Receipt this Period  
78.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	278.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

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

Mailing Address 361 SWEETWATER DR

City SANDPOINT	State ID	Zip Code 83864-9210
-------------------	----------	------------------------

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 ▼  
310.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2020

**Transaction ID : A70582ABE86444BA9929**

Amount of Each Receipt this Period  
150.00

Memo Item

**B. GUTHRIE, PHILIP, L, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23755 MIDDLEBELT RD

City FARMINGTON HILLS	State MI	Zip Code 48336-2903
--------------------------	----------	------------------------

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

Name of Employer (for Individual) FORD MOTOR COMPANY	Occupation (for Individual) ENGINEER
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		10		2020

**Transaction ID : AA9C2B66A4E8C436F9BB**

Amount of Each Receipt this Period  
100.00

Memo Item

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

Mailing Address 2604 N SPRUCE AVE

City ROSWELL	State NM	Zip Code 88201-9784
-----------------	----------	------------------------

FEC ID number of contributing 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 M	/	D D D	/	Y Y Y Y Y Y
08		03		2020

**Transaction ID : A56CD4DFFC05640F0B07**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	350.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. GWARTNEY, GINGER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2604 N SPRUCE AVE  
 City ROSWELL State NM Zip Code 88201-9784  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 31 / 2020  
**Transaction ID : AAC42A92222A34180997**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. HAGGERTY-BEARDEN, GWEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3300 COUNTY FARM RD  
 City HOWELL State MI Zip Code 48843-8936  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 08 / 24 / 2020  
**Transaction ID : A73985A1ADA6D4F4F90F**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. HALE, JACQUELINE, D, COL., RET**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 28229 COUNTY ROAD 33 LOT W228  
 City LEESBURG State FL Zip Code 34748-4589  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 228.00

Date of Receipt 08 / 25 / 2020  
**Transaction ID : AF123EFF9BCBA4F17984**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	200.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**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 06902-8020  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 224.00

Date of Receipt 08 / 21 / 2020  
**Transaction ID : A3A60E30B1A204F5B971**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. HALL, KENT, M, DR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1606 N HEARTHSIDE DR  
 City RICHMOND State TX Zip Code 77406-1357  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 08 / 11 / 2020  
**Transaction ID : A0416BE90DF034F2B901**  
 Amount of Each Receipt this Period 375.00  
 Memo Item

**C. HALSEY, RONALD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3168 AMANDA GAYLE CIR  
 City ANCHORAGE State AK Zip Code 99507-2602  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GREATLAND FOODS Occupation (for Individual) OWNER/PRESIDENT  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 10 / 2020  
**Transaction ID : AF5BF3F2F8B624E6CAC7**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	675.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 267
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. HANCOCK, KENNETH, F, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 120 TREESIDE DR NW  
 City ROME State GA Zip Code 30165-1734  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2020  
**Transaction ID : A4C0F2AC0A59948F481C**  
 Amount of Each Receipt this Period 150.00  
 Memo Item

**B. HARDER, WESLEY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2630 ELM ST SPT 305  
 City DALLAS State TX Zip Code 75226-1422  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 19 / 2020  
**Transaction ID : A24E2AC023BBE4D91891**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. HARDING, TIM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15696 HARDING ROAD  
 City BRYAN State TX Zip Code 77807-4121  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) DITCH-DIGGER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 12 / 2020  
**Transaction ID : A4536C59C0D584270984**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1250.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 267		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. HARRIS, ARTHUR, O, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4801 PEBBLE BROOK DR  
 City OLDSMAR State FL Zip Code 34677-4849  
 FEC ID number of contributing 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 08 / 26 / 2020  
**Transaction ID : A952B177B5E5D4F03974**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. HART, PAMELA, W, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 113 BAY HILL CT  
 City PONTE VEDRA State FL Zip Code 32082-3601  
 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 08 / 13 / 2020  
**Transaction ID : AE33CE61E5EB04F72AF3**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. HATHORN, SAMUEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 19819 SKYCOUNTRY LANE  
 19819 SKYCOUNTRY LANE  
 City HOUSTON State TX Zip Code 77094  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 03 / 2020  
**Transaction ID : AAB515AAC925A43E6BD3**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1150.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. HAUTZENROEDER, EDWARD, R, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 21W164 MONTICELLO RD

City LOMBARD	State IL	Zip Code 60148-5155
-----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	26	/	2020

**Transaction ID : A062B19037F3E4041A2A**

Amount of Each Receipt this Period  
150.00

Memo Item

**B. HAYNES, FRANK, , MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 5238 HUNTINGTON WOODS RD

City FRANKFORT	State KY	Zip Code 40601-9772
-------------------	-------------	------------------------

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
08	/	04	/	2020

**Transaction ID : AD9D764982F3A418EBFF**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. HAYWARD, TOM, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 900 UNIVERSITY ST

City SEATTLE	State WA	Zip Code 98101-2797
-----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	07	/	2020

**Transaction ID : AB9D5875B24764E7F887**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. HAZEL, JOHN, T, MR., JR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6254 HUNTLEY RD  
 City BROAD RUN State VA Zip Code 20137-1830  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) BUSINESS MAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 08 / 17 / 2020  
**Transaction ID : A594EC45605B347DAB64**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. HECKMANN, RICHARD, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 5127  
 City BUENA VISTA State CO Zip Code 81211-5127  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) U OF COLORADO Occupation (for Individual) PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 04 / 2020  
**Transaction ID : AD79A760677E34F068D2**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. HEISLER, JAMES B, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1935 BROTHERS CT  
 City SAINT PETERS State MO Zip Code 63376-7844  
 FEC ID number of contributing 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 08 / 03 / 2020  
**Transaction ID : A2B0D51DC74BD48B8815**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	400.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. HEISLER, JAMES B, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1935 BROTHERS CT  
 City SAINT PETERS State MO Zip Code 63376-7844  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 11 / 2020  
**Transaction ID : AC8DC61FB27FE4CBAB66**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. HEISLER, JAMES B, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1935 BROTHERS CT  
 City SAINT PETERS State MO Zip Code 63376-7844  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 31 / 2020  
**Transaction ID : A6F01C612112642D283E**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. HELBING, ROBERT, W, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 820 TAMARACK AVE  
 City MCALLEN State TX Zip Code 78501-2456  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 08 / 10 / 2020  
**Transaction ID : A179A95CFC0264C76A6A**  
 Amount of Each Receipt this Period 101.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	251.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. HEMMIG, JAMES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4400 E HIGHWAY 20  
 STE 112  
 City NICEVILLE State FL Zip Code 32578-9735  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) JAMES D HEMMIG, OD, PA Occupation (for Individual) OPTOMETRIC PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 14 / 2020  
**Transaction ID : A391772300C8D4345BE2**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. HEMP, PAMELA, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4620 S CANTERBURY CT  
 City MAPLETON State IL Zip Code 61547-9543  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 20 / 2020  
**Transaction ID : A5ADAEB40AAB14CBCB91**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. HERON, JACK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 598 CREOLE RETREAT  
 City MOUNT PLEASANT State SC Zip Code 29464-2747  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 08 / 2020  
**Transaction ID : A65F7E2783C8E44F7B2A**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	600.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. HERON, JACK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 598 CREOLE RETREAT  
 City MOUNT PLEASANT State SC Zip Code 29464-2747  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 08 / 2020  
**Transaction ID : A5BE1FB63CA24426892A**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. HESSELMAN, CLAUDE, W, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2545 BAINBRIDGE BLVD  
 City CHESAPEAKE State VA Zip Code 23324-1825  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 21 / 2020  
**Transaction ID : A3FFEDD85266B45D988D**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. HESTNES, ELIZABETH, F, MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1010 WALTHAM ST APT 469  
 City LEXINGTON State MA Zip Code 02421-8074  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 05 / 2020  
**Transaction ID : A3E1F0A2B87A242A4A33**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	700.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 67 OF 267
	(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)  
**NEW JOURNEY PAC, INC.**

**A. HESTNES, ELIZABETH, F, MS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1010 WALTHAM ST  
APT 469

City LEXINGTON State MA Zip Code 02421-8074

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
08 / 26 / 2020  
**Transaction ID : ABDA121FACA7D47158C/**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. HETLAND, DONNA, , MRS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 WATERWAY CT  
APT 3B

City SPRING State TX Zip Code 77380-2645

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
08 / 21 / 2020  
**Transaction ID : A18DE6DE5D99D4306B0A**

Amount of Each Receipt this Period  
250.00

Memo Item

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

Mailing Address 7485 EAGLE RD

City DAVISBURG State MI Zip Code 48350-3209

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
08 / 11 / 2020  
**Transaction ID : AEB334D15F95D466F8E6**

Amount of Each Receipt this Period  
200.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. HILLMAN, KEVIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7485 EAGLE RD  
 City DAVISBURG State MI Zip Code 48350-3209  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 08 / 28 / 2020  
**Transaction ID : A748C389FF1D24021B9D**  
 Amount of Each Receipt this Period 220.00  
 Memo Item

**B. HOBBS, JONATHAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11030 NEWFIELD DR  
 City FORT MILL State SC Zip Code 29707-8192  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 16 / 2020  
**Transaction ID : AA15ECC7491434DE7AA4**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. HOCKMAN, DOROTHY, L, MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6401 WINCHESTER BLVD APT 213  
 City CANAL WINCHESTER State OH Zip Code 43110-2058  
 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 08 / 04 / 2020  
**Transaction ID : AFA2322932DDF412F916**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	470.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. HOFFMAN, PAUL, A, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address N87W15810 BELLEVIEW BLVD

City MENOMONEE FALLS	State WI	Zip Code 53051-2906
-------------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		07		2020

**Transaction ID : A2CB51D75EE24471BB54**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. HOLLAND, CLAIRE, M, MRS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5508 SADDLEWOOD LN

City BRENTWOOD	State TN	Zip Code 37027-4733
-------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2020

**Transaction ID : A281EF873B38044D9B0E**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 16360 SHADOW MOUNTAIN DR

City PACIFIC PALISADES	State CA	Zip Code 90272-2352
---------------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2020

**Transaction ID : A4934A85A9BED4553884**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	800.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 70 OF 267
	(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)  
**NEW JOURNEY PAC, INC.**

**A. HONORE, FRED, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 24343 WILLIAMS AVENUE  
 City HILMAR State CA Zip Code 95324-9605  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) H&H REAL PROPERTIES LLC Occupation (for Individual) BUSINESSMAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 07 / 2020  
**Transaction ID : A14C082C2BD6B42A7B3C**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. HONORE, FRED, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 24343 WILLIAMS AVENUE  
 City HILMAR State CA Zip Code 95324-9605  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) H&H REAL PROPERTIES LLC Occupation (for Individual) BUSINESSMAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 07 / 2020  
**Transaction ID : A2421D28638584D2E846**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. HORNSBY, JAMES, H, MR., JR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 330 JIM HORNSBY LN  
 City DECATUR State TN Zip Code 37322-3006  
 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 08 / 25 / 2020  
**Transaction ID : AF2336A24C9A24165AB8**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	400.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 267
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**NEW JOURNEY PAC, INC.**

**A. HOWE, THOMAS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 712 CHICKORY DRIVE  
 City MOUNT LAUREL State NJ Zip Code 08054-4926  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 11 / 2020  
**Transaction ID : ABC0EE0676062448D9B1**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. HUDIBURGH, CHRISTINA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 117 WINDCREST  
 City FLORESVILLE State TX Zip Code 78114-1614  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HALLMARK CARDS Occupation (for Individual) INSTALLATION MERCHANTISER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 13 / 2020  
**Transaction ID : A86A08DD9348D4E18937**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. HUMPHRIES, JOHN, THOMAS, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 80 ESSEX DR  
 City PAWLEYS ISLAND State SC Zip Code 29585-5765  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 20 / 2020  
**Transaction ID : ADBB3E43E21814C9C86C**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	400.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. HUSMAN, WILFRED, C, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 593  
 609 REAGAN ST  
 City MARCUS State IA Zip Code 51035-0593  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MARCUS BOWL INC. Occupation (for Individual) PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 08 / 06 / 2020  
**Transaction ID : A537CC73DAA53464DA6C**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. HUTCHISON, V, STARR, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2835 DOTTIE LN  
 APT B  
 City GRAND JUNCTION State CO Zip Code 81506-4417  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 13 / 2020  
**Transaction ID : AE4B85FE8B0BA471DB33**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. ILSEN, ROLAND, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6847 ABBOTTSWOOD DR  
 City RANCHO PALOS VERDES State CA Zip Code 90275-3058  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 04 / 2020  
**Transaction ID : A8D983CB56FFC42B4B3A**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1200.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. IONATA, FRED, , MR.,</b>		Date of Receipt
Mailing Address 1782 ROYAL OAK PL W		<input type="text" value="08"/> / <input type="text" value="28"/> / <input type="text" value="2020"/>
City DUNEDIN	State FL	Zip Code 34698-2431
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : AE6D652DB4EC24C908EB</b>
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="230.00"/>	Amount of Each Receipt this Period <input type="text" value="40.00"/>
<input type="checkbox"/> Memo Item		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. ISLAM, ANGE, RAE, ,</b>		Date of Receipt
Mailing Address 5584 STATE ROUTE 20A		<input type="text" value="08"/> / <input type="text" value="12"/> / <input type="text" value="2020"/>
City WARSAW	State NY	Zip Code 14569-9302
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : A991A37D381FE4D17909</b>
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>	Amount of Each Receipt this Period <input type="text" value="50.00"/>
<input type="checkbox"/> Memo Item		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. JANDRAIN, JAMES, G, ,</b>		Date of Receipt
Mailing Address 3610 DODGE ST		<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>
City OMAHA	State NE	Zip Code 68131-3218
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : AE3EA37601D104A89BFD</b>
Name of Employer (for Individual) SELF EMPLOYED		Occupation (for Individual) CPA
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	Amount of Each Receipt this Period <input type="text" value="250.00"/>
<input type="checkbox"/> Memo Item		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="340.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 74 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. JENSEN, ARTHUR, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5626 DELCLIFF CIR  
 City SACRAMENTO State CA Zip Code 95822-2450  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 26 / 2020  
**Transaction ID : A1BFE0143A521446A3B**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. JHABVALA, FARROKH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6440 SW 72 CT  
 City MIAMI State FL Zip Code 33143-2903  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 08 / 03 / 2020  
**Transaction ID : A515C418DE09F43AB983**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. JHABVALA, FARROKH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6440 SW 72 CT  
 City MIAMI State FL Zip Code 33143-2903  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 08 / 10 / 2020  
**Transaction ID : AFD38325AD45D4D19993**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	520.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 75 OF 267
	(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)  
**NEW JOURNEY PAC, INC.**

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

Mailing Address 6440 SW 72 CT

City MIAMI	State FL	Zip Code 33143-2903
---------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
370.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		12		2020

**Transaction ID : AD78CEA9897BF498C829**

Amount of Each Receipt this Period  
50.00

Memo Item

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

Mailing Address 6440 SW 72 CT

City MIAMI	State FL	Zip Code 33143-2903
---------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
420.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2020

**Transaction ID : AFF422BB13FF24871AE7**

Amount of Each Receipt this Period  
50.00

Memo Item

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

Mailing Address 6440 SW 72 CT

City MIAMI	State FL	Zip Code 33143-2903
---------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
445.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2020

**Transaction ID : AAE4999F9CEA24B4BA57**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. JOHNSEY, RONALD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5539 FALLS RD  
 City DALLAS State TX Zip Code 75220-2111  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GROWTH DESTINY Occupation (for Individual) INVESTMENT MANAGEMENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 08 / 22 / 2020  
**Transaction ID : A004595A4A75B4ED3AE9**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. JOHNSEY, RONALD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5539 FALLS RD  
 City DALLAS State TX Zip Code 75220-2111  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GROWTH DESTINY Occupation (for Individual) INVESTMENT MANAGEMENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 08 / 22 / 2020  
**Transaction ID : A3D532E9F92B945CEBC2**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. JOHNSON, DENA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6010 DOUGLAS DRIVE  
 City YAKIMA State WA Zip Code 98908-2738  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 03 / 2020  
**Transaction ID : AD08DE9486CD442D7A83**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2025.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. JOHNSON, DENA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6010 DOUGLAS DRIVE  
 City YAKIMA State WA Zip Code 98908-2738  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 03 / 2020  
**Transaction ID : AA4FDC2D225CA46C9B3E**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. JOHNSON, DENA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6010 DOUGLAS DRIVE  
 City YAKIMA State WA Zip Code 98908-2738  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 20 / 2020  
**Transaction ID : A095964B90EDD4F77A74**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. JOHNSON, DENA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6010 DOUGLAS DRIVE  
 City YAKIMA State WA Zip Code 98908-2738  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 20 / 2020  
**Transaction ID : ABE4D873C88E1463E9CB**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	75.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 78 OF 267
<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)  
**NEW JOURNEY PAC, INC.**

**A. JOHNSON, GUSTAV, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4495 JON CUNNINGHAM BLVD  
 APT 412  
 City EL PASO State TX Zip Code 79934-3821  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 15 / 2020  
**Transaction ID : A62171E24B3E24775AA2**  
 Amount of Each Receipt this Period 300.00  
 Memo Item

**B. JOHNSON, HENRY C, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 106 LIBERTY LN  
 City ROCKWALL State TX Zip Code 75032-8463  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 08 / 10 / 2020  
**Transaction ID : A05A30104B767443C9DF**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. JOHNSON, RAYMOND, O, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 495 S TAAFFE ST  
 City SUNNYVALE State CA Zip Code 94086-7627  
 FEC ID number of contributing 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 08 / 21 / 2020  
**Transaction ID : AB184D232E8B646259C2**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	450.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. JONES, SHIRLEY, A, MRS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 812 EDGEWOOD DR  
 City PONCA CITY State OK Zip Code 74604-3907  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 14 / 2020  
**Transaction ID : AB3D578E3E9F54E8AA53**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. KANE, FRED, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5204 FARADAY COURT  
 5204 FARADAY CT  
 City FAIRFAX State VA Zip Code 22032  
 FEC ID number of contributing 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 08 / 31 / 2020  
**Transaction ID : A875DA3D385FC4ADCBD E**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. KEATS, ROGER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1001 OAK MEADOW DR  
 City DRIPPING SPRINGS State TX Zip Code 78620-3962  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 24 / 2020  
**Transaction ID : AFD CD76403D4B4584BB6**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	450.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 267
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)  
**NEW JOURNEY PAC, INC.**

**A. KEEFER, NANCY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 67 FAIR OAKS DR  
 City SAINT LOUIS State MO Zip Code 63124-1521  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 08 / 26 / 2020  
**Transaction ID : A9E325EA3AB494AFDAE9**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. KEENAN, MATTHEW, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 401 CLOVER CT  
 City FREDERICK State CO Zip Code 80530-6016  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 08 / 10 / 2020  
**Transaction ID : ADA1518B0C0F64B92938**  
 Amount of Each Receipt this Period 35.00  
 Memo Item

**C. KEENAN, MATTHEW, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 401 CLOVER CT  
 City FREDERICK State CO Zip Code 80530-6016  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 08 / 19 / 2020  
**Transaction ID : A347038CA613B4D77878**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	160.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. KEENAN, MATTHEW, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 401 CLOVER CT  
 City FREDERICK State CO Zip Code 80530-6016  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 08 / 31 / 2020  
**Transaction ID : AF517DC6861A04BF0871**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. KELLY, JIM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 501 OAKBROOK DRIVE  
 City LEWISVILLE State TX Zip Code 75057-2135  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) UNIVERSAL DISPLAY Occupation (for Individual) MANUFACTURING MGMT.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 08 / 10 / 2020  
**Transaction ID : AB8507924E96A48E1A4F**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. KELLY, JIM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 501 OAKBROOK DRIVE  
 City LEWISVILLE State TX Zip Code 75057-2135  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) UNIVERSAL DISPLAY Occupation (for Individual) MANUFACTURING MGMT.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 08 / 17 / 2020  
**Transaction ID : A02F3186F96524CD7895**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	175.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. KELLY, JIM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 501 OAKBROOK DRIVE  
 City LEWISVILLE State TX Zip Code 75057-2135  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) UNIVERSAL DISPLAY Occupation (for Individual) MANUFACTURING MGMT.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 08 / 31 / 2020  
**Transaction ID : A75DBD7E485F94E60A63**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. KEMPFER, TONIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 14416 W CORRAL DR  
 City SUN CITY WEST State AZ Zip Code 85375-2706  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 20 / 2020  
**Transaction ID : A02D9BA72F4244DF6A03**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. KING, HARVEY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11 AALAPAPA PLACE  
 City KAILUA State HI Zip Code 96734-3118  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 16 / 2020  
**Transaction ID : A688ECB4DAA8B4F5C868**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	700.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. KINNEY, LAKE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 900 E STANLEY BLVD  
 UNIT 383  
 City LIVERMORE State CA Zip Code 94550-4080  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt 08 / 24 / 2020  
**Transaction ID : A933D65BCADCA4155A84**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. KINTNER, ROBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 111 W 17TH ST  
 APT 4016  
 City SIOUX FALLS State SD Zip Code 57104-4994  
 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 08 / 06 / 2020  
**Transaction ID : ADE043AF5992E4602BC3**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. KISER, ROBERT, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6548 43RD ST  
 APT 1308  
 City LUBBOCK State TX Zip Code 79407-1956  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 08 / 17 / 2020  
**Transaction ID : A7C90432BFF364363887**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 225.00  
**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 84 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. KITTREDGE, ROBERT, M, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 622 N DARTMOUTH RD  
 City SPOKANE VALLEY State WA Zip Code 99206-3821  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 04 / 2020  
**Transaction ID : ACFD6AFA9E4CC4AF2B44**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. KITTREDGE, ROBERT, M, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 622 N DARTMOUTH RD  
 City SPOKANE VALLEY State WA Zip Code 99206-3821  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 08 / 28 / 2020  
**Transaction ID : A7A894D16C65E462BBFA**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

**C. KLATT, PHILIP, D, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 600 W MARKET ST  
 City WARSAW State IN Zip Code 46580-2835  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) WARSAW COMMUNITY SCHOOL Occupation (for Individual) JANITOR  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 03 / 2020  
**Transaction ID : ABBBAFF3F98B94C74B4F**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	400.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 85 OF 267
	(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)  
**NEW JOURNEY PAC, INC.**

**A. KOETHER, BERNARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address STE 1074  
 City FORT LAUDERDALE State FL Zip Code 33316  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 08 / 15 / 2020  
**Transaction ID : A67FDAD904F1E4D81B25**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. KOETHER, BERNARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address STE 1074  
 City FORT LAUDERDALE State FL Zip Code 33316  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 08 / 26 / 2020  
**Transaction ID : A0F58317E62A548B0B50**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. KOETHER, BERNARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address STE 1074  
 City FORT LAUDERDALE State FL Zip Code 33316  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 08 / 28 / 2020  
**Transaction ID : AD30BD5CDA2DA4576AE^**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	600.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. KONDRATH, PAUL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 146 CHAPEL ST  
 City STRATFORD State CT Zip Code 06614-1641  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) 1941 Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 15 / 2020  
**Transaction ID : ACF58287B71FD45EEB99**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. KORPAN, RICHARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 31483 MORNING STAR DR  
 City EVERGREEN State CO Zip Code 80439-7969  
 FEC ID number of contributing 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 08 / 31 / 2020  
**Transaction ID : AB40CC09E16714878B2D**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. KOWALIK, GEORGE, L, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 39  
 City PANNA MARIA State TX Zip Code 78144-0039  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2020  
**Transaction ID : A5397C2BEFBEF44218A5**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 267
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. KROHN, ROBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1427 S 85TH AVE  
 City OMAHA State NE Zip Code 68124-1332  
 FEC ID number of contributing 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  
 08 / 03 / 2020  
**Transaction ID : A15741FF096F74AA0834**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**B. KRUSE, DEAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1109 24TH ST.  
 City MANISTEE State MI Zip Code 49660-2316  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 03 / 2020  
**Transaction ID : A44561E22866C41C783B**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**C. KRUSE, DEAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1109 24TH ST.  
 City MANISTEE State MI Zip Code 49660-2316  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 03 / 2020  
**Transaction ID : A4E692920405842E6A3A**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	150.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 88 OF 267
	(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)  
**NEW JOURNEY PAC, INC.**

**A. KUMLER, P, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10333 E 211TH ST  
 City NOBLESVILLE State IN Zip Code 46062-8822  
 FEC ID number of contributing 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 08 / 13 / 2020  
**Transaction ID : A105AB92D7C3E4810AD6**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. KUNIN, CAROLYN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 690 WESTMINSTER DR  
 City PASADENA State CA Zip Code 91105-1513  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 19 / 2020  
**Transaction ID : A7111AA9E08DB4965847**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. LAINE, BETH, , MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7630 BRENT LN  
 City LAS VEGAS State NV Zip Code 89131-1712  
 FEC ID number of contributing 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 08 / 06 / 2020  
**Transaction ID : A3195B9FC5B1C40ACBBB**  
 Amount of Each Receipt this Period 150.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1200.00  
**TOTAL** This Period (last page this line number only)..... ▶



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 89 OF 267
	(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)  
**NEW JOURNEY PAC, INC.**

**A. LAINE, BETH, , MS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7630 BRENT LN

City LAS VEGAS	State NV	Zip Code 89131-1712
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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 ▼  
450.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2020

**Transaction ID : A8831E551783242C2998**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. LAIR, ROSETTA, ALICE, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6207 FOXCROFT RD

City ALEXANDRIA	State VA	Zip Code 22307-1104
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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 ▼  
1900.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2020

**Transaction ID : A2194AA32DE4B4F47841**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 6123 DIXIE HWY BOX 91

City BRIDGEPORT	State MI	Zip Code 48722-9618
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2020

**Transaction ID : A3402890CB33F4E3D92A**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	700.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. LARSEN, HUGH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 730 BELLEVUE # T  
 City MILFORD State MI Zip Code 48381-2209  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MICHIGAN SCIENTIFIC CORP Occupation (for Individual) ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 05 / 2020  
**Transaction ID : AC61D6701222F4800A16**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. LEE, CALMEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 122 S LONE HILL AVE  
 City GLENDORA State CA Zip Code 91741-3869  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DHS Occupation (for Individual) FEDERAL EMPLOYEE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 09 / 2020  
**Transaction ID : AB4262B57106642F8958**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. LEPAK, JOSEPH, C, DR., TTEE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3480 EDGEWOOD PARK DR  
 City COMMERCE TOWNSHIP State MI Zip Code 48382-4434  
 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 ▼ 250.00

Date of Receipt 08 / 10 / 2020  
**Transaction ID : A903422D2FB514EC7A6B**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	400.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. LESETH, MARIE, , MRS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 469 SORRENTO RD  
 City KISSIMMEE State FL Zip Code 34759-4064  
 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 ▼ 250.00

Date of Receipt 08 / 25 / 2020  
**Transaction ID : A5B13574F7F784A61A1A**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. LIGHT, DAVID, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 301 MAYERLING DR  
 City HOUSTON State TX Zip Code 77024-6417  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 08 / 11 / 2020  
**Transaction ID : A747B773971BD4297BD2**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

**C. LIND, HOWARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2831 LADBROOK WAY  
 City THOUSAND OAKS State CA Zip Code 91361-5068  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) TPC Occupation (for Individual) MANAGER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 20 / 2020  
**Transaction ID : A0EA92E8A610D4245B01**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 92 OF 267
	(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)  
**NEW JOURNEY PAC, INC.**

**A. LIVINGSTON, RON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1005 EMERALD BAY  
 City LAGUNA BEACH State CA Zip Code 92651-1231  
 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 ▼ 250.00

Date of Receipt 08 / 28 / 2020  
**Transaction ID : A893AF83DE36E475398C**  
 Amount of Each Receipt this Period 150.00  
 Memo Item

**B. LOMANGINO, CHARLIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 482 MARINER DR  
 City JUPITER State FL Zip Code 33477-4068  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NEXT GENERATION CAPITAL Occupation (for Individual) OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 08 / 11 / 2020  
**Transaction ID : A4158BDBF5EE543D793E**  
 Amount of Each Receipt this Period 25000.00  
 Memo Item

**C. LOOMIS, KARL, F, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 432 LYON LAKE RD  
 City MARSHALL State MI Zip Code 49068-8205  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 26 / 2020  
**Transaction ID : A6845131B6D9B493FA9D**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	25250.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. LOWELL, MELVIN, EARL, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1505 W 5650 N

City SAINT GEORGE	State UT	Zip Code 84770-5929
----------------------	-------------	------------------------

FEC ID number of contributing 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  
 08 / 07 / 2020

**Transaction ID : AC394566A428B4A71B21**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. LUCAS, KENNETH, J, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6735 NEZ PERCE DR

City CHANHASSEN	State MN	Zip Code 55317-9207
--------------------	-------------	------------------------

FEC ID number of contributing 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 M / D D D / Y Y Y Y Y Y  
 08 / 07 / 2020

**Transaction ID : A01777DD0B3424223A6D**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. LUSK, ROBERT, E, MR., JR USAF RE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1302 E NEW YORK ST

City INDIANAPOLIS	State IN	Zip Code 46202-3736
----------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 26 / 2020

**Transaction ID : A97DE63FCF5194B5ABDD**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	400.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. LYONS, KARL, J, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20350 ALLEGRO SHORES LN

City HUMBLE	State TX	Zip Code 77346-1649
----------------	-------------	------------------------

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

Name of Employer (for Individual) FORGED COMPONENTS	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
08		31		2020

**Transaction ID : AC3537DCF58004AC6AFF**

Amount of Each Receipt this Period  
100.00

Memo Item

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

Mailing Address 2996 WENDWOOD DR

City MARIETTA	State GA	Zip Code 30062-1417
------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
08		01		2020

**Transaction ID : A200FCD71F296479EBFF**

Amount of Each Receipt this Period  
100.00

Memo Item

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

Mailing Address 3302 SAUL RD

City KENSINGTON	State MD	Zip Code 20895-3237
--------------------	-------------	------------------------

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

Name of Employer (for Individual) GEORGE WASHINGTON UNIVERSITY	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

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

**Transaction ID : A583FE39DC2C949CE9FF**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	300.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. MADDY, TED, R, COL., USA RET**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 719 CRYSTAL MOUNTAIN DR  
 City AUSTIN State TX Zip Code 78733-6128  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 04 / 2020  
**Transaction ID : A057A472B114441AA80E**  
 Amount of Each Receipt this Period 400.00  
 Memo Item

**B. MAHLBURG, WILLIAM, M, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2050 LARKWOOD CT  
 City THE VILLAGES State FL Zip Code 32162-3495  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 449.00

Date of Receipt 08 / 26 / 2020  
**Transaction ID : A0AC01C916E6C4F34B08**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. MAHONEY, FRANCIS, J, , JR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2800 NE 14TH ST  
 City FORT LAUDERDALE State FL Zip Code 33304-1679  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 31 / 2020  
**Transaction ID : A0CAA80C417944381B30**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1150.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. MALANAPHY, JEAN, H, MRS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5590 NORWICH PKWY

City STILLWATER	State MN	Zip Code 55082-6492
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2020

**Transaction ID : A6A896BA3637741EF948**

Amount of Each Receipt this Period  
300.00

Memo Item

**B. MALLOY, JACQUELINE, A, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 135 SABINE DR

City GEORGETOWN	State TX	Zip Code 78628-2657
--------------------	-------------	------------------------

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
08		26		2020

**Transaction ID : ACD9A67EBA48F4576821**

Amount of Each Receipt this Period  
200.00

Memo Item

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

Mailing Address 601 SHREVE ST

City PUNTA GORDA	State FL	Zip Code 33950-3332
---------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1150.00

Date of Receipt  

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

**Transaction ID : A823CBD968C314D92AFB**

Amount of Each Receipt this Period  
50.00

Memo Item

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. MARINE, KAY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 619 GARDNER ST  
 City WAYZATA State MN Zip Code 55391-1034  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 19 / 2020  
**Transaction ID : ABB14E25535584BCB81C**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. MARINE, KAY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 619 GARDNER ST  
 City WAYZATA State MN Zip Code 55391-1034  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 24 / 2020  
**Transaction ID : A1EBC209BA3DC4177AB7**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. MARTIN, DANIEL, D, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 238 SW 200 ST  
 City CARROLLTON State IL Zip Code 62016-2020  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 08 / 07 / 2020  
**Transaction ID : A590A4249D74945BC850**  
 Amount of Each Receipt this Period 350.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	450.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 98 OF 267
	(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)  
**NEW JOURNEY PAC, INC.**

**A. MARTIN, LENNIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6709 RIVER VIEW CT  
 City BENBROOK State TX Zip Code 76132-2741  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 06 / 2020  
**Transaction ID : A8BA70374AB0D44ADA21**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. MARTIN, LENNIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6709 RIVER VIEW CT  
 City BENBROOK State TX Zip Code 76132-2741  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 25 / 2020  
**Transaction ID : A6E3CCC529DE841CEB24**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. MARTIN, LENNIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6709 RIVER VIEW CT  
 City BENBROOK State TX Zip Code 76132-2741  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 31 / 2020  
**Transaction ID : A90432F48D4674CD4BC9**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	125.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. MARTY, MATHEW, J, MR., III**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5193 LEGENDS DRIVE  
 City BRASELTON State GA Zip Code 30517-6210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CMC OF GEORGIA INC Occupation (for Individual) PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 08 / 28 / 2020  
**Transaction ID : A3541F85941524648973**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. MARX, RICHARD, C, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 440  
 City WAPPINGERS FALLS State NY Zip Code 12590-0440  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 05 / 2020  
**Transaction ID : AA4DE1F13A5E54DBF83D**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. MATTEI, REBECCA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 22 JARRELL FARMS DR  
 City NEWARK State DE Zip Code 19711-3063  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 03 / 2020  
**Transaction ID : A6761F1165F144298ABA**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	400.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. MATTEI, REBECCA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 22 JARRELL FARMS DR  
 City NEWARK State DE Zip Code 19711-3063  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 03 / 2020  
**Transaction ID : AC6EBD19AF6684C38B5F**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. MATTEI, REBECCA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 22 JARRELL FARMS DR  
 City NEWARK State DE Zip Code 19711-3063  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 08 / 10 / 2020  
**Transaction ID : A8663E8F88ED1457DB25**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. MCCREIGHT, RICHARD, D, MRS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7706 ROYAL AZALEA CT  
 City SPRINGFIELD State VA Zip Code 22153-2157  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) UNEMPLOYED Occupation (for Individual) UNEMPLOYED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 08 / 05 / 2020  
**Transaction ID : AF019633A10874838B09**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 60.00  
**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 101 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. MCEVOY, CHARLES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 810219  
 City DALLAS State TX Zip Code 75381-0219  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) WESTERN EXTRUSIONS Occupation (for Individual) MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 20 / 2020  
**Transaction ID : AAA5334336EE14828906**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. MCGARVEY, FRANK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 628 CANYON GREENS DR  
 City LAS VEGAS State NV Zip Code 89144-0832  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 16 / 2020  
**Transaction ID : A770C1CAD523D40A2917**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. MCGREGOR, DEAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 513  
 City WILSONVILLE State OR Zip Code 97070-0513  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 24 / 2020  
**Transaction ID : AC4E80E57BBC2487190A**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	700.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. MCKISSACK, DOUGLAS, R, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7 BITTERROOT LN

City SAVANNAH	State GA	Zip Code 31419-9507
------------------	-------------	------------------------

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

Name of Employer (for Individual) GULFSTREAM AEROSPACE	Occupation (for Individual) ENGINEER
---	---

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
08		05		2020

**Transaction ID : AF350CE0602C54989953**

Amount of Each Receipt this Period  
100.00

Memo Item

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

Mailing Address 34 HASELL STREET

City CHARLESTON	State SC	Zip Code 29401-1627
--------------------	-------------	------------------------

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

Name of Employer (for Individual) MINTZ LEVIN	Occupation (for Individual) LAWYER
--	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2020

**Transaction ID : ADCF3DB17B7304E779FD**

Amount of Each Receipt this Period  
100.00

Memo Item

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

Mailing Address 3607 BAKER ST

City SAN FRANCISCO	State CA	Zip Code 94123-1004
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) CITY OF SAN FRANCISCO	Occupation (for Individual) ASSISTANT DISTRICT ATTORNEY
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2020

**Transaction ID : AF0A01ADE597A41D5B35**

Amount of Each Receipt this Period  
500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	700.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 103 OF 267
<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)  
**NEW JOURNEY PAC, INC.**

**A. MERRICK, SUSAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1715 CATTLE DRIVE  
 City CEDAR PARK State TX Zip Code 78613-1488  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 18 / 2020  
**Transaction ID : A7E3AF2D9025B4D27A35**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. MESHBERG, SAMUEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 118VIA PALACIO  
 City PALM BEACH GARDENS State FL Zip Code 33418-6212  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 24 / 2020  
**Transaction ID : A34D707C1F97B4E459CB**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. METCALF, DAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 715 EAST 100 NORTH STREET  
 715 E 100 NORTH  
 City CEDAR FORT State UT Zip Code 84013  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 08 / 20 / 2020  
**Transaction ID : AC7BE348E5DE7454E8F8**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	175.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. METCALFE, NORMAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2007 BAYADERE TER  
 City CORONA DEL MAR State CA Zip Code 92625-1812  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) INVESTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 03 / 2020  
**Transaction ID : A23CB4F161F074DD094C**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. MICK, WILLIAM, G, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 126 SOUTH ST  
 City CAZENOVIA State WI Zip Code 53924-9707  
 FEC ID number of contributing 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 08 / 06 / 2020  
**Transaction ID : AC8802A9ED9714362AB7**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. MIDDLETON, EDWIN, G, MR., JR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 149 N GALT AVE  
 City LOUISVILLE State KY Zip Code 40206-2309  
 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 ▼ 250.00

Date of Receipt 08 / 10 / 2020  
**Transaction ID : A8F058CCB46714350A88**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	300.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 267		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. MILAN, WILLIAM, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1258 E 2625 N  
 City OGDEN State UT Zip Code 84414-2615  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 226.00

Date of Receipt 08 / 25 / 2020  
**Transaction ID : AF2AA357B118D49428BC**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. MILLER, M, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 143  
 City HOWARD State OH Zip Code 43028-0143  
 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 ▼ 210.00

Date of Receipt 08 / 28 / 2020  
**Transaction ID : AA158E543544940D7983**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. MILLS, BRUCE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 22 TRENT DR  
 City SAINT LOUIS State MO Zip Code 63124-1033  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 24 / 2020  
**Transaction ID : AE469D03632094256B37**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1035.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. MIRABILE, STEVEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 315 ASHAROKEN AVE  
 City NORTHPORT State NY Zip Code 11768-1168  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 08 / 19 / 2020  
**Transaction ID : A211237C09CA74C35A75**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. MISSEL, JEROME, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7 PLANK HOUSE RD  
 City SAVANNAH State GA Zip Code 31410-1029  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 26 / 2020  
**Transaction ID : A13A6A72560F54EB7BB7**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. MONTGOMERY, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 20153  
 City WICKENBURG State AZ Zip Code 85358-5153  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 03 / 2020  
**Transaction ID : A17293D549E434B8790B**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	310.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 107 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. MONTGOMERY, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 20153  
 City WICKENBURG State AZ Zip Code 85358-5153  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 08 / 10 / 2020  
**Transaction ID : A20D916820D604D6B990**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. MONTGOMERY, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 20153  
 City WICKENBURG State AZ Zip Code 85358-5153  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt 08 / 30 / 2020  
**Transaction ID : A649D3F7976B44266BEF**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. MORRIS, VINCENT G, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2046 BRIGDEN RD  
 City PASADENA State CA Zip Code 91104-3341  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BERNARDS Occupation (for Individual) SR PM  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 10 / 2020  
**Transaction ID : A4D6A158897984F18A92**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 110.00  
**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 108 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. MORYKWAS, CHRISTINE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2828 FOREST DRIVE  
 City WINSTON SALEM State NC Zip Code 27104-2016  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 26 / 2020  
**Transaction ID : A2919913A194B400ABAF**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. MURNANE, MARY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 250 S NAPERVILLE RD. ? APT 301  
 City WHEATON State IL Zip Code 60187-5487  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 03 / 2020  
**Transaction ID : A32F373E22D65423F8BE**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. MURNANE, MARY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 250 S NAPERVILLE RD. ? APT 301  
 City WHEATON State IL Zip Code 60187-5487  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 07 / 2020  
**Transaction ID : AC7FE068D12A445CFBC0**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	300.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 OF 267
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**NEW JOURNEY PAC, INC.**

**A. NEBEL, CHARLES, E, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 664

City MUNISING	State MI	Zip Code 49862-0664
------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
 08 / 07 / 2020  
**Transaction ID : AD32994A1A609459A8E4**

Amount of Each Receipt this Period  
150.00

Memo Item

**B. NELSON, LAWRENCE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1619 TWIN LAKES CIRCLE

City GREEN BAY	State WI	Zip Code 54311-5671
-------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 08 / 11 / 2020  
**Transaction ID : A07ACBA60D36A4E47B30**

Amount of Each Receipt this Period  
50.00

Memo Item

**C. NELSON, ROBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1993 STATE HWY 119 N

City YORKTOWN	State TX	Zip Code 78164-3481
------------------	-------------	------------------------

FEC ID number of contributing 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  
 08 / 05 / 2020  
**Transaction ID : A46A31B59F68E4891BD1**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	225.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 110 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. NELSON, ROBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1993 STATE HWY 119 N  
 City YORKTOWN State TX Zip Code 78164-3481  
 FEC ID number of contributing 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 08 / 05 / 2020  
**Transaction ID : A3ACDB0ECF776482C9D2**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. NICHOLAS, PHYLLIS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 40 HOWARD ROAD  
 City GREENWICH State CT Zip Code 06831-3104  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 03 / 2020  
**Transaction ID : A745E914B53EF46E0B6F**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. NICOLAU, CARLA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 19548 STRATHERN ST  
 City RESEDA State CA Zip Code 91335-1035  
 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 ▼ 220.00

Date of Receipt 08 / 24 / 2020  
**Transaction ID : AFDfEE45629BD42FABCF**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 145.00  
**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 111 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. NIKKEL, JOHN, G, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6800 S GRANITE AVE  
APT 306

City TULSA State OK Zip Code 74136-7042

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
08 / 06 / 2020  
**Transaction ID : A742034B9F72343ABB01**

Amount of Each Receipt this Period  
300.00

Memo Item

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

Mailing Address 6600 N LOWER CASCADE DR

City JACKSON State WY Zip Code 83001-9026

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

Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1250.00

Date of Receipt  
08 / 31 / 2020  
**Transaction ID : AF124B87BD753451EA5F**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 1912 CARROLL AVE  
APT 1

City SAINT PAUL State MN Zip Code 55104-3779

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 ▼  
400.00

Date of Receipt  
08 / 11 / 2020  
**Transaction ID : AC2B780304ABA4E558DA**

Amount of Each Receipt this Period  
200.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1000.00

**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 112 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

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

Mailing Address **834 COLLEGE BLVD**

City <b>ALAMO HEIGHTS</b>	State <b>TX</b>	Zip Code <b>78209-3628</b>
------------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) <b>RETIRED</b>	Occupation (for Individual) <b>RETIRED</b>
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	10	/	2020

**Transaction ID : A5D8C4ACFBC9142A9A1E**

Amount of Each Receipt this Period  

250.00
--------

 Memo Item

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

Mailing Address **834 COLLEGE BLVD**

City <b>ALAMO HEIGHTS</b>	State <b>TX</b>	Zip Code <b>78209-3628</b>
------------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) <b>RETIRED</b>	Occupation (for Individual) <b>RETIRED</b>
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	10	/	2020

**Transaction ID : A19E62A9B3ACB46BA8AB**

Amount of Each Receipt this Period  

250.00
--------

 Memo Item

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

Mailing Address **275 NORMANDY DRIVE**

City <b>TAVERNIER</b>	State <b>FL</b>	Zip Code <b>33070-2736</b>
--------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) <b>ADSWERVE</b>	Occupation (for Individual) <b>ADVISOR</b>
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  

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

**Transaction ID : AB77EB80EF852445AAA8**

Amount of Each Receipt this Period  

100.00
--------

 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>600.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 113 OF 267
<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)  
**NEW JOURNEY PAC, INC.**

**A. O'MEARA, VICKI, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 275 NORMANDY DRIVE

City TAVERNIER	State FL	Zip Code 33070-2736
-------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	19	/	2020

**Transaction ID : AA39A83E148BE494793C**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. O'MEARA, VICKI, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 275 NORMANDY DRIVE

City TAVERNIER	State FL	Zip Code 33070-2736
-------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	24	/	2020

**Transaction ID : A200D65DC63E946559FE**

Amount of Each Receipt this Period  
100.00

Memo Item

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

Mailing Address 29 SHORE VISTA LN

City GREER	State SC	Zip Code 29651-5079
---------------	-------------	------------------------

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

Name of Employer (for Individual) PEARL CENTER	Occupation (for Individual) EDUCATIONAL THERAPIST
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	16	/	2020

**Transaction ID : A271C1C9EC5FE4DC0ACF**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	450.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. ORMSON, NANCY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7713 STUYVESANT AVE  
 City AMARILLO State TX Zip Code 79121-1915  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 14 / 2020  
**Transaction ID : A6B734262797C4239A6B**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. ORT, MARY CATHERINE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 157 WATERTON  
 City WILLIAMSBURG State VA Zip Code 23188-8400  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 03 / 2020  
**Transaction ID : A827ED2B079F442D2B3B**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. ORWIG, THEODORE, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10 FLATCREEK PLACE  
 City SPRING State TX Zip Code 77381-6103  
 FEC ID number of contributing 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 08 / 19 / 2020  
**Transaction ID : AF48F4C8661A442B9AA4**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	450.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 115 OF 267
<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)  
**NEW JOURNEY PAC, INC.**

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

Mailing Address 12901 CATALINA ST

City LEAWOOD	State KS	Zip Code 66209-2390
-----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
08		31		2020

**Transaction ID : ABDC87A861EE04227B6C**

Amount of Each Receipt this Period  
300.00

Memo Item

**B. PACKARD, DONALD, H, MM1, USN WWII V**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 3

City BRADLEY	State IL	Zip Code 60915-0003
-----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

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

**Transaction ID : A5559C692714146C1848**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. PACKARD, DONALD, H, MM1, USN WWII V**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 3

City BRADLEY	State IL	Zip Code 60915-0003
-----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
08		26		2020

**Transaction ID : A3BF68325A1B84BD0993**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 116 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. PAGLIARO, JUDY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 240 CAPE SAINT JOHN ROAD  
 City ANNAPOLIS State MD Zip Code 21401-7230  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ACCOUNTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 08 / 19 / 2020  
**Transaction ID : ABA3CD6F74BD94B77922**  
 Amount of Each Receipt this Period 35.00  
 Memo Item

**B. PANNELL, JEFF, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1418 WHISPERING DELL CT  
 City SOUTHLAKE State TX Zip Code 76092-4615  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 03 / 2020  
**Transaction ID : AA97B85E60F0F4863A76**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. PAPHITES, TASSOS, JOHN, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1800 BROAD BAY CIR  
 City VIRGINIA BCH State VA Zip Code 23454-1501  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BURGER BUSTERS INC Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 07 / 2020  
**Transaction ID : AA4D405D4C0824E47AC5**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	385.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 117 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. PARKINSON, ROBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 43765 LITTLE CLIFFS ROAD  
 City HOLLYWOOD State MD Zip Code 20636-2444  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 08 / 03 / 2020  
**Transaction ID : A41909792563841D18EA**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. PARKINSON, ROBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 43765 LITTLE CLIFFS ROAD  
 City HOLLYWOOD State MD Zip Code 20636-2444  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 08 / 03 / 2020  
**Transaction ID : A0CD2FB2BBE134E64AE0**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. PARKINSON, ROBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 43765 LITTLE CLIFFS ROAD  
 City HOLLYWOOD State MD Zip Code 20636-2444  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 08 / 04 / 2020  
**Transaction ID : A32A0FFA5C7D74369B62**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	30.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 118 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. PARKINSON, ROBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 43765 LITTLE CLIFFS ROAD  
 City HOLLYWOOD State MD Zip Code 20636-2444  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 08 / 07 / 2020  
**Transaction ID : A4E1CB0E84E124BD0863**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. PARKINSON, ROBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 43765 LITTLE CLIFFS ROAD  
 City HOLLYWOOD State MD Zip Code 20636-2444  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 08 / 10 / 2020  
**Transaction ID : A396B5B0D77464040A3B**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. PAWLICK, MARIAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 100 CRABTREE LN  
 City LAKE BLUFF State IL Zip Code 60044-2139  
 FEC ID number of contributing 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 08 / 25 / 2020  
**Transaction ID : A391D83843CB6435B859**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	160.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 119 OF 267
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. PEAK, MARGARET, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3308 PRESTON RD  
 STE 350  
 City PLANO State TX Zip Code 75093-7471  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) MANAGEMENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 08 / 18 / 2020  
**Transaction ID : AC7E77A825E574EF6829**  
 Amount of Each Receipt this Period 2000.00  
 Memo Item

**B. PEARSON, KIMBERLEY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1861 INLET DR  
 City NORTH FORT MYERS State FL Zip Code 33903-5007  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) PROFESSIONAL GUARDIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 03 / 2020  
**Transaction ID : AB8F7305E97BF400F984**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. PERRY, HENRY, D, , III**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 150 SECLUDED WAY  
 150 SECLUDED WAY  
 City TITUSVILLE State FL Zip Code 32780  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 08 / 28 / 2020  
**Transaction ID : A197586B0E67F41D682C**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 120 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. PERRY, MAX, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1111 DEER CREEK LN  
 City BELLINGHAM State WA Zip Code 98226-9632  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 16 / 2020  
**Transaction ID : A3A735FD24FA44C989AB**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. PETERSEN, TIM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 22442 GOLDRUSH  
 City LAKE FOREST State CA Zip Code 92630-4307  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 29 / 2020  
**Transaction ID : AB1AE362495644E589BE**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. PETERSON, KEVIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 18 JOANIE LN  
 City BUFFALO State NY Zip Code 14228-1917  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) WMS SALES Occupation (for Individual) SALES  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 10 / 2020  
**Transaction ID : ABCB2E3649889402EB24**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	400.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 121 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. PETERSON, KEVIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 18 JOANIE LN  
 City BUFFALO State NY Zip Code 14228-1917  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) WMS SALES Occupation (for Individual) SALES  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 25 / 2020  
**Transaction ID : A86AB186AC7F540F2A8C**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. PETERSON, KEVIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 18 JOANIE LN  
 City BUFFALO State NY Zip Code 14228-1917  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) WMS SALES Occupation (for Individual) SALES  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 31 / 2020  
**Transaction ID : A3B5669ADDF6E45109CF**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. PFEIFFER, PATRICIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 31041 WILDWOODS  
 City EVERGREEN State CO Zip Code 80439-7974  
 FEC ID number of contributing 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 08 / 20 / 2020  
**Transaction ID : A2D586606627848B38D4**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	200.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 122 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. PHILBRICK, KEMUEL, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5138 NICKLAUS DR NW  
 City ROCHESTER State MN Zip Code 55901-3795  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MAYO CLINIC Occupation (for Individual) CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 07 / 2020  
**Transaction ID : A066463F43A0B4842919**  
 Amount of Each Receipt this Period 150.00  
 Memo Item

**B. PHILLIPS, ANNE, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 970 ELDORADO AVENUE  
 City CLEARWATER BEACH State FL Zip Code 33767-1030  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1225.00

Date of Receipt 08 / 03 / 2020  
**Transaction ID : AEA492F06BFC54B79874**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. PLACE, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5710 MARILANE ST  
 City YAKIMA State WA Zip Code 98908-2362  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 03 / 2020  
**Transaction ID : A732DA049C0FD440C97E**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 123 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

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

Mailing Address 5710 MARILANE ST

City YAKIMA	State WA	Zip Code 98908-2362
----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2020

**Transaction ID : AAFB2E217949641AF919**

Amount of Each Receipt this Period  
250.00

Memo Item

**B. PLYLAR, WAYNE, D, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9105 WARREN H ABERNATHY HWY

City SPARTANBURG	State SC	Zip Code 29301-5015
---------------------	-------------	------------------------

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

Name of Employer (for Individual) OMICRON LLC	Occupation (for Individual) MANAGER
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  

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

**Transaction ID : ACA1A5FFFEACAA4563A9D**

Amount of Each Receipt this Period  
10.00

Memo Item

**C. POND, CHARLES, B, MR., III**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8278 KINGS LANDING LN

City SMITHFIELD	State VA	Zip Code 23430-3000
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2020

**Transaction ID : A945242DA3C3744E58DB**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	510.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 124 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. POSSIN, MARC, S, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6093 N 2200TH AVE  
 City GENESEO State IL Zip Code 61254-8834  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 08 / 12 / 2020  
**Transaction ID : A7EF4A6DB3B1D4A21AA2**  
 Amount of Each Receipt this Period 300.00  
 Memo Item

**B. POSSIN, MARC, S, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6093 N 2200TH AVE  
 City GENESEO State IL Zip Code 61254-8834  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1550.00

Date of Receipt 08 / 31 / 2020  
**Transaction ID : A956D807E58DE4002A30**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. PRATHER, CHERRY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 1877  
 City MADISON State MS Zip Code 39130-1877  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 30 / 2020  
**Transaction ID : A7AB0BE6CB206459EBDA**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1300.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 125 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. PRINDLE, EDMOND, JAY, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9121 BARNEVELD ST  
 City SPRING VALLEY State CA Zip Code 91977-5813  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 28 / 2020  
**Transaction ID : A0421A12A820246739AB**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. PROCTOR, R DANIEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 301 MERCURY DRIVE  
 City CHAMPAIGN State IL Zip Code 61822-9652  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 03 / 2020  
**Transaction ID : AFAE209D99C1B40FCBE5**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. PROCTOR, R DANIEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 301 MERCURY DRIVE  
 City CHAMPAIGN State IL Zip Code 61822-9652  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 08 / 05 / 2020  
**Transaction ID : A58831C335DA44B80978**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	700.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 126 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. PROSSER, THOMAS, J, , TTEE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1028 SURREY CT  
 City NEENAH State WI Zip Code 54956-4232  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 05 / 2020  
**Transaction ID : A993C4816772142139AD**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. PROSSER, THOMAS, J, , TTEE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1028 SURREY CT  
 City NEENAH State WI Zip Code 54956-4232  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 08 / 26 / 2020  
**Transaction ID : A4D04CFF8F42E4398BEA**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. PURMORT, JOSEPH, L, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4547 GLADE RD  
 City FOREST PARK State GA Zip Code 30297-3749  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) LOCKHEAD MARTIN Occupation (for Individual) FABRICATION MEC  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 25 / 2020  
**Transaction ID : A6A419F758C44468C979**  
 Amount of Each Receipt this Period 150.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	650.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 127 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. PURSWELL, WANDA, J, MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1920 HONEY LAUREL DR  
 City CONROE State TX Zip Code 77304-2156  
 FEC ID number of contributing 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 08 / 28 / 2020  
**Transaction ID : A82F4F1FBFF7F47B9B86**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. RANDALL, BONNIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8636 CASTLE CREEK DR  
 City ROSEVILLE State CA Zip Code 95661-7353  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 23 / 2020  
**Transaction ID : AA5176F42837F4D29BCF**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. RANDOL, RANDY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2628 QUENBY AVE  
 City WEST UNIVERSITY PLACE State TX Zip Code 77005-2428  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) CONSULTANT  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 19 / 2020  
**Transaction ID : A8F0F70A63C374380BDA**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 128 OF 267
<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

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)  
**NEW JOURNEY PAC, INC.**

**A. RAUCH, SALLY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6670 GULF OF MEXICO DR  
 City LONGBOAT KEY State FL Zip Code 34228-1302  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 17 / 2020  
**Transaction ID : AB7859EA900C04F0C889**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. RAYES, PATRICK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 195429  
 City DALLAS State TX Zip Code 75219-8607  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 03 / 2020  
**Transaction ID : A7B1F518E9C3A4B4D8BA**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. REED, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 931  
 City TRABUCO CANYON State CA Zip Code 92678-0931  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 08 / 31 / 2020  
**Transaction ID : ADB4A499BD2704938BF0**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	775.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 129 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. REID, WILLIAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 445 MADISON STREET  
 City DENVER State CO Zip Code 80206-4438  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 01 / 2020  
**Transaction ID : A5AAED3A7CE4A4C48AEI**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. RESZEL, PAUL, A, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1618 AUTUMN RUN  
 City FORT WAYNE State IN Zip Code 46845-8884  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2020  
**Transaction ID : A3B6F1F5D90CE40E1957**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. RICE, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2116 AMARGO WAY  
 City NAPLES State FL Zip Code 34119-3369  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 31 / 2020  
**Transaction ID : A9C3005B5517B4D35BD5**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	325.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 130 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. RICHMOND, JOEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 63 VALLEY VIEW ROAD  
 City CLAYSVILLE State PA Zip Code 15323-1023  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) OTIS EASTERN SERVICE Occupation (for Individual) PROJECT MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 08 / 24 / 2020  
**Transaction ID : A359BDB3D3BB343E29BD**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. RICHTER, CHESTER, D, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 134 ENCINO GRANDE ST  
 City SAN ANTONIO State TX Zip Code 78232-3827  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 213.00

Date of Receipt 08 / 07 / 2020  
**Transaction ID : AF1BD73485A7E486690A**  
 Amount of Each Receipt this Period 75.00  
 Memo Item

**C. RICKENBAUGH, MARY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address EIME ROAD  
 City DITTMER State MO Zip Code 63023  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 25 / 2020  
**Transaction ID : AF4E273585C5F4FE9BF9**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	350.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 131 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. RIES, MELVIN, A, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3585 ROUND BARN BLVD

City SANTA ROSA	State CA	Zip Code 95403-0134
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
285.53

Date of Receipt  

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

**Transaction ID : A0B1C947651BF4599A2B**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. RIPPY, R, ALLEN, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4951 NEW CENTRE DR

City WILMINGTON	State NC	Zip Code 28403-1662
--------------------	-------------	------------------------

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

Name of Employer (for Individual) RIPPY CADILLAC	Occupation (for Individual) AUTO DEALER
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
08		21		2020

**Transaction ID : A870B26B8408F47ABA9C**

Amount of Each Receipt this Period  
200.00

Memo Item

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

Mailing Address 2411 STATION RD

City MIDDLETOWN	State MD	Zip Code 21769-9114
--------------------	-------------	------------------------

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

Name of Employer (for Individual) WILSON INC	Occupation (for Individual) AUTO DEALER
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
08		16		2020

**Transaction ID : AA0CC5545350F405EA0B**

Amount of Each Receipt this Period  
500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	800.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 132 OF 267
<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)  
**NEW JOURNEY PAC, INC.**

**A. ROBERTSON, TRAVIS, E, SFC,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2465 ANTIOCH RD

City WETUMPKA	State AL	Zip Code 36092-6236
------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	10	/	2020

**Transaction ID : A2ACC022AE9174C4AB76**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. ROBERTSON, TRAVIS, E, SFC,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2465 ANTIOCH RD

City WETUMPKA	State AL	Zip Code 36092-6236
------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
550.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	26	/	2020

**Transaction ID : AC1452982806E4E7982E**

Amount of Each Receipt this Period  
50.00

Memo Item

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

Mailing Address 193 CHALMERS ST

City SPRINGFIELD	State MA	Zip Code 01118-1617
---------------------	-------------	------------------------

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

Name of Employer (for Individual) FAMILY CARE COUNSELING ASSOCIATES	Occupation (for Individual) MENTAL HEALTH PROVIDER
--	---

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
08	/	03	/	2020

**Transaction ID : A11732EDD2B9A4AE18F7**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	150.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 133 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. RODRIGUEZ, ALBERTO, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5977 SW 51ST ST  
 City MIAMI State FL Zip Code 33155-6321  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AARPA Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1550.00

Date of Receipt 08 / 03 / 2020  
**Transaction ID : A2EFB9CEFE00F4F53A27**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. RUSSELL, WILLIAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 777 NORTH POST OAK ROAD  
 City HOUSTON State TX Zip Code 77024-3800  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 30 / 2020  
**Transaction ID : AE9BE51636FCF431B93C**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. RUSSO, ANTHONY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 395 WEST PASSAIC STREET  
 395 WEST PASSAIC STREET  
 City ROCHELLE PARK State NJ Zip Code 07662  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) EXECUTIVE 372724468104000  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 29 / 2020  
**Transaction ID : A7E61ECEEE05343F5B90**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	375.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 134 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. RYAN, LARRY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 18 CINDER CT  
 City SACRAMENTO State CA Zip Code 95831-2738  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 312.50

Date of Receipt **08 / 04 / 2020**  
**Transaction ID : AA82F925D50474EDE9DD**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. RYAN, LARRY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 18 CINDER CT  
 City SACRAMENTO State CA Zip Code 95831-2738  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 362.50

Date of Receipt **08 / 12 / 2020**  
**Transaction ID : A65CC6A1B229D47F1B0E**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. RYAN, LARRY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 18 CINDER CT  
 City SACRAMENTO State CA Zip Code 95831-2738  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 412.50

Date of Receipt **08 / 18 / 2020**  
**Transaction ID : A01672994BD644DBFB4D**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	150.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 135 OF 267		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. RYAN, LARRY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 18 CINDER CT  
 City SACRAMENTO State CA Zip Code 95831-2738  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 462.50

Date of Receipt 08 / 31 / 2020  
**Transaction ID : A4E2BACAAEEB6499789E**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. SALHER, RICHARD, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 14027 E SAND FLOWER DR  
 City SCOTTSDALE State AZ Zip Code 85262-1200  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 208.00

Date of Receipt 08 / 03 / 2020  
**Transaction ID : AD472DDF556A4031993**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. SALHER, RICHARD, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 14027 E SAND FLOWER DR  
 City SCOTTSDALE State AZ Zip Code 85262-1200  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 208.00

Date of Receipt 08 / 03 / 2020  
**Transaction ID : AD4F43B28C75D4DAE987**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	70.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 136 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. SALHER, RICHARD, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 14027 E SAND FLOWER DR  
 City SCOTTSDALE State AZ Zip Code 85262-1200  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 218.00

Date of Receipt 08 / 04 / 2020  
**Transaction ID : A3621D25AD9D04682A93**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. SALHER, RICHARD, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 14027 E SAND FLOWER DR  
 City SCOTTSDALE State AZ Zip Code 85262-1200  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 238.00

Date of Receipt 08 / 05 / 2020  
**Transaction ID : AF09B4C6DD3A149C4B3E**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. SALHER, RICHARD, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 14027 E SAND FLOWER DR  
 City SCOTTSDALE State AZ Zip Code 85262-1200  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 238.00

Date of Receipt 08 / 05 / 2020  
**Transaction ID : A228405D03DC349CAAC7**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 30.00  
**TOTAL** This Period (last page this line number only).....▶



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 137 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. SALHER, RICHARD, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 14027 E SAND FLOWER DR  
 City SCOTTSDALE State AZ Zip Code 85262-1200  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 248.00

Date of Receipt 08 / 10 / 2020  
**Transaction ID : ABC79A01B4DBE4BAE8E1**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. SALHER, RICHARD, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 14027 E SAND FLOWER DR  
 City SCOTTSDALE State AZ Zip Code 85262-1200  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 258.00

Date of Receipt 08 / 12 / 2020  
**Transaction ID : A7222D27697A9450EA07**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. SALHER, RICHARD, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 14027 E SAND FLOWER DR  
 City SCOTTSDALE State AZ Zip Code 85262-1200  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 268.00

Date of Receipt 08 / 24 / 2020  
**Transaction ID : A25A8A8E33F224E2BBCF**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 30.00  
**TOTAL** This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 138 OF 267
<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)  
**NEW JOURNEY PAC, INC.**

**A. SALIBA, ANTHONY, J., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1935 N MOHAWK ST  
 City CHICAGO State IL Zip Code 60614-5219  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 08 / 31 / 2020  
**Transaction ID : AC0B93A6138764E14B61**  
 Amount of Each Receipt this Period 10000.00  
 Memo Item

**B. SAMPLE, SEAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7580 ALKIRE ST  
 City ARVADA State CO Zip Code 80005-2900  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RELIANCE OFS Occupation (for Individual) TRANSPORTATION MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 19 / 2020  
**Transaction ID : A8930E7CA49874A20BBA**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. SASS, LELAND, W, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 615 W 21ST AVE  
 City APACHE JUNCTION State AZ Zip Code 85120-7707  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SOFT INC Occupation (for Individual) CONTRACTOR  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 07 / 2020  
**Transaction ID : AC53FC8C40A174B1BB15**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10200.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 139 OF 267
<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)  
**NEW JOURNEY PAC, INC.**

**A. SAUPE, AUDREY, B, MRS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4256 CORBRIDGE CRSE

City WILLIAMSBURG	State VA	Zip Code 23188-2852
----------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

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

**Transaction ID : AA3195CA7CF6A4890B82**

Amount of Each Receipt this Period  
500.00

Memo Item

**B. SAUPE, AUDREY, B, MRS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4256 CORBRIDGE CRSE

City WILLIAMSBURG	State VA	Zip Code 23188-2852
----------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  

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

**Transaction ID : AB68FC57D9374428EBA2**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 1662 NORTH US ONE STE A  
1662A NO US 1

City JUPITER	State FL	Zip Code 33469
-----------------	-------------	-------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) ATTORNEY
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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
08	/	03	/	2020

**Transaction ID : ACE813666FB7642A0A1C**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1100.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 140 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. SCARPA, FRANK, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 199 COMMODORE DR  
 City JUPITER State FL Zip Code 33477-4111  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 26 / 2020  
**Transaction ID : A64CEF24617974518B32**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. SCAR, ROBERT, E, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1 BIG LEVEL DR  
 City ASHEVILLE State NC Zip Code 28804-2900  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 08 / 10 / 2020  
**Transaction ID : A0202AF8948364345947**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

**C. SCHMIDT, STEVEN, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 14718 SE 172ND PLACE  
 City RENTON State WA Zip Code 98058-8701  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 08 / 31 / 2020  
**Transaction ID : A4686BB47D248424DB6D**  
 Amount of Each Receipt this Period 35.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	485.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 141 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

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

Mailing Address 9512, DOGWOOD ESTATES DRIVE

City GERMANTOWN	State TN	Zip Code 38139-5609
--------------------	-------------	------------------------

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

Name of Employer (for Individual) UNEMPLOYED	Occupation (for Individual) NA
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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  
 08 / 21 / 2020

**Transaction ID : A23B33B67207D44ADBBD**

Amount of Each Receipt this Period  
50.00

Memo Item

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

Mailing Address PO BOX 298

City JACKSON	State NH	Zip Code 03846-0298
-----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 16 / 2020

**Transaction ID : A37AED70838984DA0832**

Amount of Each Receipt this Period  
100.00

Memo Item

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

Mailing Address 1422 WELLESLEY DR

City LEWISVILLE	State TX	Zip Code 75067-4452
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 17 / 2020

**Transaction ID : AA03694CEBBC34ED9AFD**

Amount of Each Receipt this Period  
200.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	350.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 142 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. SETTLES, STEVE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 28 PORTO MAR  
 UNIT 502  
 City PALM COAST State FL Zip Code 32137-5370  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INTUITION, LLCA Occupation (for Individual) BUSINESS OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 24 / 2020  
**Transaction ID : A63403B97A01D4277A53**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. SEWARD, WALTER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1919 WILLOWGREEN DRIVE  
 City BEAVERCREEK State OH Zip Code 45432-4014  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2200.00

Date of Receipt 08 / 16 / 2020  
**Transaction ID : A2F21670939E54236AD9**  
 Amount of Each Receipt this Period 1500.00  
 Memo Item

**C. SHARP, GLORIA, J, MISS,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7731 REECER CREEK RD  
 City ELLENSBURG State WA Zip Code 98926-8846  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 28 / 2020  
**Transaction ID : A6D80092489674F75AD8**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2600.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 143 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. SHAW, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 142 W 720TH AVE  
 City FORT SCOTT State KS Zip Code 66701-8782  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2228.00

Date of Receipt 08 / 13 / 2020  
**Transaction ID : A6484E5D154624A1A92C**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. SHAW, STUART, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6009 ELEOS CIRCLE  
 City AUSTIN State TX Zip Code 78735-6110  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BONNER CARRINGTON Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 18 / 2020  
**Transaction ID : A1D098DD56CAD44CAB86**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. SHAW, STUART, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6009 ELEOS CIRCLE  
 City AUSTIN State TX Zip Code 78735-6110  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BONNER CARRINGTON Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 08 / 31 / 2020  
**Transaction ID : A0E012383598F4717A4C**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1050.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 144 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. SIEFFERT, JOHN, J, MR., JR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 740 RANDALL DR  
 City TROY State MI Zip Code 48085-4853  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 06 / 2020  
**Transaction ID : ABD206A61F8AE4D4EAF6**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. SIEFFERT, JOHN, J, MR., JR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 740 RANDALL DR  
 City TROY State MI Zip Code 48085-4853  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 31 / 2020  
**Transaction ID : A8272C56B8A044DD29E6**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

**C. SIGMOND, ERIC, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3010 3RD ST. NW  
 City SIDNEY State MT Zip Code 59270-5902  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 03 / 2020  
**Transaction ID : A7C600A764DEC491DAD1**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	325.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 145 OF 267
<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)  
**NEW JOURNEY PAC, INC.**

**A. SIGMOND, ERIC, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3010 3RD ST. NW  
 City SIDNEY State MT Zip Code 59270-5902  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 07 / 2020  
**Transaction ID : ACA0B7A094A6245AB962**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. SIMKO, PAUL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 16600 CYPRESS VILLA LN  
 City FORT MYERS State FL Zip Code 33908-7719  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 25 / 2020  
**Transaction ID : AB713B3C37A8F42B0B45**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. SLOAN, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 664 JAGUAR CT  
 City POINCIANA State FL Zip Code 34759-4231  
 FEC ID number of contributing 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 08 / 13 / 2020  
**Transaction ID : ACD37AE19FA5C4F6B861**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	325.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 146 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. SLOAN, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 664 JAGUAR CT  
 City POINCIANA State FL Zip Code 34759-4231  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 20 / 2020  
**Transaction ID : AF25B2E5C0F26457F820**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. SMITH, CHARLES, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 425 JOHNSON LN  
 City LIVERMORE State KY Zip Code 42352-9600  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 08 / 04 / 2020  
**Transaction ID : A192110EDAD1D4D0299C**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

**C. SMITH, ELENOR, R, MRS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 100 BREEZY HILL RD  
 City COLLINSVILLE State CT Zip Code 06019-3607  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 04 / 2020  
**Transaction ID : A95E17F3C157D4F31A55**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 147 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. SMITH, ELENOR, R, MRS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 100 BREEZY HILL RD  
 City COLLINSVILLE State CT Zip Code 06019-3607  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 08 / 25 / 2020  
**Transaction ID : A36D5E45A3E2E4022A22**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. SMITH, JACK, D, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 177 BOUNDARY LN  
 City OTTERVILLE State MO Zip Code 65348-2420  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 08 / 13 / 2020  
**Transaction ID : A63DD1FE6B82D42B6996**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. SMITH, JAMES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 154  
 City BUTTE CITY State CA Zip Code 95920-0154  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 03 / 2020  
**Transaction ID : A58A4E7C7BC404DA2984**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	600.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 148 OF 267
	(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)  
**NEW JOURNEY PAC, INC.**

**A. SMITH, JAMES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 154  
 City BUTTE CITY State CA Zip Code 95920-0154  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 31 / 2020  
**Transaction ID : A2194F6FD11DB4510A6C**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. SMITH, MERRILL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1700 SE 9TH ST  
 City FORT LAUDERDALE State FL Zip Code 33316-1416  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INCOMM Occupation (for Individual) EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 30 / 2020  
**Transaction ID : A9803039A28B740F9825**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. SMITH, PRESTON L, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 030490  
 City FORT LAUDERDALE State FL Zip Code 33303-0490  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 31 / 2020  
**Transaction ID : A404B69B12655470883C**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	700.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 149 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. SMITH, S, LEE, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1154 HARVEST GLEN DR NW  
 City CLEVELAND State TN Zip Code 37312-6361  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) US POSTAL SERVICE Occupation (for Individual) CUSTODIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 17 / 2020  
**Transaction ID : A5E295816EB0B4770B5D**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. SMITH, WILLIAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 906 SNOWBERRY LN  
 City SANIBEL State FL Zip Code 33957-2914  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 10 / 2020  
**Transaction ID : AF7969B37CF4845D5842**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. SNELGROVE, EDWARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 240 LOYOLA DR  
 City MILLBRAE State CA Zip Code 94030-2930  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 02 / 2020  
**Transaction ID : A2F72E3F971B2422FADD**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	450.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 150 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. SOKOL-MAKOS, MARIOLA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 27 SOUTH DELPHIA AVE  
 City PARK RIDGE State IL Zip Code 60068-3921  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) REAL ESTATE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 08 / 03 / 2020  
**Transaction ID : A9916A3308FD14456A43**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. SOKOL-MAKOS, MARIOLA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 27 SOUTH DELPHIA AVE  
 City PARK RIDGE State IL Zip Code 60068-3921  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) REAL ESTATE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 08 / 16 / 2020  
**Transaction ID : A3FA6423F4F8940CAA39**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. SOWARDS, BILLIE, G, MRS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 70 WEXFORD PT  
 City HICKORY State NC Zip Code 28601-8824  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 206.00

Date of Receipt 08 / 10 / 2020  
**Transaction ID : A32B9BBCA3CE443D39EE**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 151 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

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

Mailing Address 2097 RUSTIC TIMBERS LANE

City PRESCOTT	State AZ	Zip Code 86303-4988
------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  

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

**Transaction ID : AE6591FED004847FEAFC**

Amount of Each Receipt this Period  
50.00

Memo Item

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

Mailing Address 2097 RUSTIC TIMBERS LANE

City PRESCOTT	State AZ	Zip Code 86303-4988
------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  

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

**Transaction ID : ABAA0A4E56428465990F**

Amount of Each Receipt this Period  
50.00

Memo Item

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

Mailing Address 2097 RUSTIC TIMBERS LANE

City PRESCOTT	State AZ	Zip Code 86303-4988
------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		10		2020

**Transaction ID : A5E33C443A8764212A26**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	150.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 152 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. SPEETZEN, LINDA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2097 RUSTIC TIMBERS LANE  
 City PRESCOTT State AZ Zip Code 86303-4988  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 08 / 10 / 2020  
**Transaction ID : A5261CB6DEB3A481ABA6**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. SPENCE, TANCY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2728 COUNTRY LN  
 City BILLINGS State MT Zip Code 59106-1540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 26 / 2020  
**Transaction ID : A5D4F17C9D8BC4658A34**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. SPERRY, TIM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 617 HIDE A WAY LN  
 City LONDON State AR Zip Code 72847-8540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BAILEY ELECTRIC Occupation (for Individual) MANAGER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 19 / 2020  
**Transaction ID : A9A0CEBDBD580440CBF8**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**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 153 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. SPIELMAN, KARL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7104 GREENWOOD AVE N  
 City SEATTLE State WA Zip Code 98103-5038  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) COMMERCIAL FISHERMAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 16 / 2020  
**Transaction ID : AFE7C709394834ECFB0A**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. SPONAR, LEWIS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 37 IMNAHA ROAD  
 City TIJERAS State NM Zip Code 87059-7830  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 08 / 07 / 2020  
**Transaction ID : AD7318B2047884BB9914**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. SPONAR, LEWIS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 37 IMNAHA ROAD  
 City TIJERAS State NM Zip Code 87059-7830  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 08 / 12 / 2020  
**Transaction ID : A0DEEC3A556E04127B54**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	145.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 154 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. SPONAR, LEWIS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 37 IMNAHA ROAD  
 City TIJERAS State NM Zip Code 87059-7830  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 08 / 20 / 2020  
**Transaction ID : AD8F8319761084FC18AA**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. SPONAR, LEWIS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 37 IMNAHA ROAD  
 City TIJERAS State NM Zip Code 87059-7830  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 25 / 2020  
**Transaction ID : A53131B1507754300A1F**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. SREDNICKI, VIRGINIA, E, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 33575 DREAMCATCHER TRL  
 City STEAMBOAT SPRINGS State CO Zip Code 80487-9226  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 07 / 2020  
**Transaction ID : ABA88299F2DAB48A9AB6**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	540.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 155 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. STAHMANN, KATHRYN, A, MS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 42 N TANGLEWOOD SPUR

City SEDONA	State AZ	Zip Code 86351-7835
----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1485.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		14		2020

**Transaction ID : ACD86C4461E7F491EA90**

Amount of Each Receipt this Period  
225.00

Memo Item

**B. STAI, DIAN, GRAVES, MS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1286 CHERRY SPRING RD

City FREDERICKSBURG	State TX	Zip Code 78624-6270
------------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

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

**Transaction ID : A01C352E35A1C4CCE986**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 7105 CRESTHILL DR

City KNOXVILLE	State TN	Zip Code 37919-5911
-------------------	-------------	------------------------

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
08		11		2020

**Transaction ID : A2C0555B3D9E04F798FB**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	825.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 156 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. STEC, FRANK, F, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3836 CHESAPEAKE LN  
 City NAPERVILLE State IL Zip Code 60564-2008  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 19 / 2020  
**Transaction ID : AA9991BDA71794E02961**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

**B. STENEHJEM, STEPHEN, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 607  
 City WATFORD CITY State ND Zip Code 58854-0607  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 25 / 2020  
**Transaction ID : AC00F4508CC1F4FD987C**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. STEWART, RICHARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2113 JO DEAN CT NE  
 City GRAND RAPIDS State MI Zip Code 49505-7145  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 09 / 2020  
**Transaction ID : A69D2F559CAD743C6AF8**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 157 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. STEWART, RICHARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2113 JO DEAN CT NE  
 City GRAND RAPIDS State MI Zip Code 49505-7145  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 21 / 2020  
**Transaction ID : AE067BC16F67E4F14861**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. STEWART, WILLIAM, G, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 159  
 City STEVENSON State MD Zip Code 21153-0159  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 03 / 2020  
**Transaction ID : A48112BBFC2344C63A36**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

**C. STIVORIC, JENNIFER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9631 HIGHLAND ROAD  
 City PITTSBURGH State PA Zip Code 15237-4324  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 08 / 15 / 2020  
**Transaction ID : A258A8379B0704BC7B42**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	350.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 158 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. STONE, DORIS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3541 CIMMERON RD  
 City YORK State PA Zip Code 17402-4315  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 26 / 2020  
**Transaction ID : AD69841143ADA457C82B**  
 Amount of Each Receipt this Period 35.00  
 Memo Item

**B. STONE, WILLIAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1072 288TH AVE.  
 City BURLINGTON State WI Zip Code 53105-9304  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 03 / 2020  
**Transaction ID : A6053DF0A1081428FB36**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. STONE, WILLIAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1072 288TH AVE.  
 City BURLINGTON State WI Zip Code 53105-9304  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 03 / 2020  
**Transaction ID : A091956D927594E06A7C**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	85.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 159 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. STONE, WILLIAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1072 288TH AVE.  
 City BURLINGTON State WI Zip Code 53105-9304  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 10 / 2020  
**Transaction ID : A0C6D09148B9141C7974**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. STONE, WILLIAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1072 288TH AVE.  
 City BURLINGTON State WI Zip Code 53105-9304  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 17 / 2020  
**Transaction ID : A8D1C24D5D61D4902896**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. STRONG, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 758 154TH PL NE  
 City BELLEVUE State WA Zip Code 98007-4862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) VO MED INC Occupation (for Individual) PHYSICIAN .  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 10 / 2020  
**Transaction ID : A532D657511AF442F852**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	300.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 160 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. STRONG, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 758 154TH PL NE  
 City BELLEVUE State WA Zip Code 98007-4862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) VO MED INC Occupation (for Individual) PHYSICIAN .  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 28 / 2020  
**Transaction ID : A35F1C2B1CCA940FABA/**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. SWANSON, CELISE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1001 KELLAND DR  
 City NORFOLK State NE Zip Code 68701-9217  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NMC Occupation (for Individual) WORKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 16 / 2020  
**Transaction ID : A6773B19B77054FA0B3C**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. SWEET, ALAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 421 FAWN DRIVE  
 City CHELSEA State AL Zip Code 35043-3204  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 03 / 2020  
**Transaction ID : A645EA6F7FEC84484970**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 161 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. SWEET, ALAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 421 FAWN DRIVE  
 City CHELSEA State AL Zip Code 35043-3204  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 10 / 2020  
**Transaction ID : A4D1E1E48933F4EF8A4B**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**B. SYMONDS, DEBORAH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10 SOUTH BRIAR HOLLOW LANE, UNIT 1  
 City HOUSTON State TX Zip Code 77027-2818  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 03 / 2020  
**Transaction ID : A00E5F4EE224F48CAB63**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**C. TAGHER, CHARBEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10 EDGEWATER DR APT 8E  
 City CORAL GABLES State FL Zip Code 33133-6965  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) STI Occupation (for Individual) EXEC  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 03 / 2020  
**Transaction ID : AF9BB5633CB8947BBAB6**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	350.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 162 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. TAYLOR, DAVID, L, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 141 KENDALL HILL RD

City STERLING	State MA	Zip Code 01564-1516
------------------	-------------	------------------------

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

Name of Employer (for Individual) ADAMS & BLINM	Occupation (for Individual) ATTORNEY
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

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

**Transaction ID : A848B21D655284BEAA2F**

Amount of Each Receipt this Period  
200.00

Memo Item

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

Mailing Address VIA VISTOSO

City LINCOLN	State CA	Zip Code 95648
-----------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		10		2020

**Transaction ID : A65EBC33B89084C98AC4**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 8605 GRESHAM DR

City WAXHAW	State NC	Zip Code 28173-8075
----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
545.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2020

**Transaction ID : A99FC25ECCF924DA6966**

Amount of Each Receipt this Period  
20.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	720.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 163 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. THOMPSON, JOEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8605 GRESHAM DR  
 City WAXHAW State NC Zip Code 28173-8075  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt 08 / 04 / 2020  
**Transaction ID : AC87F39AF0CF6484A93D**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. THOMPSON, JOEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8605 GRESHAM DR  
 City WAXHAW State NC Zip Code 28173-8075  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 820.00

Date of Receipt 08 / 18 / 2020  
**Transaction ID : A092AD39715C84883BD1**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. THOMPSON, WILLIAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2 SUNNY PINES CIR  
 City DAYTONA BEACH State FL Zip Code 32118-5219  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) THOMPSON PUMP CO. Occupation (for Individual) CHAIRMAN  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 10 / 2020  
**Transaction ID : AD6F26FCA402549B7900**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	375.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 164 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. THORNTON, WILLIAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4165 SINCLAIR SHORES RD  
 City CUMMING State GA Zip Code 30041-5418  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2020  
**Transaction ID : A6EB7B3D197954DB79B5**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. THUNDER-HAAB, KETURAH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 436 PINE BRAE ST  
 City ANN ARBOR State MI Zip Code 48105-2723  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 20 / 2020  
**Transaction ID : AF0C2921781A34D888A9**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. THUNDER-HAAB, KETURAH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 436 PINE BRAE ST  
 City ANN ARBOR State MI Zip Code 48105-2723  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 08 / 28 / 2020  
**Transaction ID : A9FF9AFC138FE4FE68F7**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	400.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 165 OF 267
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. TIMMS, CARL, R, MR., TTEE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 16350 LYONS VALLEY RD  
 City JAMUL State CA Zip Code 91935-3717  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 08 / 28 / 2020  
**Transaction ID : A4AF214A31F7F492A818**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. TOLMACHOFF, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7252 75TH PL SE  
 City SALEM State OR Zip Code 97317-9536  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) UNEMPLOYED Occupation (for Individual) PROGRAMMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 04 / 2020  
**Transaction ID : AA92990E0E81C42BC826**  
 Amount of Each Receipt this Period 150.00  
 Memo Item

**C. TOMASO, DENNIS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1106 PRIMROSE LANE  
 City EVANS State GA Zip Code 30809-7236  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 08 / 19 / 2020  
**Transaction ID : A0D47A7EB14C64DADA79**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 166 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

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

Mailing Address 3780 CRACKER WAY

City BONITA SPRINGS	State FL	Zip Code 34134-8628
------------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
08 / 09 / 2020  
**Transaction ID : ADC5E647C97404151897**

Amount of Each Receipt this Period  
20.00

Memo Item

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

Mailing Address 3780 CRACKER WAY

City BONITA SPRINGS	State FL	Zip Code 34134-8628
------------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
230.00

Date of Receipt  
08 / 17 / 2020  
**Transaction ID : A0AC52E01B6CE407C8A6**

Amount of Each Receipt this Period  
10.00

Memo Item

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

Mailing Address 3780 CRACKER WAY

City BONITA SPRINGS	State FL	Zip Code 34134-8628
------------------------	-------------	------------------------

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

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

Aggregate Year-to-Date ▼  
255.00

Date of Receipt  
08 / 20 / 2020  
**Transaction ID : A60303F80178147C8A61**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	55.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 167 OF 267
	(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)  
**NEW JOURNEY PAC, INC.**

**A. TREADWELL, MONICA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3780 CRACKER WAY  
 City BONITA SPRINGS State FL Zip Code 34134-8628  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) REAL ESTATE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 08 / 31 / 2020  
**Transaction ID : A9BE3ADF36C8B4909B2A**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**B. TRIDER, GARY, V, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7950 MESA TRAILS CIRCLE  
 City AUSTIN State TX Zip Code 78731-1445  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 253.00

Date of Receipt 08 / 11 / 2020  
**Transaction ID : AC3BBA39D90784391836**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. TSCHETTER, NANCY, E, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 22907 FLUME LN  
 City RAPID CITY State SD Zip Code 57702-8509  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 11 / 2020  
**Transaction ID : A9ACBF8102ECA432786F**  
 Amount of Each Receipt this Period 125.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 190.00  
**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 168 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. TULLOCH, WALTER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2088 MOTHER GRUNDY TRUCK TRL  
 City JAMUL State CA Zip Code 91935-7818  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NV5 Occupation (for Individual) ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 16 / 2020  
**Transaction ID : AC5022154B8EC4F6BAA0**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

**B. UHLEIN, LUCIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 715 LANDS END DR  
 City LONGBOAT KEY State FL Zip Code 34228-1055  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 31 / 2020  
**Transaction ID : A89C68595FEAA414E909**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. VAN BROCKLIN, STEVE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 14000 NW 122ND AVE  
 City MADRID State IA Zip Code 50156-8031  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CED Occupation (for Individual) MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 09 / 2020  
**Transaction ID : A831DDF993F7742BFAD5**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	700.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 169 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. VAN GRUEHL, TED, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 7  
 City GARDINER State MT Zip Code 59030-0007  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 05 / 2020  
**Transaction ID : A80DD5FF7D7E140E98DF**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. VANOUS, VICTOR, G, MR., SR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 130 S MEADOW DR  
 City GLEN BURNIE State MD Zip Code 21060-7227  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 03 / 2020  
**Transaction ID : A69B6CC392635417BA37**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. WADE, DENA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 44 PLEASANT VIEW RIDGE RD  
 City CHINA State ME Zip Code 04358-4412  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) THOMAS COLLEGE Occupation (for Individual) EXECUTIVE ASSISTANT  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 26 / 2020  
**Transaction ID : AD58565A5D862401C895**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	450.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 170 OF 267
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. WALDEN, GARY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4056 NORTHSTAR DR  
 City LAKE HAVASU CITY State AZ Zip Code 86406-4430  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 16 / 2020  
**Transaction ID : A699E2F305E464410AC9**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. WALLIS, WANDA, M, MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2481 HUNTERS POND  
 City KALAMAZOO State MI Zip Code 49048-6171  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 04 / 2020  
**Transaction ID : AF04912136CCA4FA9ABD**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. WALTON, JIM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4061 FIGARO CIRCLE  
 City HUNTINGTON BEACH State CA Zip Code 92649-3008  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 205.74

Date of Receipt 08 / 29 / 2020  
**Transaction ID : A9CC1CC0835554F9CAD6**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	175.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 171 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. WAMPLER, DENNIS, L, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15946 OLD DAYTON RD

City NEW LEBANON	State OH	Zip Code 45345-9716
---------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

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

**Transaction ID : AE85B114B2125497BB4F**

Amount of Each Receipt this Period  
200.00

Memo Item

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

Mailing Address 3095 MOUNTAIN VIEW DRIVE

City LAGUNA BEACH	State CA	Zip Code 92651-2022
----------------------	-------------	------------------------

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

Name of Employer (for Individual) RAYTHEON TECHNOLOGIES	Occupation (for Individual) ENGINEER
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		21		2020

**Transaction ID : AAEBD6F022EE5444DB10**

Amount of Each Receipt this Period  
100.00

Memo Item

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

Mailing Address 6521 CORDOBA RD  
STE 2

City GOLETA	State CA	Zip Code 93117-4867
----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

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

**Transaction ID : AC849D6B677AF43C58BD**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	400.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 172 OF 267
<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)  
**NEW JOURNEY PAC, INC.**

**A. WARKENTIN, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6521 CORDOBA RD  
 STE 2  
 City GOLETA State CA Zip Code 93117-4867  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 24 / 2020  
**Transaction ID : A154AA2E7AC9E4CD381C**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. WARNE, STEVEN, P, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 753 SWAGGERTOWN RD  
 City SCOTIA State NY Zip Code 12302-9531  
 FEC ID number of contributing 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 08 / 26 / 2020  
**Transaction ID : A554C085D9F994AC791E**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

**C. WARZLOW, WILLIAM, J, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2910 OXBOW RD  
 City RICHFIELD State OH Zip Code 44286-9715  
 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 ▼ 280.00

Date of Receipt 08 / 26 / 2020  
**Transaction ID : AEA3C763D355A4DF9B0A**  
 Amount of Each Receipt this Period 150.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	450.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 173 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. WATERS, DOUG, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7320 SUSAN SPRINGS DR  
 City WEST CHESTER State OH Zip Code 45069-4082  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 08 / 16 / 2020  
**Transaction ID : A72524A63B9F0438AA2A**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. WATSON, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2047 WESTCREEK LANE  
 City HOUSTON State TX Zip Code 77027-3746  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BLOOM COMMUNITY Occupation (for Individual) NON-PROFIT FOUNDER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 14 / 2020  
**Transaction ID : AB2AC38332F3448D88A4**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. WATTS, DIANE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 1134  
 City OREGON HOUSE State CA Zip Code 95962-1134  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DRW ACCOUNTANCY CORP Occupation (for Individual) ACCOUNTANT  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 31 / 2020  
**Transaction ID : A32774F916A784379849**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	850.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 174 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. WATTS, DIANE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 1134

City OREGON HOUSE	State CA	Zip Code 95962-1134
----------------------	-------------	------------------------

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

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

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 31 / 2020

**Transaction ID : AAC2EA5D6E630444A14**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. WELLS, LEIGHTON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 717 EDGEMONT WAY

City SPRINGFIELD	State OR	Zip Code 97477-3607
---------------------	-------------	------------------------

FEC ID number of contributing 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 M / D D D / Y Y Y Y Y Y  
 08 / 03 / 2020

**Transaction ID : A39104A6FFC4B4806AFB**

Amount of Each Receipt this Period  
50.00

Memo Item

**C. WELLS, LEIGHTON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 717 EDGEMONT WAY

City SPRINGFIELD	State OR	Zip Code 97477-3607
---------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 31 / 2020

**Transaction ID : A28AF80839BB445049B1**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	200.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 175 OF 267		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. WELSH, JOHN, L, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2978 BEULAH RD  
 City KEEZLETOWN State VA Zip Code 22832-2302  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 08 / 31 / 2020  
**Transaction ID : A841F0C610488436CBBF**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. WENGER, JUDY, A, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 726 FARWELL DRIVE  
 City MADISON State WI Zip Code 53704-6032  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 20 / 2020  
**Transaction ID : AE7E8490789804C498BC**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

**C. WETTEROFF, ROBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1204 HADLEY PARK LN  
 City WEDDINGTON State NC Zip Code 28104-8066  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 31 / 2020  
**Transaction ID : A14A762E0199A4310823**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 176 OF 267
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**NEW JOURNEY PAC, INC.**

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

Mailing Address 19 OCEANAIRE DRIVE  
 19 OCEANAIRE DR

City RANCHO PALOS VERDES	State CA	Zip Code 90275
-----------------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 08 / 19 / 2020

**Transaction ID : A470472F773FC4716BA0**

Amount of Each Receipt this Period  
 100.00

Memo Item

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

Mailing Address 4 CAROLINA MEADOWS, APT.202

City CHAPEL HILL	State NC	Zip Code 27517-8524
---------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 210.00

Date of Receipt  
 08 / 08 / 2020

**Transaction ID : AE31F0838F88045DDAC3**

Amount of Each Receipt this Period  
 50.00

Memo Item

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

Mailing Address 209 BROWN BEAR

City CHAPEL HILL	State NC	Zip Code 27517-9393
---------------------	-------------	------------------------

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 ▼  
 250.00

Date of Receipt  
 08 / 03 / 2020

**Transaction ID : AEC6931B9DE6745CAAB9**

Amount of Each Receipt this Period  
 50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	200.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 177 OF 267
<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)  
**NEW JOURNEY PAC, INC.**

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

Mailing Address 958 LAGOON LN S

City MANTOLOKING	State NJ	Zip Code 08738-1819
---------------------	-------------	------------------------

FEC ID number of contributing 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
08	/	17	/	2020

**Transaction ID : AD38F7C6871964F0C8FE**

Amount of Each Receipt this Period  
50.00

Memo Item

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

Mailing Address P.O. BOX 121123

City ARLINGTON	State TX	Zip Code 76012-1123
-------------------	-------------	------------------------

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

Name of Employer (for Individual) ACCLAIM PHYSICIANS GROUP	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	15	/	2020

**Transaction ID : A5B2F97EAF88462F93B**

Amount of Each Receipt this Period  
100.00

Memo Item

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

Mailing Address 1035 156TH AVE NE APT 33

City BELLEVUE	State WA	Zip Code 98007-4683
------------------	-------------	------------------------

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

Name of Employer (for Individual) HYATT REGENCY	Occupation (for Individual) BARTENDER
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	23	/	2020

**Transaction ID : A7CE4F9C70C4742ECAEA**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	200.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 178 OF 267
	(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)  
**NEW JOURNEY PAC, INC.**

**A. WILSON, CAROL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1226 FM 2064 N  
 City JACKSONVILLE State TX Zip Code 75766-6919  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 08 / 31 / 2020  
**Transaction ID : A5057AE5613F64E24AFC**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

**B. WILSON, CLARA, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 44641 SANDY FORD RD  
 City CALLAHAN State FL Zip Code 32011-6283  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 11 / 2020  
**Transaction ID : A6EAF407B1E8143EF813**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. WILSON, LOYCE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 732 SEVILLE RD  
 City DENTON State TX Zip Code 76205-8495  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 05 / 2020  
**Transaction ID : A7D16DE73CF6C4CD9A91**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 179 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. WILSON, PATRICK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5620 WOODSTOCK AVE  
 City GOLDEN VALLEY State MN Zip Code 55422-5022  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 07 / 2020  
**Transaction ID : AB3500E22770941FF98E**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. WILSON, WELDON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3930 ALOMAR DR  
 City SHERMAN OAKS State CA Zip Code 91423-4941  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 08 / 31 / 2020  
**Transaction ID : A675BD779003C4EA89F3**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

**C. WITHERINGTON, MARY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 347 RIVERBLUFF PL APT 2  
 City MEMPHIS State TN Zip Code 38103-4132  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 14 / 2020  
**Transaction ID : A0082F6C21FDD46CCA32**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 180 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. WITHERSPOON, MARJ, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6434 ORCHID LANE  
 City DALLAS State TX Zip Code 75230-4121  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2100.00

Date of Receipt 08 / 11 / 2020  
**Transaction ID : ADCB4DA12090E439AB32**  
 Amount of Each Receipt this Period 300.00  
 Memo Item

**B. WOLF, FRAN, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3690 DURST CLAGG RD  
 City CORTLAND State OH Zip Code 44410-9546  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 03 / 2020  
**Transaction ID : AE630CCE37E4346DAA64**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. WOLF, FRAN, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3690 DURST CLAGG RD  
 City CORTLAND State OH Zip Code 44410-9546  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 03 / 2020  
**Transaction ID : AF92D49C2C7A14FE9897**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	450.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 181 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. WOLF, FRAN, M, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3690 DURST CLAGG RD

City CORTLAND	State OH	Zip Code 44410-9546
------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  

M M / D D / Y Y Y Y Y
08 / 16 / 2020

**Transaction ID : A274A1AEAE778427596F**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. WOLF, FRAN, M, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3690 DURST CLAGG RD

City CORTLAND	State OH	Zip Code 44410-9546
------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
650.00

Date of Receipt  

M M / D D / Y Y Y Y Y
08 / 19 / 2020

**Transaction ID : A0BCFD4035E1F4BB2BC2**

Amount of Each Receipt this Period  
50.00

Memo Item

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

Mailing Address 3690 DURST CLAGG RD

City CORTLAND	State OH	Zip Code 44410-9546
------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  

M M / D D / Y Y Y Y Y
08 / 24 / 2020

**Transaction ID : AE1DDD5580A994C6DB1B**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	200.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 182 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. WOLF, FRAN, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3690 DURST CLAGG RD  
 City CORTLAND State OH Zip Code 44410-9546  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 08 / 31 / 2020  
**Transaction ID : AEF177C92ECFE4908894**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. WONG, JENNIE, T, , ED D**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1608 PARKWOOD DR  
 City SAN MATEO State CA Zip Code 94403-3932  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 10 / 2020  
**Transaction ID : AEDF5D7BCB9234557864**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. WOODHOUSE, MARILYN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 650 RAMBLEWOOD ROAD  
 650 RAMBLEWOOD RD.  
 City HOUSTON State TX Zip Code 77079  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 10 / 2020  
**Transaction ID : A16614F15DD71426B8D5**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	400.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 183 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

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

Mailing Address 4420 CYPRESS CREEK PKWY  
 STE 224

City HOUSTON State TX Zip Code 77068-3411

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

Name of Employer (for Individual) ILAN INVESTMENTS Occupation (for Individual) CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 08 / 31 / 2020  
**Transaction ID : A0C5C59A1E5624ACAB6A**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**B. YODER, M, DAVID, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 33102 JAN CIR

City MENIFEE State CA Zip Code 92584-8742

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 08 / 28 / 2020  
**Transaction ID : A4AAB70FC36854B6C810**

Amount of Each Receipt this Period  
 1000.00

Memo Item

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

Mailing Address 10 CEDAR POINT DRIVE

City SAVANNAH State GA Zip Code 31405-1021

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 08 / 08 / 2020  
**Transaction ID : A64AB93EA715348398D2**

Amount of Each Receipt this Period  
 100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2100.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 184 OF 267
<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)  
**NEW JOURNEY PAC, INC.**

**A. ZACHRY, JAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4703 227TH ST SW # 227  
 City MOUNTLAKE TER State WA Zip Code 98043-4421  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 04 / 2020  
**Transaction ID : A2788ACB489A142038DA**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. ZIEMER, PAT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4006 NAPANEE RD  
 City LOUISVILLE State KY Zip Code 40207-2030  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MAGNA WAVE Occupation (for Individual) OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 22 / 2020  
**Transaction ID : A24080F1917624CA8A0A**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. ZITLAU, GUSTAV, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 472 CHERRY AVE  
 City SAN BRUNO State CA Zip Code 94066-4120  
 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 ▼ 250.00

Date of Receipt 08 / 06 / 2020  
**Transaction ID : AB244E0D1D1784BDBDC2**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	700.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 185 OF 267
	<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)  
**NEW JOURNEY PAC, INC.**

**A. ZUERNER, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8592 OLD OLYMPIC HWY  
 City SEQUIM State WA Zip Code 98382-6812  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 03 / 2020  
**Transaction ID : AA69CE68B8A8744AEADE**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**B. ZURANSKI, ROSEMARIE, F, MRS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 411 EAGLE CREST DR  
 City BROWNSBURG State IN Zip Code 46112-1171  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 04 / 2020  
**Transaction ID : A72E75F340925426F99B**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	200.00
<b>TOTAL</b> This Period (last page this line number only).....	133027.55

**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)  
**NEW JOURNEY PAC, INC.**

**A. 9SEVEN CONSULTING**

Full Name (Last, First, Middle Initial)

Mailing Address 499 SOUTH CAPITOL STREET SW #405

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 18 / 2020

FEC Identification Number: C

Transaction ID : B87106A0DA

Amount of Each Disbursement this Period: 3143.50

Memo Item

**B. ACTIVE ENGAGEMENT**

Full Name (Last, First, Middle Initial)

Mailing Address 113 EAST MARKET STREET 300

City LEESBURG State VA Zip Code 20176-3109

Purpose of Disbursement LIST RENTAL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 16 / 2020

FEC Identification Number: C

Transaction ID : B98932A86F5

Amount of Each Disbursement this Period: 290.00

Memo Item

**C. ADOBE**

Full Name (Last, First, Middle Initial)

Mailing Address 345 PARK AVENUE

City SAN JOSE State CA Zip Code 95110-2704

Purpose of Disbursement OFFICE SUBSCRIPTION

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 05 / 2020

FEC Identification Number: C

Transaction ID : BC7A2CD81!

Amount of Each Disbursement this Period: 79.99

Memo Item

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

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

3513.49

**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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial) <b>A. ADOBE</b>			Date of Disbursement MM / DD / YYYY 08 / 06 / 2020		
Mailing Address 345 PARK AVENUE			FEC Identification Number C [REDACTED] <b>Transaction ID : BE4A4CC10A</b> Amount of Each Disbursement this Period [REDACTED] 29.99		
City SAN JOSE	State CA	Zip Code 95110-2704	Category/Type 001		
Purpose of Disbursement OFFICE SUBSCRIPTION			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>B. ADOBE</b>			Date of Disbursement MM / DD / YYYY 08 / 24 / 2020		
Mailing Address 345 PARK AVENUE			FEC Identification Number C [REDACTED] <b>Transaction ID : B9EC3E3362/</b> Amount of Each Disbursement this Period [REDACTED] 52.99		
City SAN JOSE	State CA	Zip Code 95110-2704	Category/Type 001		
Purpose of Disbursement OFFICE SUBSCRIPTION			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>C. ADOBE</b>			Date of Disbursement MM / DD / YYYY 08 / 27 / 2020		
Mailing Address 345 PARK AVENUE			FEC Identification Number C [REDACTED] <b>Transaction ID : B62B15D5B8</b> Amount of Each Disbursement this Period [REDACTED] 57.36		
City SAN JOSE	State CA	Zip Code 95110-2704	Category/Type 001		
Purpose of Disbursement OFFICE SUBSCRIPTION			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:					
<b>SUBTOTAL</b> of Disbursements This Page (optional)..... ▶			[REDACTED] 140.34		
<b>TOTAL</b> This Period (last page this line number only)..... ▶			[REDACTED]		

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial) <b>A. ADOBE</b>		Date of Disbursement MM / DD / YYYY 08 / 28 / 2020
Mailing Address 345 PARK AVENUE		FEC Identification Number C [REDACTED]
City SAN JOSE	State CA	Zip Code 95110-2704
Purpose of Disbursement OFFICE SUBSCRIPTION		Category/Type 001
Candidate Name		Transaction ID : <b>B03BAAB8F</b>
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) ▼	Amount of Each Disbursement this Period 19.99
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. ALLIANZ</b>		Date of Disbursement MM / DD / YYYY 08 / 20 / 2020
Mailing Address 9950 MAYLAND DRIVE		FEC Identification Number C [REDACTED]
City RICHMOND	State VA	Zip Code 23233
Purpose of Disbursement TRAVEL		Category/Type 001
Candidate Name		Transaction ID : <b>BC62B4B4D4</b>
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) ▼	Amount of Each Disbursement this Period 74.26
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. ALTOMUSIC CORP</b>		Date of Disbursement MM / DD / YYYY 08 / 27 / 2020
Mailing Address 4 HEARTHSTONE DR		FEC Identification Number C [REDACTED]
City WAPPINGERS FALLS	State NY	Zip Code 12590-3012
Purpose of Disbursement FUNDRAISING EQUIPMENT RENTAL		Category/Type 001
Candidate Name		Transaction ID : <b>B5FA988E15</b>
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) ▼	Amount of Each Disbursement this Period 599.00
State: District:		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	693.25
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial) <b>A. AMAZON</b>		Date of Disbursement MM / DD / YYYY 08 / 03 / 2020
Mailing Address 410 TERRY AVE N		FEC Identification Number C [REDACTED] <b>Transaction ID : B3183B9ECE</b>
City SEATTLE	State WA	Zip Code 98109
Purpose of Disbursement OFFICE SUPPLIES		Amount of Each Disbursement this Period 15.97
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:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>B. AMAZON</b>		Date of Disbursement MM / DD / YYYY 08 / 03 / 2020
Mailing Address 410 TERRY AVE N		FEC Identification Number C [REDACTED] <b>Transaction ID : B874672983C</b>
City SEATTLE	State WA	Zip Code 98109
Purpose of Disbursement OFFICE SUPPLIES		Amount of Each Disbursement this Period 187.51
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:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>C. AMAZON</b>		Date of Disbursement MM / DD / YYYY 08 / 03 / 2020
Mailing Address 410 TERRY AVE N		FEC Identification Number C [REDACTED] <b>Transaction ID : B1FA672684</b>
City SEATTLE	State WA	Zip Code 98109
Purpose of Disbursement OFFICE SUPPLIES		Amount of Each Disbursement this Period 8.99
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:	Category/Type 001	

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

212.47

**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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial) <b>A. AMAZON</b>		Date of Disbursement MM / DD / YYYY 08 / 04 / 2020
Mailing Address 410 TERRY AVE N		FEC Identification Number C [REDACTED] <b>Transaction ID : B188925A4C</b> Amount of Each Disbursement this Period [REDACTED] 33.78
City SEATTLE	State WA	Zip Code 98109
Purpose of Disbursement OFFICE SUPPLIES		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. AMAZON</b>		Date of Disbursement MM / DD / YYYY 08 / 04 / 2020
Mailing Address 410 TERRY AVE N		FEC Identification Number C [REDACTED] <b>Transaction ID : BFB8CA4939</b> Amount of Each Disbursement this Period [REDACTED] 151.23
City SEATTLE	State WA	Zip Code 98109
Purpose of Disbursement OFFICE SUPPLIES		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. AMAZON</b>		Date of Disbursement MM / DD / YYYY 08 / 04 / 2020
Mailing Address 410 TERRY AVE N		FEC Identification Number C [REDACTED] <b>Transaction ID : B521A4C8B1</b> Amount of Each Disbursement this Period [REDACTED] 16.70
City SEATTLE	State WA	Zip Code 98109
Purpose of Disbursement OFFICE SUPPLIES		Category/ Type 001
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)..... ▶

201.71

**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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial) <b>A. AMAZON</b>		Date of Disbursement MM / DD / YYYY 08 / 05 / 2020	
Mailing Address 410 TERRY AVE N			
City SEATTLE	State WA	Zip Code 98109	
Purpose of Disbursement OFFICE SUPPLIES		<input type="text" value="001"/>	FEC Identification Number <input type="text" value="C"/>
Candidate Name		Category/Type	Transaction ID : <b>BE8BB5F405</b>
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) ▼		Amount of Each Disbursement this Period <input type="text" value="82.92"/>
State: District:			<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. AMAZON</b>		Date of Disbursement MM / DD / YYYY 08 / 05 / 2020	
Mailing Address 410 TERRY AVE N			
City SEATTLE	State WA	Zip Code 98109	
Purpose of Disbursement OFFICE SUPPLIES		<input type="text" value="001"/>	FEC Identification Number <input type="text" value="C"/>
Candidate Name		Category/Type	Transaction ID : <b>B0C44EE74B</b>
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) ▼		Amount of Each Disbursement this Period <input type="text" value="209.32"/>
State: District:			<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. AMAZON</b>		Date of Disbursement MM / DD / YYYY 08 / 06 / 2020	
Mailing Address 410 TERRY AVE N			
City SEATTLE	State WA	Zip Code 98109	
Purpose of Disbursement OFFICE SUPPLIES		<input type="text" value="001"/>	FEC Identification Number <input type="text" value="C"/>
Candidate Name		Category/Type	Transaction ID : <b>BAD650D2F8</b>
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) ▼		Amount of Each Disbursement this Period <input type="text" value="57.09"/>
State: District:			<input type="checkbox"/> Memo Item

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

**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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial) <b>A. AMAZON</b>		Date of Disbursement MM / DD / YYYY 08 / 07 / 2020
Mailing Address 410 TERRY AVE N		FEC Identification Number C [REDACTED] <b>Transaction ID : BFF97E37DA</b> Amount of Each Disbursement this Period [REDACTED] 171.19
City SEATTLE	State WA	Zip Code 98109
Purpose of Disbursement OFFICE SUPPLIES		Category/ Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. AMAZON</b>		Date of Disbursement MM / DD / YYYY 08 / 10 / 2020
Mailing Address 410 TERRY AVE N		FEC Identification Number C [REDACTED] <b>Transaction ID : B8869CB9FA</b> Amount of Each Disbursement this Period [REDACTED] 11.22
City SEATTLE	State WA	Zip Code 98109
Purpose of Disbursement OFFICE SUPPLIES		Category/ Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>C. AMAZON</b>		Date of Disbursement MM / DD / YYYY 08 / 12 / 2020
Mailing Address 410 TERRY AVE N		FEC Identification Number C [REDACTED] <b>Transaction ID : B7A96E78AC</b> Amount of Each Disbursement this Period [REDACTED] 55.25
City SEATTLE	State WA	Zip Code 98109
Purpose of Disbursement OFFICE SUPPLIES		Category/ Type 001
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)..... ▶

237.66

**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)  
**NEW JOURNEY PAC, INC.**

**A. AMAZON**

Full Name (Last, First, Middle Initial)

Mailing Address 410 TERRY AVE N

City SEATTLE State WA Zip Code 98109

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 12 / 2020

FEC Identification Number: C

Transaction ID : B5C455E97A

Amount of Each Disbursement this Period: 8.93

Memo Item

**B. AMAZON**

Full Name (Last, First, Middle Initial)

Mailing Address 410 TERRY AVE N

City SEATTLE State WA Zip Code 98109

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 17 / 2020

FEC Identification Number: C

Transaction ID : BB9010F5AD

Amount of Each Disbursement this Period: 13.09

Memo Item

**C. AMAZON**

Full Name (Last, First, Middle Initial)

Mailing Address 410 TERRY AVE N

City SEATTLE State WA Zip Code 98109

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 18 / 2020

FEC Identification Number: C

Transaction ID : BFC83096BE

Amount of Each Disbursement this Period: 11.22

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 33.24

**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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial)

**A. AMAZON**

Mailing Address 410 TERRY AVE N

City SEATTLE State WA Zip Code 98109

Purpose of Disbursement OFFICE SUPPLIES

001  
Category/  
Type

Candidate Name

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

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
08 / 20 / 2020

FEC Identification Number

C   
**Transaction ID : B2A2E80C33**  
Amount of Each Disbursement this Period  
 85.99

Memo Item

Full Name (Last, First, Middle Initial)

**B. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BLVD.

City FORT WORTH State TX Zip Code 76155-2605

Purpose of Disbursement AIRFARE

001  
Category/  
Type

Candidate Name

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

Date of Disbursement

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

FEC Identification Number

C   
**Transaction ID : BAE6D3FC7D**  
Amount of Each Disbursement this Period  
 512.20

Memo Item

Full Name (Last, First, Middle Initial)

**C. AMH PRINT GROUP**

Mailing Address PO BOX 518

City MECHANICSVILLE State VA Zip Code 23111

Purpose of Disbursement PRINTING

001  
Category/  
Type

Candidate Name

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

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
08 / 17 / 2020

FEC Identification Number

C   
**Transaction ID : B4D8F64CBI**  
Amount of Each Disbursement this Period  
 5621.28

Memo Item

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

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

6219.47

**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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial)

**A. ANEDOT**

Mailing Address 1920 MCKINNEY AVE 7TH FLOOR

City DALLAS State TX Zip Code 75201

Purpose of Disbursement  
CREDIT CARD FEES

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : B721F037846**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. APPLE**

Mailing Address ONE APPLE PARK WAY

City CUPERTINO State CA Zip Code 95014-0642

Purpose of Disbursement  
OFFICE EQUIPMENT

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : BFD4E13CAF**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. APPLE**

Mailing Address ONE APPLE PARK WAY

City CUPERTINO State CA Zip Code 95014-0642

Purpose of Disbursement  
OFFICE EQUIPMENT

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : BA3DAB194I**  
Amount of Each Disbursement this Period

Memo Item

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

**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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial)

**A. APPLE**

Mailing Address ONE APPLE PARK WAY

City CUPERTINO State CA Zip Code 95014-0642

Purpose of Disbursement OFFICE EQUIPMENT

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
0	8		0	3					2020

FEC Identification Number  
  
**Transaction ID : BF0550484E**  
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. APPLE**

Mailing Address ONE APPLE PARK WAY

City CUPERTINO State CA Zip Code 95014-0642

Purpose of Disbursement OFFICE EQUIPMENT

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
0	8		0	3					2020

FEC Identification Number  
  
**Transaction ID : B3F2F205537**  
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. APPLE**

Mailing Address ONE APPLE PARK WAY

City CUPERTINO State CA Zip Code 95014-0642

Purpose of Disbursement OFFICE EQUIPMENT

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
0	8		0	3					2020

FEC Identification Number  
  
**Transaction ID : B44EFBDD51**  
 Amount of Each Disbursement this Period

Memo Item

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

**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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial)

**A. APPLE**

Mailing Address ONE APPLE PARK WAY

City CUPERTINO State CA Zip Code 95014-0642

Purpose of Disbursement OFFICE EQUIPMENT

001  
Category/Type

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C   
**Transaction ID : B73DFE84D0**  
Amount of Each Disbursement this Period  
 37.45

Memo Item

Full Name (Last, First, Middle Initial)

**B. APPLE**

Mailing Address ONE APPLE PARK WAY

City CUPERTINO State CA Zip Code 95014-0642

Purpose of Disbursement OFFICE EQUIPMENT

001  
Category/Type

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C   
**Transaction ID : BDCC6E8267**  
Amount of Each Disbursement this Period  
 84.53

Memo Item

Full Name (Last, First, Middle Initial)

**C. APPLE**

Mailing Address ONE APPLE PARK WAY

City CUPERTINO State CA Zip Code 95014-0642

Purpose of Disbursement OFFICE EQUIPMENT

001  
Category/Type

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C   
**Transaction ID : B64FDA187L**  
Amount of Each Disbursement this Period  
 84.53

Memo Item

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

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

206.51

**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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial) <b>A. APPLE</b>		Date of Disbursement MM / DD / YYYY 08 / 03 / 2020
Mailing Address ONE APPLE PARK WAY		FEC Identification Number C [REDACTED] <b>Transaction ID : BA91CB0FA1</b> Amount of Each Disbursement this Period [REDACTED] 84.53
City CUPERTINO	State CA	Zip Code 95014-0642
Purpose of Disbursement OFFICE EQUIPMENT		Category/ Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CAMPAIGN FUNDING DIRECT, INC.</b>		Date of Disbursement MM / DD / YYYY 08 / 17 / 2020
Mailing Address 1420 SPRING HILL ROAD		FEC Identification Number C [REDACTED] <b>Transaction ID : B6A447B7E0</b> Amount of Each Disbursement this Period [REDACTED] 499.07
City MCLEAN	State VA	Zip Code 22102
Purpose of Disbursement DIRECT MAIL		Category/ Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. COMCAST</b>		Date of Disbursement MM / DD / YYYY 08 / 21 / 2020
Mailing Address 1701 JFK BOULEVARD		FEC Identification Number C [REDACTED] <b>Transaction ID : B85239C053</b> Amount of Each Disbursement this Period [REDACTED] 388.75
City PHILADELPHIA	State PA	Zip Code 19103
Purpose of Disbursement INTERNET		Category/ Type 001
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)..... ▶

972.35

**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)  
**NEW JOURNEY PAC, INC.**

**A. COOK COMPANY**

Full Name (Last, First, Middle Initial)

Mailing Address 499 SOUTH CAPITOL STREET SW  
SUITE 405

City WASHINGTON State DC Zip Code 20003-4018

Purpose of Disbursement OFFICE SUBSCRIPTIONS

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 17 / 2020

FEC Identification Number: C

Transaction ID : B9BDF902D3

Amount of Each Disbursement this Period: 35.00

Memo Item

**B. DELTA**

Full Name (Last, First, Middle Initial)

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 20 / 2020

FEC Identification Number: C

Transaction ID : B2F58F6AA5I

Amount of Each Disbursement this Period: 1100.20

Memo Item

**C. DELTA**

Full Name (Last, First, Middle Initial)

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 25 / 2020

FEC Identification Number: C

Transaction ID : B090ED6194

Amount of Each Disbursement this Period: 717.60

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1852.80

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial) <b>A. DIRECTMAIL.COM</b>		Date of Disbursement MM / DD / YYYY 08 / 24 / 2020	
Mailing Address ' 5540 KETCH ROAD '		FEC Identification Number C [REDACTED] <b>Transaction ID : B981708A2F</b> Amount of Each Disbursement this Period [REDACTED] 1500.00	
City PRINCE FREDERICK	State MD	Zip Code 20678-3406	Category/ Type 001
Purpose of Disbursement POSTAGE			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. DROPBOX</b>		Date of Disbursement MM / DD / YYYY 08 / 06 / 2020	
Mailing Address 185 BERRY ST. 400		FEC Identification Number C [REDACTED] <b>Transaction ID : B07917D3634</b> Amount of Each Disbursement this Period [REDACTED] 2.42	
City SAN FRANCISCO	State CA	Zip Code 94107-5705	Category/ Type 001
Purpose of Disbursement OFFICE SUBSCRIPTION			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. DROPBOX</b>		Date of Disbursement MM / DD / YYYY 08 / 10 / 2020	
Mailing Address 185 BERRY ST. 400		FEC Identification Number C [REDACTED] <b>Transaction ID : BFEB07D713</b> Amount of Each Disbursement this Period [REDACTED] 175.00	
City SAN FRANCISCO	State CA	Zip Code 94107-5705	Category/ Type 001
Purpose of Disbursement OFFICE SUBSCRIPTION			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 1677.42
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. ECG DATA CENTER**

Full Name (Last, First, Middle Initial)

Mailing Address 1420 SPRING HILL ROAD

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement POSTAGE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 24 / 2020

FEC Identification Number: C

Transaction ID : B3B33D2853I

Amount of Each Disbursement this Period: 2538.82

Memo Item

**B. ESPRESSO MAIL**

Full Name (Last, First, Middle Initial)

Mailing Address 7750 OKEECHOBEE BLVD

City WEST PALM BEACH State FL Zip Code 33411-2104

Purpose of Disbursement EMAIL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 07 / 2020

FEC Identification Number: C

Transaction ID : B8B2D847C1I

Amount of Each Disbursement this Period: 47.99

Memo Item

**C. ESPRESSO MAIL**

Full Name (Last, First, Middle Initial)

Mailing Address 7750 OKEECHOBEE BLVD

City WEST PALM BEACH State FL Zip Code 33411-2104

Purpose of Disbursement EMAIL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 27 / 2020

FEC Identification Number: C

Transaction ID : B0ED869D4I

Amount of Each Disbursement this Period: 11.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2597.81

**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)  
**NEW JOURNEY PAC, INC.**

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

Mailing Address 333 108TH AVENUE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 10 / 2020

FEC Identification Number: C

Transaction ID : B79D2F0DA2

Amount of Each Disbursement this Period: 1314.66

Memo Item

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

Mailing Address 88 KEARNY STREET

City SOUTH SAN FRANCISCO State CA Zip Code 94080-1517

Purpose of Disbursement CREDIT CARD PAYMENT

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 17 / 2020

FEC Identification Number: C

Transaction ID : B40093B0846

Amount of Each Disbursement this Period: 1891.10

Memo Item

Full Name (Last, First, Middle Initial)  
**C. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BLVD.

City FORT WORTH State TX Zip Code 76155-2605

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 30 / 2020

FEC Identification Number: C

Transaction ID : B6E95C371D

Amount of Each Disbursement this Period: 327.10

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 3205.76

**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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN AIRLINES</b>		Date of Disbursement MM / DD / YYYY 08 / 06 / 2020
Mailing Address 4333 AMON CARTER BLVD.		FEC Identification Number C [REDACTED] <b>Transaction ID : B2401D0A6B</b> Amount of Each Disbursement this Period [REDACTED] 337.10
City FORT WORTH	State TX	Zip Code 76155-2605
Purpose of Disbursement TRAVEL	Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<input checked="" type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>B. AMERICAN AIRLINES</b>		Date of Disbursement MM / DD / YYYY 08 / 09 / 2020
Mailing Address 4333 AMON CARTER BLVD.		FEC Identification Number C [REDACTED] <b>Transaction ID : B294C989CEI</b> Amount of Each Disbursement this Period [REDACTED] 296.10
City FORT WORTH	State TX	Zip Code 76155-2605
Purpose of Disbursement TRAVEL	Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<input checked="" type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>C. HYATT REGENCY</b>		Date of Disbursement MM / DD / YYYY 08 / 12 / 2020
Mailing Address 9300 JEFF FUQUA BLVD		FEC Identification Number C [REDACTED] <b>Transaction ID : BF6921D48F</b> Amount of Each Disbursement this Period [REDACTED] 50.30
City ORLANDO	State FL	Zip Code 32827-4347
Purpose of Disbursement TRAVEL	Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<input checked="" type="checkbox"/> Memo Item		

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial)

**A. UBER**

Mailing Address 1455 MARKET STREET 4TH FLOOR

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement TRAVEL

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
0	8	/	1	2	/	2	0	2	0

FEC Identification Number  
  
**Transaction ID : BC9D8D1F23**  
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. HYATT REGENCY**

Mailing Address 9300 JEFF FUQUA BLVD

City ORLANDO State FL Zip Code 32827-4347

Purpose of Disbursement TRAVEL

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
0	8	/	1	2	/	2	0	2	0

FEC Identification Number  
  
**Transaction ID : BF4DC3E707**  
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER**

Mailing Address 1455 MARKET STREET 4TH FLOOR

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement TRAVEL

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
0	8	/	1	2	/	2	0	2	0

FEC Identification Number  
  
**Transaction ID : B9EF35F575**  
 Amount of Each Disbursement this Period

Memo Item

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

**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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial)

**A. UBER**

Mailing Address 1455 MARKET STREET 4TH FLOOR

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement TRAVEL

Category/Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
08 / 13 / 2020

FEC Identification Number  
  
Transaction ID : **BB391ACD93**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. FEDEX**

Mailing Address 942 S SHADY GROVE RD

City MEMPHIS State TN Zip Code 38120-4117

Purpose of Disbursement POSTAGE

Category/Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
08 / 14 / 2020

FEC Identification Number  
  
Transaction ID : **B70192E2E09**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. HYATT REGENCY**

Mailing Address 9300 JEFF FUQUA BLVD

City ORLANDO State FL Zip Code 32827-4347

Purpose of Disbursement TRAVEL

Category/Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
08 / 16 / 2020

FEC Identification Number  
  
Transaction ID : **BCCA46E961**  
Amount of Each Disbursement this Period

Memo Item

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

**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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial)

**A. UBER**

Mailing Address 1455 MARKET STREET 4TH FLOOR

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement TRAVEL

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  
 08 / 16 / 2020

FEC Identification Number  
  
**Transaction ID : B87E499FAF**  
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. FEDEX**

Mailing Address 942 S SHADY GROVE RD

City MEMPHIS State TN Zip Code 38120-4117

Purpose of Disbursement POSTAGE

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  
 08 / 16 / 2020

FEC Identification Number  
  
**Transaction ID : B35EB9CB16**  
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER**

Mailing Address 1455 MARKET STREET 4TH FLOOR

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement TRAVEL

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  
 08 / 17 / 2020

FEC Identification Number  
  
**Transaction ID : B5A00D7FD4**  
 Amount of Each Disbursement this Period

Memo Item

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

**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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial)

**A. HYATT REGENCY**

Mailing Address 9300 JEFF FUQUA BLVD

City  
ORLANDO

State  
FL

Zip Code  
32827-4347

Purpose of Disbursement  
TRAVEL

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 17 / 2020

FEC Identification Number

C  
Transaction ID : BBC3D0702F  
Amount of Each Disbursement this Period  
176.73

Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER**

Mailing Address 1455 MARKET STREET 4TH FLOOR

City  
SAN FRANCISCO

State  
CA

Zip Code  
94103

Purpose of Disbursement  
TRAVEL

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 17 / 2020

FEC Identification Number

C  
Transaction ID : BAB9647E0E  
Amount of Each Disbursement this Period  
12.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. USPS**

Mailing Address 499 SOUTH CAPITOL STREET SW 405

City  
WASHINGTON

State  
DC

Zip Code  
20003-4018

Purpose of Disbursement  
POSTAGE

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 17 / 2020

FEC Identification Number

C  
Transaction ID : B2B7B26673  
Amount of Each Disbursement this Period  
26.35

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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial)

**A. EXPENSIFY**

Mailing Address 88 KEARNY STREET

City SOUTH SAN FRANCISCO

State CA

Zip Code 94080-1517

Purpose of Disbursement OFFICE SUBSCRIPTION

001

Category/Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 18 / 2020

FEC Identification Number

C [REDACTED]

Transaction ID : B16ABEB51E

Amount of Each Disbursement this Period

[REDACTED] 65.37

Memo Item

Full Name (Last, First, Middle Initial)

**B. EXPENSIFY**

Mailing Address 88 KEARNY STREET

City SOUTH SAN FRANCISCO

State CA

Zip Code 94080-1517

Purpose of Disbursement CREDIT CARD PAYMENT

001

Category/Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 20 / 2020

FEC Identification Number

C [REDACTED]

Transaction ID : BA7B22EF74!

Amount of Each Disbursement this Period

[REDACTED] 3447.28

Memo Item

Full Name (Last, First, Middle Initial)

**C. EXPEDIA**

Mailing Address 333 108TH AVENUE NE

City BELLEVUE

State WA

Zip Code 98004

Purpose of Disbursement TRAVEL

001

Category/Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 29 / 2020

FEC Identification Number

C [REDACTED]

Transaction ID : B09AC71AFI

Amount of Each Disbursement this Period

[REDACTED] 525.34

Memo Item

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

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

[REDACTED] 3512.65

[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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial) <b>A. SHERWIN WILLIAMS</b>		Date of Disbursement MM / DD / YYYY 08 / 03 / 2020	
Mailing Address 101 W PROSPECT AVE		FEC Identification Number C [REDACTED]	
City CLEVELAND	State OH	Zip Code 44115-1093	Transaction ID : <b>BF5C1558FC</b> Amount of Each Disbursement this Period [REDACTED] 627.98
Purpose of Disbursement OFFICE SUPPLIES		Category/Type 001	<input checked="" 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>B. BIMINI TWIST</b>		Date of Disbursement MM / DD / YYYY 08 / 03 / 2020	
Mailing Address 8480 OKEECHOBEE BLVD		FEC Identification Number C [REDACTED]	
City WEST PALM BEACH	State FL	Zip Code 33411-1926	Transaction ID : <b>B16C52922A</b> Amount of Each Disbursement this Period [REDACTED] 241.16
Purpose of Disbursement FOOD AND BEVERAGE		Category/Type 001	<input checked="" 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>C. EXPEDIA</b>		Date of Disbursement MM / DD / YYYY 08 / 12 / 2020	
Mailing Address 333 108TH AVENUE NE		FEC Identification Number C [REDACTED]	
City BELLEVUE	State WA	Zip Code 98004	Transaction ID : <b>B0A77C1EB</b> Amount of Each Disbursement this Period [REDACTED] 172.00
Purpose of Disbursement TRAVEL		Category/Type 001	<input checked="" 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:			

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial)

**A. EXPEDIA**

Mailing Address 333 108TH AVENUE NE

City BELLEVUE State WA Zip Code 98004

Purpose of Disbursement TRAVEL

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
0	8		1	2		2	0	2	0

FEC Identification Number  
  
**Transaction ID : B1F0CC8385**  
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. HYATT REGENCY**

Mailing Address 9300 JEFF FUQUA BLVD

City ORLANDO State FL Zip Code 32827-4347

Purpose of Disbursement TRAVEL

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
0	8		1	7		2	0	2	0

FEC Identification Number  
  
**Transaction ID : BB072E6E22**  
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. HYATT REGENCY**

Mailing Address 9300 JEFF FUQUA BLVD

City ORLANDO State FL Zip Code 32827-4347

Purpose of Disbursement TRAVEL

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
0	8		1	8		2	0	2	0

FEC Identification Number  
  
**Transaction ID : BE776BEFB**  
 Amount of Each Disbursement this Period

Memo Item

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

**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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial) <b>A. HYATT REGENCY</b>		Date of Disbursement MM / DD / YYYY 08 / 18 / 2020
Mailing Address 9300 JEFF FUQUA BLVD		FEC Identification Number C [REDACTED] <b>Transaction ID : B654208B12C</b> Amount of Each Disbursement this Period [REDACTED] 167.32
City ORLANDO	State FL	Zip Code 32827-4347
Purpose of Disbursement TRAVEL		001 Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. EXPENSIFY</b>		Date of Disbursement MM / DD / YYYY 08 / 21 / 2020
Mailing Address 88 KEARNY STREET		FEC Identification Number C [REDACTED] <b>Transaction ID : B3759388DC!</b> Amount of Each Disbursement this Period [REDACTED] 441.99
City SOUTH SAN FRANCISCO	State CA	Zip Code 94080-1517
Purpose of Disbursement CREDIT CARD PAYMENT		001 Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. EXPEDIA</b>		Date of Disbursement MM / DD / YYYY 08 / 12 / 2020
Mailing Address 333 108TH AVENUE NE		FEC Identification Number C [REDACTED] <b>Transaction ID : B3E2147E5E</b> Amount of Each Disbursement this Period [REDACTED] 441.99
City BELLEVUE	State WA	Zip Code 98004
Purpose of Disbursement TRAVEL		001 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)..... ▶

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

[REDACTED] 441.99
[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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial)

**A. EXPENSIFY**

Mailing Address 88 KEARNY STREET

City SOUTH SAN FRANCISCO State CA Zip Code 94080-1517

Purpose of Disbursement  
CREDIT CARD PAYMENT

Category/  
Type

Candidate Name

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

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

FEC Identification Number  
  
**Transaction ID : BBB218081E**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. AMAZON**

Mailing Address 410 TERRY AVE N

City SEATTLE State WA Zip Code 98109

Purpose of Disbursement  
OFFICE SUPPLIES

Category/  
Type

Candidate Name

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

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

FEC Identification Number  
  
**Transaction ID : BA07E44CBE**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. EXPENSIFY**

Mailing Address 88 KEARNY STREET

City SOUTH SAN FRANCISCO State CA Zip Code 94080-1517

Purpose of Disbursement  
CREDIT CARD PAYMENT

Category/  
Type

Candidate Name

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

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

FEC Identification Number  
  
**Transaction ID : B042279EEA**  
Amount of Each Disbursement this Period

Memo Item

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

**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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial) <b>A. AMAZON</b>		Date of Disbursement MM / DD / YYYY 08 / 20 / 2020
Mailing Address 410 TERRY AVE N		FEC Identification Number C [REDACTED] <b>Transaction ID : BBD14A8CE</b> Amount of Each Disbursement this Period [REDACTED] 123.46
City SEATTLE	State WA	Zip Code 98109
Purpose of Disbursement OFFICE SUPPLIES		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. MARRIOTT</b>		Date of Disbursement MM / DD / YYYY 08 / 21 / 2020
Mailing Address 10400 FERNWOOD ROAD		FEC Identification Number C [REDACTED] <b>Transaction ID : B18A9A58AF</b> Amount of Each Disbursement this Period [REDACTED] 712.30
City BETHESDA	State MD	Zip Code 20817-1102
Purpose of Disbursement TRAVEL		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. AMAZON</b>		Date of Disbursement MM / DD / YYYY 08 / 22 / 2020
Mailing Address 410 TERRY AVE N		FEC Identification Number C [REDACTED] <b>Transaction ID : B93007C7F5</b> Amount of Each Disbursement this Period [REDACTED] 548.61
City SEATTLE	State WA	Zip Code 98109
Purpose of Disbursement OFFICE SUPPLIES		Category/ Type 001
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	

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial)

**A. AMAZON**

Mailing Address 410 TERRY AVE N

City SEATTLE State WA Zip Code 98109

Purpose of Disbursement OFFICE SUPPLIES

001

Category/Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 25 / 2020

FEC Identification Number

C  
Transaction ID : B733E303292  
Amount of Each Disbursement this Period  
4.89

Memo Item

Full Name (Last, First, Middle Initial)

**B. EXPENSIFY**

Mailing Address 88 KEARNY STREET

City SOUTH SAN FRANCISCO State CA Zip Code 94080-1517

Purpose of Disbursement CREDIT CARD PAYMENT

001

Category/Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 27 / 2020

FEC Identification Number

C  
Transaction ID : BBCCC2C7A1  
Amount of Each Disbursement this Period  
173.06

Memo Item

Full Name (Last, First, Middle Initial)

**C. EXPENSIFY**

Mailing Address 88 KEARNY STREET

City SOUTH SAN FRANCISCO State CA Zip Code 94080-1517

Purpose of Disbursement CREDIT CARD PAYMENT

001

Category/Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 27 / 2020

FEC Identification Number

C  
Transaction ID : B25C5356BE  
Amount of Each Disbursement this Period  
749.76

Memo Item

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

922.82

**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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial) <b>A. MARRIOTT</b>		Date of Disbursement MM / DD / YYYY 08 / 25 / 2020	
Mailing Address 10400 FERNWOOD ROAD		FEC Identification Number C [REDACTED]	
City BETHESDA	State MD	Zip Code 20817-1102	Transaction ID : <b>B9A85307F04</b>
Purpose of Disbursement TRAVEL		Category/Type 001	Amount of Each Disbursement this Period 470.65
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. CORT FURNITURE RENTAL</b>		Date of Disbursement MM / DD / YYYY 08 / 25 / 2020	
Mailing Address 8925 LYNDAL AVE S		FEC Identification Number C [REDACTED]	
City MINNEAPOLIS	State MN	Zip Code 55420-2741	Transaction ID : <b>BC53C3F75B1</b>
Purpose of Disbursement OFFICE EXPENSES		Category/Type 001	Amount of Each Disbursement this Period 150.65
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. AMAZON</b>		Date of Disbursement MM / DD / YYYY 08 / 27 / 2020	
Mailing Address 410 TERRY AVE N		FEC Identification Number C [REDACTED]	
City SEATTLE	State WA	Zip Code 98109	Transaction ID : <b>B99DD1FAD1</b>
Purpose of Disbursement OFFICE SUPPLIES		Category/Type 001	Amount of Each Disbursement this Period 123.46
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial) <b>A. MARRIOTT</b>		Date of Disbursement MM / DD / YYYY 08 / 27 / 2020
Mailing Address 10400 FERNWOOD ROAD		FEC Identification Number C [REDACTED] <b>Transaction ID : B11E7DDA06</b>
City BETHESDA	State MD	Zip Code 20817-1102
Purpose of Disbursement TRAVEL		Amount of Each Disbursement this Period [REDACTED] 5.00
Candidate Name		Category/Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. EXPENSIFY</b>		Date of Disbursement MM / DD / YYYY 08 / 28 / 2020
Mailing Address 88 KEARNY STREET		FEC Identification Number C [REDACTED] <b>Transaction ID : B4AD6611C4!</b>
City SOUTH SAN FRANCISCO	State CA	Zip Code 94080-1517
Purpose of Disbursement CREDIT CARD PAYMENT		Amount of Each Disbursement this Period [REDACTED] 37.02
Candidate Name		Category/Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. AMAZON</b>		Date of Disbursement MM / DD / YYYY 08 / 26 / 2020
Mailing Address 410 TERRY AVE N		FEC Identification Number C [REDACTED] <b>Transaction ID : B927DB99B5</b>
City SEATTLE	State WA	Zip Code 98109
Purpose of Disbursement OFFICE SUPPLIES		Amount of Each Disbursement this Period [REDACTED] 37.02
Candidate Name		Category/Type 001
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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 37.02
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial)

**A. EXPENSIFY**

Mailing Address 88 KEARNY STREET

City SOUTH SAN FRANCISCO State CA Zip Code 94080-1517

Purpose of Disbursement  
CREDIT CARD PAYMENT

Category/  
Type

Candidate Name

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

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : BAD2B3C4D**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. THE WESTIN JEKYLL ISLAND**

Mailing Address 110 OCEAN WAY

City JEKYLL ISLAND State GA Zip Code 31527-1041

Purpose of Disbursement  
TRAVEL

Category/  
Type

Candidate Name

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

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : B22B1626E3/**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. FEDEX**

Mailing Address 942 S SHADY GROVE RD

City MEMPHIS State TN Zip Code 38120-4117

Purpose of Disbursement  
SHIPPING

Category/  
Type

Candidate Name

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

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : B633622CBE**  
Amount of Each Disbursement this Period

Memo Item

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

**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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial)

**A. FEDEX**

Mailing Address 942 S SHADY GROVE RD

City MEMPHIS State TN Zip Code 38120-4117

Purpose of Disbursement SHIPPING

Category/Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
08 / 05 / 2020

FEC Identification Number  
  
**Transaction ID : B9D291D4C3**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. FEDEX**

Mailing Address 942 S SHADY GROVE RD

City MEMPHIS State TN Zip Code 38120-4117

Purpose of Disbursement SHIPPING

Category/Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
08 / 07 / 2020

FEC Identification Number  
  
**Transaction ID : B295B92C6Dl**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. FEDEX**

Mailing Address 942 S SHADY GROVE RD

City MEMPHIS State TN Zip Code 38120-4117

Purpose of Disbursement SHIPPING

Category/Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
08 / 07 / 2020

FEC Identification Number  
  
**Transaction ID : BD9C9AB87l**  
Amount of Each Disbursement this Period

Memo Item

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

**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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial)

**A. FEDEX**

Mailing Address 942 S SHADY GROVE RD

City MEMPHIS State TN Zip Code 38120-4117

Purpose of Disbursement  
SHIPPING

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : B382010DE7'**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. FEDEX**

Mailing Address 942 S SHADY GROVE RD

City MEMPHIS State TN Zip Code 38120-4117

Purpose of Disbursement  
SHIPPING

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : BF691C22C1:**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. FEDEX**

Mailing Address 942 S SHADY GROVE RD

City MEMPHIS State TN Zip Code 38120-4117

Purpose of Disbursement  
SHIPPING

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : B81DB3B04:**  
Amount of Each Disbursement this Period

Memo Item

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

**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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial)

**A. FEDEX**

Mailing Address 942 S SHADY GROVE RD

City MEMPHIS State TN Zip Code 38120-4117

Purpose of Disbursement  
SHIPPING

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : BF06C19F43I**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. FEDEX**

Mailing Address 942 S SHADY GROVE RD

City MEMPHIS State TN Zip Code 38120-4117

Purpose of Disbursement  
SHIPPING

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : B0F16E0A22f**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. FEDEX**

Mailing Address 942 S SHADY GROVE RD

City MEMPHIS State TN Zip Code 38120-4117

Purpose of Disbursement  
SHIPPING

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : BFA6C2977E**  
Amount of Each Disbursement this Period

Memo Item

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

**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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial)

**A. FEDEX**

Mailing Address 942 S SHADY GROVE RD

City MEMPHIS State TN Zip Code 38120-4117

Purpose of Disbursement SHIPPING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

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

FEC Identification Number  
  
**Transaction ID : BAA0148882**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. FEDEX**

Mailing Address 942 S SHADY GROVE RD

City MEMPHIS State TN Zip Code 38120-4117

Purpose of Disbursement SHIPPING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement  
MM / DD / YYYY  
08 / 27 / 2020

FEC Identification Number  
  
**Transaction ID : B216232F586**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. FEDEX**

Mailing Address 942 S SHADY GROVE RD

City MEMPHIS State TN Zip Code 38120-4117

Purpose of Disbursement SHIPPING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement  
MM / DD / YYYY  
08 / 31 / 2020

FEC Identification Number  
  
**Transaction ID : B2DDDB9CA**  
Amount of Each Disbursement this Period

Memo Item

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

**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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial)

**A. FLORIDA POWER AND LIGHTS**

Mailing Address 9250 WEST FLAGLER STREET

City  
MIAMI

State  
FL

Zip Code  
33174-3415

Purpose of Disbursement  
UTILITES

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 13 / 2020

FEC Identification Number

C  
Transaction ID : B181F90CAC  
Amount of Each Disbursement this Period  
172.68

Memo Item

Full Name (Last, First, Middle Initial)

**B. FOLEY AND LARDNER LLP**

Mailing Address 3000 K STREET NW  
SUITE 600

City  
WASHINGTON

State  
DC

Zip Code  
20007

Purpose of Disbursement  
LEGAL CONSULTING

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 04 / 2020

FEC Identification Number

C  
Transaction ID : B351C33CF7I  
Amount of Each Disbursement this Period  
12.38

Memo Item

Full Name (Last, First, Middle Initial)

**C. FOLEY AND LARDNER LLP**

Mailing Address 3000 K STREET NW  
SUITE 600

City  
WASHINGTON

State  
DC

Zip Code  
20007

Purpose of Disbursement  
LEGAL CONSULTING

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 04 / 2020

FEC Identification Number

C  
Transaction ID : B57FA96338  
Amount of Each Disbursement this Period  
243.00

Memo Item

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

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

428.06

**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

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial) <b>A. GOLDEN CREATIVE</b>		Date of Disbursement MM / DD / YYYY 08 / 24 / 2020
Mailing Address 856 ESTER AVENUE		FEC Identification Number C [REDACTED] <b>Transaction ID : B69D97F708f</b> Amount of Each Disbursement this Period 3500.00
City TEANECK	State NJ	Zip Code 07666
Purpose of Disbursement PAC STRATEGY CONSULTING		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. GOOGLE</b>		Date of Disbursement MM / DD / YYYY 08 / 04 / 2020
Mailing Address 1600 AMPHITHEATRE PARKWAY		FEC Identification Number C [REDACTED] <b>Transaction ID : BDB6895977f</b> Amount of Each Disbursement this Period 24.00
City MOUNTAIN VIEW	State CA	Zip Code 94043-1351
Purpose of Disbursement EMAIL		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. GOOGLE</b>		Date of Disbursement MM / DD / YYYY 08 / 07 / 2020
Mailing Address 1600 AMPHITHEATRE PARKWAY		FEC Identification Number C [REDACTED] <b>Transaction ID : B0155EA2F9</b> Amount of Each Disbursement this Period 3.74
City MOUNTAIN VIEW	State CA	Zip Code 94043-1351
Purpose of Disbursement EMAIL		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3527.74
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial)

**A. GOOGLE**

Mailing Address 1600 AMPHITHEATRE PARKWAY

City  
MOUNTAIN VIEW

State  
CA

Zip Code  
94043-1351

Purpose of Disbursement  
EMAIL

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : B85C06A03B**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. GOOGLE**

Mailing Address 1600 AMPHITHEATRE PARKWAY

City  
MOUNTAIN VIEW

State  
CA

Zip Code  
94043-1351

Purpose of Disbursement  
EMAIL

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : B6B616CBC7**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. GOOGLE**

Mailing Address 1600 AMPHITHEATRE PARKWAY

City  
MOUNTAIN VIEW

State  
CA

Zip Code  
94043-1351

Purpose of Disbursement  
EMAIL

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : BA9A113DC!**  
Amount of Each Disbursement this Period

Memo Item

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

**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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial)

**A. GRAMMARLY**

Mailing Address 548 MARKET STREET, #35410

City SAN FRANCISCO State CA Zip Code 94104-5401

Purpose of Disbursement  
OFFICE SUPPLIES

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement  
MM / DD / YYYY  
08 / 07 / 2020

FEC Identification Number  
  
**Transaction ID : BB097D8A22**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. GUSTO**

Mailing Address 525 20TH STREET

City SAN FRANCISCO State CA Zip Code 94121-3122

Purpose of Disbursement  
PAYROLL FEES

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement  
MM / DD / YYYY  
08 / 04 / 2020

FEC Identification Number  
  
**Transaction ID : B30F0962A80**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. GUSTO**

Mailing Address 525 20TH STREET

City SAN FRANCISCO State CA Zip Code 94121-3122

Purpose of Disbursement  
PAYROLL TAXES

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

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

FEC Identification Number  
  
**Transaction ID : B67CB676D1**  
Amount of Each Disbursement this Period

Memo Item

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

**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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial) <b>A. GUSTO</b>		Date of Disbursement MM / DD / YYYY 08 / 06 / 2020
Mailing Address 525 20TH STREET		FEC Identification Number C [REDACTED] <b>Transaction ID : B07F33B96D</b> Amount of Each Disbursement this Period [REDACTED] 132.00
City SAN FRANCISCO	State CA	Zip Code 94121-3122
Purpose of Disbursement PAYROLL WAGES		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CUOMO, ANTHONY, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 06 / 2020
Mailing Address 4400 N. FEDERAL HIGHWAY SUITE 54/210-39		FEC Identification Number C [REDACTED] <b>Transaction ID : B647FB55544</b> Amount of Each Disbursement this Period [REDACTED] 132.00
City BOCA RATON	State FL	Zip Code 33431-5187
Purpose of Disbursement PAYROLL		Category/Type 001
Candidate Name		Memo Item <input checked="" type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. GUSTO</b>		Date of Disbursement MM / DD / YYYY 08 / 06 / 2020
Mailing Address 525 20TH STREET		FEC Identification Number C [REDACTED] <b>Transaction ID : B5273119DF</b> Amount of Each Disbursement this Period [REDACTED] 1826.84
City SAN FRANCISCO	State CA	Zip Code 94121-3122
Purpose of Disbursement PAYROLL WAGES		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 1958.84
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial) <b>A. STREET, REBEKAH, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 06 / 2020
Mailing Address 33 BROCK RD # 33B		FEC Identification Number C [REDACTED] <b>Transaction ID : B5B5866FCC</b> Amount of Each Disbursement this Period [REDACTED] 1381.78
City NAHUNTA	State GA	Zip Code 31553-5370
Purpose of Disbursement PAYROLL		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. PHILLIPS, MARAINA, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 06 / 2020
Mailing Address 2910 NE 8TH AVE		FEC Identification Number C [REDACTED] <b>Transaction ID : BC3BB658B8</b> Amount of Each Disbursement this Period [REDACTED] 445.06
City POMPANO BEACH	State FL	Zip Code 33064-5330
Purpose of Disbursement PAYROLL		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. GUSTO</b>		Date of Disbursement MM / DD / YYYY 08 / 06 / 2020
Mailing Address 525 20TH STREET		FEC Identification Number C [REDACTED] <b>Transaction ID : BD98BE796E</b> Amount of Each Disbursement this Period [REDACTED] 346.15
City SAN FRANCISCO	State CA	Zip Code 94121-3122
Purpose of Disbursement PAYROLL WAGES		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 346.15
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial) <b>A. WILLIAMS, DAREN, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 06 / 2020
Mailing Address 9318 OWINGS CHOICE CT		FEC Identification Number C [REDACTED] <b>Transaction ID : BC3B33646A</b> Amount of Each Disbursement this Period [REDACTED] 346.15
City OWINGS MILLS	State MD	Zip Code 21117-6344
Purpose of Disbursement PAYROLL		Category/Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. GUSTO</b>		Date of Disbursement MM / DD / YYYY 08 / 06 / 2020
Mailing Address 525 20TH STREET		FEC Identification Number C [REDACTED] <b>Transaction ID : BF0A481FA1</b> Amount of Each Disbursement this Period [REDACTED] 686.00
City SAN FRANCISCO	State CA	Zip Code 94121-3122
Purpose of Disbursement PAYROLL WAGES		Category/Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. SWINSON, ANGELA, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 06 / 2020
Mailing Address 4400 N FEDERAL HWY STE 210		FEC Identification Number C [REDACTED] <b>Transaction ID : BCB8D6A12</b> Amount of Each Disbursement this Period [REDACTED] 686.00
City BOCA RATON	State FL	Zip Code 33431-5195
Purpose of Disbursement PAYROLL WAGES		Category/Type 001
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	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 686.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial) <b>A. GUSTO</b>		Date of Disbursement MM / DD / YYYY 08 / 13 / 2020
Mailing Address 525 20TH STREET		FEC Identification Number C [REDACTED] <b>Transaction ID : B768A9F75D</b> Amount of Each Disbursement this Period [REDACTED] 251.70
City SAN FRANCISCO	State CA	Zip Code 94121-3122
Purpose of Disbursement PAYROLL TAXES		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. GUSTO</b>		Date of Disbursement MM / DD / YYYY 08 / 13 / 2020
Mailing Address 525 20TH STREET		FEC Identification Number C [REDACTED] <b>Transaction ID : B6D351AB44</b> Amount of Each Disbursement this Period [REDACTED] 896.02
City SAN FRANCISCO	State CA	Zip Code 94121-3122
Purpose of Disbursement PAYROLL WAGES		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. STREET, REBEKAH, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 13 / 2020
Mailing Address 33 BROCK RD # 33B		FEC Identification Number C [REDACTED] <b>Transaction ID : B203849E65I</b> Amount of Each Disbursement this Period [REDACTED] 465.87
City NAHUNTA	State GA	Zip Code 31553-5370
Purpose of Disbursement PAYROLL		Category/Type 001
Candidate Name		Memo Item <input checked="" type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 1147.72
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial) <b>A. PHILLIPS, MARAINA, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 13 / 2020	
Mailing Address 2910 NE 8TH AVE		FEC Identification Number C [REDACTED] <b>Transaction ID : B1523D3C86:</b> Amount of Each Disbursement this Period [REDACTED] 430.15	
City POMPANO BEACH	State FL	Zip Code 33064-5330	Category/ Type 001
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) ▼		
State: District:	<input checked="" type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>B. GUSTO</b>		Date of Disbursement MM / DD / YYYY 08 / 13 / 2020	
Mailing Address 525 20TH STREET		FEC Identification Number C [REDACTED] <b>Transaction ID : BDCDA94392</b> Amount of Each Disbursement this Period [REDACTED] 1173.20	
City SAN FRANCISCO	State CA	Zip Code 94121-3122	Category/ Type 001
Purpose of Disbursement PAYROLL WAGES		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>C. SWINSON, AMBER, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 13 / 2020	
Mailing Address 200 CAPSTONE DR UNIT 307		FEC Identification Number C [REDACTED] <b>Transaction ID : BA167BB9A1</b> Amount of Each Disbursement this Period [REDACTED] 1173.20	
City LYNCHBURG	State VA	Zip Code 24502-5198	Category/ Type 001
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) ▼		
State: District:	<input checked="" type="checkbox"/> Memo Item		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 1173.20
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial) <b>A. GUSTO</b>		Date of Disbursement MM / DD / YYYY 08 / 13 / 2020
Mailing Address 525 20TH STREET		FEC Identification Number C [REDACTED] <b>Transaction ID : B1E12C68A5</b> Amount of Each Disbursement this Period [REDACTED] 346.15
City SAN FRANCISCO	State CA	Zip Code 94121-3122
Purpose of Disbursement PAYROLL WAGES		Category/Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. WILLIAMS, DAREN, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 13 / 2020
Mailing Address 9318 OWINGS CHOICE CT		FEC Identification Number C [REDACTED] <b>Transaction ID : B3DB6C6100I</b> Amount of Each Disbursement this Period [REDACTED] 346.15
City OWINGS MILLS	State MD	Zip Code 21117-6344
Purpose of Disbursement PAYROLL		Category/Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. GUSTO</b>		Date of Disbursement MM / DD / YYYY 08 / 20 / 2020
Mailing Address 525 20TH STREET		FEC Identification Number C [REDACTED] <b>Transaction ID : B425DCEEB!</b> Amount of Each Disbursement this Period [REDACTED] 639.57
City SAN FRANCISCO	State CA	Zip Code 94121-3122
Purpose of Disbursement PAYROLL TAXES		Category/Type 001
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)..... ▶

985.72

**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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial) <b>A. GUSTO</b>		Date of Disbursement MM / DD / YYYY 08 / 20 / 2020	
Mailing Address 525 20TH STREET		FEC Identification Number C [REDACTED] <b>Transaction ID : B81E6D74AB</b> Amount of Each Disbursement this Period [REDACTED] 346.15	
City SAN FRANCISCO	State CA	Zip Code 94121-3122	Category/Type 001
Purpose of Disbursement PAYROLL WAGES		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>B. WILLIAMS, DAREN, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 20 / 2020	
Mailing Address 9318 OWINGS CHOICE CT		FEC Identification Number C [REDACTED] <b>Transaction ID : B65DB3B490:</b> Amount of Each Disbursement this Period [REDACTED] 346.15	
City OWINGS MILLS	State MD	Zip Code 21117-6344	Category/Type 001
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) ▼		
State: District:	<input checked="" type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>C. GUSTO</b>		Date of Disbursement MM / DD / YYYY 08 / 20 / 2020	
Mailing Address 525 20TH STREET		FEC Identification Number C [REDACTED] <b>Transaction ID : BFA928E4DF</b> Amount of Each Disbursement this Period [REDACTED] 1975.18	
City SAN FRANCISCO	State CA	Zip Code 94121-3122	Category/Type 001
Purpose of Disbursement PAYROLL WAGES		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 2321.33
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

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

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

Mailing Address 33 BROCK RD # 33B

City NAHUNTA State GA Zip Code 31553-5370

Purpose of Disbursement PAYROLL  
Candidate Name

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

State: District:

FEC Identification Number  
**C**  
Transaction ID : **BF6E53D226I**  
Amount of Each Disbursement this Period  
446.62

Memo Item

Full Name (Last, First, Middle Initial)  
**B. SWINSON, AMBER, , ,**

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

Mailing Address 200 CAPSTONE DR UNIT 307

City LYNCHBURG State VA Zip Code 24502-5198

Purpose of Disbursement PAYROLL  
Candidate Name

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

State: District:

FEC Identification Number  
**C**  
Transaction ID : **BB98C52CD4**  
Amount of Each Disbursement this Period  
1098.42

Memo Item

Full Name (Last, First, Middle Initial)  
**C. PHILLIPS, MARAINA, , ,**

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

Mailing Address 2910 NE 8TH AVE

City POMPANO BEACH State FL Zip Code 33064-5330

Purpose of Disbursement PAYROLL  
Candidate Name

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

State: District:

FEC Identification Number  
**C**  
Transaction ID : **B6CAB8E39I**  
Amount of Each Disbursement this Period  
430.14

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)  
**NEW JOURNEY PAC, INC.**

**A. GUSTO**

Full Name (Last, First, Middle Initial)

Mailing Address 525 20TH STREET

City SAN FRANCISCO State CA Zip Code 94121-3122

Purpose of Disbursement PAYROLL WAGES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 20 / 2020

FEC Identification Number: C

Transaction ID : BC77EB8043

Amount of Each Disbursement this Period: 300.00

Memo Item

**B. CROSS, PATRICK, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 250 LEGATE HILL RD

City LEOMINSTER State MA Zip Code 01453-5237

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 20 / 2020

FEC Identification Number: C

Transaction ID : B0278FE94E3

Amount of Each Disbursement this Period: 300.00

Memo Item

**C. GUSTO**

Full Name (Last, First, Middle Initial)

Mailing Address 525 20TH STREET

City SAN FRANCISCO State CA Zip Code 94121-3122

Purpose of Disbursement PAYROLL TAXES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 27 / 2020

FEC Identification Number: C

Transaction ID : BD0E273B15

Amount of Each Disbursement this Period: 688.73

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 988.73

**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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial) <b>A. GUSTO</b>		Date of Disbursement MM / DD / YYYY 08 / 27 / 2020
Mailing Address 525 20TH STREET		FEC Identification Number C [REDACTED] <b>Transaction ID : BF871EBB70</b> Amount of Each Disbursement this Period [REDACTED] 250.00
City SAN FRANCISCO	State CA	Zip Code 94121-3122
Purpose of Disbursement PAYROLL WAGES		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. CROSS, PATRICK, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 28 / 2020
Mailing Address 250 LEGATE HILL RD		FEC Identification Number C [REDACTED] <b>Transaction ID : BCCA49DFAC</b> Amount of Each Disbursement this Period [REDACTED] 250.00
City LEOMINSTER	State MA	Zip Code 01453-5237
Purpose of Disbursement PAYROLL		Category/Type 001
Candidate Name		Memo Item <input checked="" type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>C. GUSTO</b>		Date of Disbursement MM / DD / YYYY 08 / 27 / 2020
Mailing Address 525 20TH STREET		FEC Identification Number C [REDACTED] <b>Transaction ID : B27B7BC63E</b> Amount of Each Disbursement this Period [REDACTED] 346.15
City SAN FRANCISCO	State CA	Zip Code 94121-3122
Purpose of Disbursement PAYROLL WAGES		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 596.15
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. GUSTO**

Full Name (Last, First, Middle Initial)

Mailing Address 525 20TH STREET

City SAN FRANCISCO State CA Zip Code 94121-3122

Purpose of Disbursement PAYROLL WAGES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 27 / 2020

FEC Identification Number: C

Transaction ID : B5971EF814

Amount of Each Disbursement this Period: 2180.17

Memo Item

**B. STREET, REBEKAH, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 33 BROCK RD # 33B

City NAHUNTA State GA Zip Code 31553-5370

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 27 / 2020

FEC Identification Number: C

Transaction ID : B57657B57BI

Amount of Each Disbursement this Period: 490.88

Memo Item

**C. SWINSON, AMBER, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 200 CAPSTONE DR UNIT 307

City LYNCHBURG State VA Zip Code 24502-5198

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 27 / 2020

FEC Identification Number: C

Transaction ID : B6986D7395!

Amount of Each Disbursement this Period: 1098.42

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2180.17

**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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial) <b>A. PHILLIPS, MARAINA, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 27 / 2020	
Mailing Address 2910 NE 8TH AVE		FEC Identification Number C [REDACTED] <b>Transaction ID : BDC6CEEF27</b> Amount of Each Disbursement this Period [REDACTED] 430.14	
City POMPANO BEACH	State FL	Zip Code 33064-5330	Category/ Type 001
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 checked="" type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. HYATT REGENCY</b>		Date of Disbursement MM / DD / YYYY 08 / 18 / 2020	
Mailing Address 9300 JEFF FUQUA BLVD		FEC Identification Number C [REDACTED] <b>Transaction ID : BF62B02FAC</b> Amount of Each Disbursement this Period [REDACTED] 530.19	
City ORLANDO	State FL	Zip Code 32827-4347	Category/ Type 001
Purpose of Disbursement TRAVEL		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>C. INVESTMENTS LIMITED</b>		Date of Disbursement MM / DD / YYYY 08 / 03 / 2020	
Mailing Address 215 N. FEDERAL HWY		FEC Identification Number C [REDACTED] <b>Transaction ID : BB72E4C199</b> Amount of Each Disbursement this Period [REDACTED] 244.65	
City BOCA RATON	State FL	Zip Code 33432	Category/ Type 001
Purpose of Disbursement RENT		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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 774.84
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. INVESTMENTS LIMITED**

Full Name (Last, First, Middle Initial)

Mailing Address 215 N. FEDERAL HWY

City BOCA RATON State FL Zip Code 33432

Purpose of Disbursement RENT

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 05 / 2020

FEC Identification Number: C

Transaction ID : B1960FB045

Amount of Each Disbursement this Period: 750.00

Memo Item

**B. INVESTMENTS LIMITED**

Full Name (Last, First, Middle Initial)

Mailing Address 215 N. FEDERAL HWY

City BOCA RATON State FL Zip Code 33432

Purpose of Disbursement RENT

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 15 / 2020

FEC Identification Number: C

Transaction ID : BEA93C222B

Amount of Each Disbursement this Period: 650.00

Memo Item

**C. LADEN, LUKA, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 25 HIGH ST

City PORTLAND State ME Zip Code 04101-5146

Purpose of Disbursement PAC STRATEGY CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 05 / 2020

FEC Identification Number: C

Transaction ID : B41DCE6F6

Amount of Each Disbursement this Period: 500.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1900.00

**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)  
**NEW JOURNEY PAC, INC.**

**A. LADEN, LUKA, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 25 HIGH ST

City PORTLAND State ME Zip Code 04101-5146

Purpose of Disbursement PAC STRATEGY CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 07 / 2020

FEC Identification Number: C

Transaction ID : B0B5387374I

Amount of Each Disbursement this Period: 500.00

Memo Item

**B. LADEN, LUKA, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 25 HIGH ST

City PORTLAND State ME Zip Code 04101-5146

Purpose of Disbursement PAC STRATEGY CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 15 / 2020

FEC Identification Number: C

Transaction ID : BE2C380FA2I

Amount of Each Disbursement this Period: 1000.00

Memo Item

**C. LINKEDIN**

Full Name (Last, First, Middle Initial)

Mailing Address 1000 W MAUDE AVE

City MOUNTAIN VIEW State CA Zip Code 94043

Purpose of Disbursement OFFICE SUBSCRIPTIONS

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 03 / 2020

FEC Identification Number: C

Transaction ID : B0EA245138

Amount of Each Disbursement this Period: 119.95

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1619.95
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial)

**A. LYFT**

Mailing Address 548 MARKET STREET  
SUITE 68514

City SAN FRANCISCO State CA Zip Code 94104

Purpose of Disbursement  
TRAVEL

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement  
MM / DD / YYYY  
08 / 07 / 2020

FEC Identification Number  
  
**Transaction ID : BD1009264B:**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. LYFT**

Mailing Address 548 MARKET STREET  
SUITE 68514

City SAN FRANCISCO State CA Zip Code 94104

Purpose of Disbursement  
TRAVEL

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement  
MM / DD / YYYY  
08 / 27 / 2020

FEC Identification Number  
  
**Transaction ID : BF1F366552C**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. MARRIOTT**

Mailing Address 10400 FERNWOOD ROAD

City BETHESDA State MD Zip Code 20817-1102

Purpose of Disbursement  
LODGING

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

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

FEC Identification Number  
  
**Transaction ID : BD8D5BEA9**  
Amount of Each Disbursement this Period

Memo Item

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

**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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial)

**A. MDI IMAGING & MAIL**

Mailing Address 21955 CASCADES PARKWAY

City  
STERLING

State  
VA

Zip Code  
20166-9211

Purpose of Disbursement  
POSTAGE

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : B5A0D4D50E**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. MINUTEMAN PRESS**

Mailing Address 1609 NW BOCA RATON BLVD

City  
BOCA RATON

State  
FL

Zip Code  
33432-1615

Purpose of Disbursement  
PRINTING

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : B279E6985BE**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. MINUTEMAN PRESS**

Mailing Address 1609 NW BOCA RATON BLVD

City  
BOCA RATON

State  
FL

Zip Code  
33432-1615

Purpose of Disbursement  
PRINTING

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : B55BCCDAD**  
Amount of Each Disbursement this Period

Memo Item

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

**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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial) <b>A. OMEGA LIST COMPANY</b>		Date of Disbursement MM / DD / YYYY 08 / 24 / 2020
Mailing Address 1420 SPRING HILL ROAD		FEC Identification Number C [REDACTED] <b>Transaction ID : B9ED4F0483</b> Amount of Each Disbursement this Period 10275.27
City MCLEAN	State VA	Zip Code 22102
Purpose of Disbursement LIST RENTAL		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. POLITICAL MEDIA, INC.</b>		Date of Disbursement MM / DD / YYYY 08 / 07 / 2020
Mailing Address 1750 TYSONS BOULEVARD, SUITE 1500		FEC Identification Number C [REDACTED] <b>Transaction ID : B024D98F0D</b> Amount of Each Disbursement this Period 2600.00
City MCLEAN	State VA	Zip Code 22102
Purpose of Disbursement DIGITAL CONSULTING		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. POLITICAL MEDIA, INC.</b>		Date of Disbursement MM / DD / YYYY 08 / 15 / 2020
Mailing Address 1750 TYSONS BOULEVARD, SUITE 1500		FEC Identification Number C [REDACTED] <b>Transaction ID : B55D47E726</b> Amount of Each Disbursement this Period 1500.00
City MCLEAN	State VA	Zip Code 22102
Purpose of Disbursement DIGITAL CONSULTING		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	14375.27
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

**A. PROFESSIONAL BANK**

Full Name (Last, First, Middle Initial)

Mailing Address 625 NORTH FLAGLER DRIVE  
SUITE 509

City WEST PALM BEACH State FL Zip Code 33401

Purpose of Disbursement BANK FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 31 / 2020

FEC Identification Number: C

Transaction ID : **BDCC17D086**

Amount of Each Disbursement this Period: 13.40

Memo Item

**B. PRUITT AND WALL, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 124 BROADKILL ROAD STREET  
SUITE 449

City MILTON State DE Zip Code 19968

Purpose of Disbursement PAC STRATEGY CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 10 / 2020

FEC Identification Number: C

Transaction ID : **B29D4C305C!**

Amount of Each Disbursement this Period: 4000.00

Memo Item

**C. PRUITT AND WALL, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 124 BROADKILL ROAD STREET  
SUITE 449

City MILTON State DE Zip Code 19968

Purpose of Disbursement PAC STRATEGY CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 18 / 2020

FEC Identification Number: C

Transaction ID : **BACD01775C**

Amount of Each Disbursement this Period: 3500.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 7513.40

**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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial) <b>A. PRUITT AND WALL, LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 18 / 2020	
Mailing Address 124 BROADKILL ROAD STREET SUITE 449		FEC Identification Number C [REDACTED] <b>Transaction ID : BDE04AE9E5</b> Amount of Each Disbursement this Period 4000.00	
City MILTON	State DE	Zip Code 19968	Category/ Type 001
Purpose of Disbursement PAC STRATEGY 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 type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>B. PRUITT AND WALL, LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 21 / 2020	
Mailing Address 124 BROADKILL ROAD STREET SUITE 449		FEC Identification Number C [REDACTED] <b>Transaction ID : B7CC3EAB04</b> Amount of Each Disbursement this Period 3500.00	
City MILTON	State DE	Zip Code 19968	Category/ Type 001
Purpose of Disbursement PAC STRATEGY 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 type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>C. PRUITT AND WALL, LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 24 / 2020	
Mailing Address 124 BROADKILL ROAD STREET SUITE 449		FEC Identification Number C [REDACTED] <b>Transaction ID : B925FD96EC</b> Amount of Each Disbursement this Period 3000.00	
City MILTON	State DE	Zip Code 19968	Category/ Type 001
Purpose of Disbursement PAC STRATEGY 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 type="checkbox"/> Memo Item		

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

10500.00

**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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial) <b>A. PRUITT AND WALL, LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 31 / 2020	
Mailing Address 124 BROADKILL ROAD STREET SUITE 449		FEC Identification Number C [REDACTED] <b>Transaction ID : B8948C7B36I</b> Amount of Each Disbursement this Period 3000.00	
City MILTON	State DE	Zip Code 19968	Category/ Type 001
Purpose of Disbursement PAC STRATEGY 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 type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>B. RALLY PAY</b>		Date of Disbursement MM / DD / YYYY 08 / 31 / 2020	
Mailing Address 995 MARKET STREET, FLOOR 2		FEC Identification Number C [REDACTED] <b>Transaction ID : B8854B067Ac</b> Amount of Each Disbursement this Period 711.52	
City SAN FRANCISCO	State CA	Zip Code 94103	Category/ Type 001
Purpose of Disbursement CREDIT CARD FEES		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>C. RITZ CARLTON</b>		Date of Disbursement MM / DD / YYYY 08 / 31 / 2020	
Mailing Address 1250 SOUTH HAYES STREET		FEC Identification Number C [REDACTED] <b>Transaction ID : B894797AE5</b> Amount of Each Disbursement this Period 2550.00	
City ARLINGTON	State VA	Zip Code 22202	Category/ Type 001
Purpose of Disbursement LODGING		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6261.52
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial) <b>A. RST MARKETING</b>		Date of Disbursement MM / DD / YYYY 08 / 10 / 2020
Mailing Address ' 1272 CORPORATE PARK ROAD '		FEC Identification Number C [REDACTED]
City FOREST	State VA	Zip Code 24551-2277
Purpose of Disbursement POSTAGE	Category/Type 001	
Candidate Name	Transaction ID : <b>BFE4FE5963I</b>	
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) ▼	Amount of Each Disbursement this Period 9183.30
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. STREET, REBEKAH, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 21 / 2020
Mailing Address 33 BROCK RD # 33B		FEC Identification Number C [REDACTED]
City NAHUNTA	State GA	Zip Code 31553-5370
Purpose of Disbursement EXPENSE REIMBURSEMENT	Category/Type 001	
Candidate Name	Transaction ID : <b>BC53D5EF1E</b>	
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) ▼	Amount of Each Disbursement this Period 40.23
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. UPWORK.COM</b>		Date of Disbursement MM / DD / YYYY 08 / 04 / 2020
Mailing Address 475 BRANNAN STREET, SUITE 430		FEC Identification Number C [REDACTED]
City SAN FRANCISCO	State CA	Zip Code 94107
Purpose of Disbursement OFFICE SUPPLIES	Category/Type 001	
Candidate Name	Transaction ID : <b>B01F5C741C</b>	
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) ▼	Amount of Each Disbursement this Period 599.98
State: District:	<input type="checkbox"/> Memo Item	

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

9823.51

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial) <b>A. UPWORK.COM</b>		Date of Disbursement MM / DD / YYYY 08 / 10 / 2020	
Mailing Address 475 BRANNAN STREET, SUITE 430			
City SAN FRANCISCO	State CA	Zip Code 94107	
Purpose of Disbursement OFFICE SUPPLIES		Category/Type 001	
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		

FEC Identification Number  
C  
**Transaction ID : BC04BF679C**  
Amount of Each Disbursement this Period  
49.99

Full Name (Last, First, Middle Initial) <b>B. UPWORK.COM</b>		Date of Disbursement MM / DD / YYYY 08 / 11 / 2020	
Mailing Address 475 BRANNAN STREET, SUITE 430			
City SAN FRANCISCO	State CA	Zip Code 94107	
Purpose of Disbursement OFFICE SUPPLIES		Category/Type 001	
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		

FEC Identification Number  
C  
**Transaction ID : BA2E04BA70**  
Amount of Each Disbursement this Period  
775.93

Full Name (Last, First, Middle Initial) <b>C. UPWORK.COM</b>		Date of Disbursement MM / DD / YYYY 08 / 18 / 2020	
Mailing Address 475 BRANNAN STREET, SUITE 430			
City SAN FRANCISCO	State CA	Zip Code 94107	
Purpose of Disbursement OFFICE SUPPLIES		Category/Type 001	
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		

FEC Identification Number  
C  
**Transaction ID : B01EE5B123**  
Amount of Each Disbursement this Period  
708.98

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1534.90
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial)

**A. UPWORK.COM**

Mailing Address 475 BRANNAN STREET, SUITE 430

City SAN FRANCISCO State CA Zip Code 94107

Purpose of Disbursement OFFICE SUPPLIES

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
0	8		2	5		2	0	2	0

FEC Identification Number  
  
**Transaction ID : BF7B46D29C**  
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. USPS**

Mailing Address 499 SOUTH CAPITOL STREET SW 405

City WASHINGTON State DC Zip Code 20003-4018

Purpose of Disbursement POSTAGE

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
0	8		3	1		2	0	2	0

FEC Identification Number  
  
**Transaction ID : B26D1990926**  
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. WARWICK'S**

Mailing Address 499 SOUTH CAPITOL STREET SW #405

City WASHINGTON State DC Zip Code 20003-4018

Purpose of Disbursement TRAVEL

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
0	8		1	7		2	0	2	0

FEC Identification Number  
  
**Transaction ID : BA26B8F0B1**  
 Amount of Each Disbursement this Period

Memo Item

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

**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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial)

**A. WARWICK'S**

Mailing Address 499 SOUTH CAPITOL STREET SW  
#405

City WASHINGTON State DC Zip Code 20003-4018

Purpose of Disbursement  
TRAVEL

001  
Category/  
Type

Candidate Name

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

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
08 / 17 / 2020

FEC Identification Number

C  
**Transaction ID : B745DD9BC0**  
Amount of Each Disbursement this Period  
 88.77

Memo Item

Full Name (Last, First, Middle Initial)

**B. WASHINGTON INTELLIGENCE BUREAU**

Mailing Address 4128 PEPSI PLACE

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement  
BANK FEE

001  
Category/  
Type

Candidate Name

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

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
08 / 10 / 2020

FEC Identification Number

C  
**Transaction ID : B41E2267C66**  
Amount of Each Disbursement this Period  
 2184.32

Memo Item

Full Name (Last, First, Middle Initial)

**C. WASHINGTON INTELLIGENCE BUREAU**

Mailing Address 4128 PEPSI PLACE

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement  
BANK FEE

001  
Category/  
Type

Candidate Name

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

Date of Disbursement

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

FEC Identification Number

C  
**Transaction ID : BD668AADA**  
Amount of Each Disbursement this Period  
 10.00

Memo Item

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

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

2283.09

**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)  
**NEW JOURNEY PAC, INC.**

**A. WATSON, KAREN, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 4323 BEVERLY DRIVE

City DALLAS State TX Zip Code 75205-3022

Purpose of Disbursement EXPENSE REIMBURSEMENT

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 11 / 2020

FEC Identification Number: C

Transaction ID : BDA00F7A7E

Amount of Each Disbursement this Period: 329.17

Memo Item

**B. CENTRAL MARKET**

Full Name (Last, First, Middle Initial)

Mailing Address 5750 EAST LOVERS LANE

City DALLAS State TX Zip Code 75206-2921

Purpose of Disbursement FOOD AND BEVERAGE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 21 / 2020

FEC Identification Number: C

Transaction ID : BBABAB5D11

Amount of Each Disbursement this Period: 83.62

Memo Item

**C. CENTRAL MARKET**

Full Name (Last, First, Middle Initial)

Mailing Address 5750 EAST LOVERS LANE

City DALLAS State TX Zip Code 75206-2921

Purpose of Disbursement FOOD AND BEVERAGE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 21 / 2020

FEC Identification Number: C

Transaction ID : B181190DEA

Amount of Each Disbursement this Period: 167.22

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 329.17

**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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial) <b>A. CENTRAL MARKET</b>		Date of Disbursement MM / DD / YYYY 07 / 21 / 2020
Mailing Address 5750 EAST LOVERS LANE		FEC Identification Number C [REDACTED] <b>Transaction ID : B3548F75082</b>
City DALLAS	State TX	Zip Code 75206-2921
Purpose of Disbursement FOOD AND BEVERAGE		Category/Type 001
Candidate Name		Amount of Each Disbursement this Period 78.33
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. WEBSTER, CHAMBERLAIN &amp; BEAN, LLP</b>		Date of Disbursement MM / DD / YYYY 08 / 13 / 2020
Mailing Address 1747 PENNSYLVANIA AVE, NW SUITE 1000		FEC Identification Number C [REDACTED] <b>Transaction ID : BB2E06DAD#</b>
City WASHINGTON	State DC	Zip Code 20006
Purpose of Disbursement LEGAL CONSULTING		Category/Type 001
Candidate Name		Amount of Each Disbursement this Period 1500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. ZIP MAILING SERVICES, INC.</b>		Date of Disbursement MM / DD / YYYY 08 / 17 / 2020
Mailing Address ' 6304 SHERIFF RD. STE Z '		FEC Identification Number C [REDACTED] <b>Transaction ID : B3D21D9278</b>
City HYATTSVILLE	State MD	Zip Code 20785-4361
Purpose of Disbursement POSTAGE		Category/Type 001
Candidate Name		Amount of Each Disbursement this Period 658.81
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)..... ▶

2158.81

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

166572.25

**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 checked="" 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)  
**NEW JOURNEY PAC, INC.**

**A. ESTERLINE, SANDRA, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 206 COOKS CREEK TRAIL

City GLASGOW State KY Zip Code 42141-7312

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 03 / 2020

FEC Identification Number: C

Transaction ID : B975AB03E7

Amount of Each Disbursement this Period: 15.00

Memo Item

**B. HOUSER, SUZANNE, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 44489 TOWN CENTER WAY # 232

City PALM DESERT State CA Zip Code 92260-2723

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 16 / 2020

FEC Identification Number: C

Transaction ID : B6D95D205B

Amount of Each Disbursement this Period: 20.00

Memo Item

**C. HOUSER, SUZANNE, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 44489 TOWN CENTER WAY # 232

City PALM DESERT State CA Zip Code 92260-2723

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 30 / 2020

FEC Identification Number: C

Transaction ID : BDA811D322

Amount of Each Disbursement this Period: 50.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 85.00

**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 checked="" 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)  
**NEW JOURNEY PAC, INC.**

Full Name (Last, First, Middle Initial) <b>A. LINDBERGH, PERRY, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 16 / 2020	
Mailing Address 249 NE 110TH ST		FEC Identification Number C [REDACTED] <b>Transaction ID : B143594B89E</b> Amount of Each Disbursement this Period 25.00	
City MIAMI	State FL	Zip Code 33161-7016	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>B. PARKS, WALTER, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 12 / 2020	
Mailing Address 1363 STODICK LANE		FEC Identification Number C [REDACTED] <b>Transaction ID : B501802EF17</b> Amount of Each Disbursement this Period 50.00	
City GARDNERVILLE	State NV	Zip Code 89410-7310	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>C. SCHROEDER, SHAWN, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 06 / 2020	
Mailing Address 672 MARBLE ROCK CIRCLE		FEC Identification Number C [REDACTED] <b>Transaction ID : B315827FFC</b> Amount of Each Disbursement this Period 10.00	
City GREEN BAY	State WI	Zip Code 54311-6947	Category/ Type 010
Purpose of Disbursement CONTRIBUTION REFUND		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	85.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" 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)  
**NEW JOURNEY PAC, INC.**

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

Mailing Address 1413 14TH LN

City PALM BEACH GARDENS State FL Zip Code 33418-3559

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
08 / 30 / 2020

FEC Identification Number: C

Transaction ID : BCBECCB4

Amount of Each Disbursement this Period: 10.00

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: MM / DD / YYYY

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: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	10.00
<b>TOTAL</b> This Period (last page this line number only).....▶	180.00

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 256 OF 267
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ACTIVE ENGAGEMENT</b>			Nature of Debt (Purpose): LIST RENTAL
Mailing Address 113 EAST MARKET STREET 300			
City LEESBURG	State VA	Zip Code 20176-3109	

Outstanding Balance Beginning This Period 290.00	<b>Transaction ID : DDABC5BABCA9144DCB3</b>	
Amount Incurred This Period 0.00	Payment This Period 290.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>BELIEVE MEDIA LLC</b>			Nature of Debt (Purpose): DIGITAL ADS
Mailing Address 10660 PAGE AVE #65			
City FAIRFAX	State VA	Zip Code 22038-8205	

Outstanding Balance Beginning This Period 5763.10	<b>Transaction ID : DA1B3E3B7EA514293981</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5763.10

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>DAMIVADA THE PROMOTIONAL PRODUCTS COMPANY</b>			Nature of Debt (Purpose): PAC STRATEGY CONSULTING
Mailing Address 327 FOREST BEND DRIVE			
City MOUNT JULIET	State TN	Zip Code 37122	

Outstanding Balance Beginning This Period 3983.28	<b>Transaction ID : DD75A142E89034374AB1</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3983.28

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	9746.38
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> 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 257 OF 267
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>FOLEY AND LARDNER LLP</b>			Nature of Debt (Purpose): LEGAL CONSULTING
Mailing Address 3000 K STREET NW SUITE 600			
City WASHINGTON	State DC	Zip Code 20007	

Outstanding Balance Beginning This Period 243.00	Transaction ID : D9E40796F25F24A19885	
Amount Incurred This Period 0.00	Payment This Period 243.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>GOLDEN AGE CONSULTING GROUP, LLC</b>			Nature of Debt (Purpose): MEDIA PLACEMENT
Mailing Address 3009 S. OCEAN BLVD			
City HIGHLAND BEACH	State FL	Zip Code 33487-1869	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D0581A1938A6942D6944	
Amount Incurred This Period 75000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 75000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>GOLDEN AGE CONSULTING GROUP, LLC</b>			Nature of Debt (Purpose): MEDIA PLACEMENT
Mailing Address 3009 S. OCEAN BLVD			
City HIGHLAND BEACH	State FL	Zip Code 33487-1869	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D7EA2A6E5B78345C0B45	
Amount Incurred This Period 75000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 75000.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	150000.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> 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 258 OF 267
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>GOLDEN CREATIVE</b>			Nature of Debt (Purpose): PAC STRATEGY CONSULTING
Mailing Address 856 ESTER AVENUE			
City TEANECK	State NJ	Zip Code 07666	

Outstanding Balance Beginning This Period 48322.67		Transaction ID : DAD7EDF40181B4DC9A3F	
Amount Incurred This Period 0.00	Payment This Period 3500.00	Outstanding Balance at Close of This Period 44822.67	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>GOLDEN CREATIVE</b>			Nature of Debt (Purpose): PAC STRATEGY CONSULTING
Mailing Address 856 ESTER AVENUE			
City TEANECK	State NJ	Zip Code 07666	

Outstanding Balance Beginning This Period 2650.00		Transaction ID : D0FA42858A89C4398B70	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2650.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>GOLDEN CREATIVE</b>			Nature of Debt (Purpose): PAC STRATEGY CONSULTING
Mailing Address 856 ESTER AVENUE			
City TEANECK	State NJ	Zip Code 07666	

Outstanding Balance Beginning This Period 46500.00		Transaction ID : DF9A64FDAF3EE47D9B57	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 46500.00	

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	93972.67
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> 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 259 OF 267
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>HOGENSON COMMUNICATIONS, LLC</b>			Nature of Debt (Purpose): PAC COMMUNICATIONS CONSULTING
Mailing Address PO BOX 65023			
City PORT LUDLOW	State WA	Zip Code 98365	

Outstanding Balance Beginning This Period 30518.50	Transaction ID : D273733515BB847EE9C7	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 30518.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>HOGENSON COMMUNICATIONS, LLC</b>			Nature of Debt (Purpose): PAC COMMUNICATIONS CONSULTING
Mailing Address PO BOX 65023			
City PORT LUDLOW	State WA	Zip Code 98365	

Outstanding Balance Beginning This Period 7500.00	Transaction ID : D928C94C6294740DFA62	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 7500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>HOGENSON COMMUNICATIONS, LLC</b>			Nature of Debt (Purpose): PAC COMMUNICATIONS CONSULTING
Mailing Address PO BOX 65023			
City PORT LUDLOW	State WA	Zip Code 98365	

Outstanding Balance Beginning This Period 1000.00	Transaction ID : D5F8BEE952FB84DE7992	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1000.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	39018.50
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> 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 260 OF 267
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>POLITICAL MEDIA, INC.</b>			Nature of Debt (Purpose): DIGITAL CONSULTING
Mailing Address 1750 TYSONS BOULEVARD, SUITE 1500			
City MCLEAN	State VA	Zip Code 22102	

Outstanding Balance Beginning This Period 13613.00	Transaction ID : D296942272A294095BF3	
Amount Incurred This Period 0.00	Payment This Period 4100.00	Outstanding Balance at Close of This Period 9513.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>POLITICAL MEDIA, INC.</b>			Nature of Debt (Purpose): DIGITAL CONSULTING
Mailing Address 1750 TYSONS BOULEVARD, SUITE 1500			
City MCLEAN	State VA	Zip Code 22102	

Outstanding Balance Beginning This Period 17407.00	Transaction ID : DBBDEEB216CE24B32830	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 17407.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>PRUITT AND WALL, LLC</b>			Nature of Debt (Purpose): PAC STRATEGY CONSULTING
Mailing Address 124 BROADKILL ROAD STREET SUITE 449			
City MILTON	State DE	Zip Code 19968	

Outstanding Balance Beginning This Period 28559.92	Transaction ID : DCCD95CAE63584EFAA86	
Amount Incurred This Period 0.00	Payment This Period 17500.00	Outstanding Balance at Close of This Period 11059.92

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	37979.92
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> 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 261 OF 267
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>PRUITT AND WALL, LLC</b>			Nature of Debt (Purpose): PAC STRATEGY CONSULTING
Mailing Address 124 BROADKILL ROAD STREET SUITE 449			
City MILTON	State DE	Zip Code 19968	

Outstanding Balance Beginning This Period 62234.96	Transaction ID : DDEC6ABF27284433D9E0	
Amount Incurred This Period 0.00	Payment This Period 3500.00	Outstanding Balance at Close of This Period 58734.96

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>PRUITT AND WALL, LLC</b>			Nature of Debt (Purpose): PAC STRATEGY CONSULTING
Mailing Address 124 BROADKILL ROAD STREET SUITE 449			
City MILTON	State DE	Zip Code 19968	

Outstanding Balance Beginning This Period 6349.87	Transaction ID : DB98629C886FA46D08C6	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 6349.87

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>PRUITT AND WALL, LLC</b>			Nature of Debt (Purpose): PAC STRATEGY CONSULTING
Mailing Address 124 BROADKILL ROAD STREET SUITE 449			
City MILTON	State DE	Zip Code 19968	

Outstanding Balance Beginning This Period 15214.59	Transaction ID : D1A1338A56D8942A4993	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 15214.59

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	80299.42
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> 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 262 OF 267
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>PRUITT AND WALL, LLC</b>			Nature of Debt (Purpose): PAC STRATEGY CONSULTING
Mailing Address 124 BROADKILL ROAD STREET SUITE 449			
City MILTON	State DE	Zip Code 19968	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D72038AD0E931404A9BE	
Amount Incurred This Period 4636.92	Payment This Period 0.00	Outstanding Balance at Close of This Period 4636.92

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>SASQUATCH</b>			Nature of Debt (Purpose): MEDIA PLACEMENT
Mailing Address 1001 S MACDILL AVE SUITE 600			
City TAMPA	State FL	Zip Code 33629	

Outstanding Balance Beginning This Period 22000.00	Transaction ID : D4E55920E28B141F29B0	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 22000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ULTIMATE CORPORATE ADVERTISING</b>			Nature of Debt (Purpose): MEDIA PRINT
Mailing Address 8211 W. BROWARD BLVD SUITE 350			
City PLANTATION	State FL	Zip Code 33324	

Outstanding Balance Beginning This Period 9000.00	Transaction ID : D262274CA38124A47800	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 9000.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	35636.92
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> 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 263 OF 267
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**NEW JOURNEY PAC, INC.**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>WEBSTER, CHAMBERLAIN &amp; BEAN, LLP</b>			Nature of Debt (Purpose): LEGAL CONSULTING
Mailing Address 1747 PENNSYLVANIA AVE, NW SUITE 1000			
City WASHINGTON	State DC	Zip Code 20006	

Outstanding Balance Beginning This Period 3305.80		Transaction ID : D96E31F4C4568453B8F2	
Amount Incurred This Period 0.00	Payment This Period 1500.00	Outstanding Balance at Close of This Period 1805.80	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>WEBSTER, CHAMBERLAIN &amp; BEAN, LLP</b>			Nature of Debt (Purpose): LEGAL CONSULTING
Mailing Address 1747 PENNSYLVANIA AVE, NW SUITE 1000			
City WASHINGTON	State DC	Zip Code 20006	

Outstanding Balance Beginning This Period 382.55		Transaction ID : D360C2B0274BD4CDDBC8	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 382.55	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	2188.35
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	448842.16
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	448842.16

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
NEW JOURNEY PAC, INC.
FEC IDENTIFICATION NUMBER
C C00709691

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

Full Name of Payee CEREBRUM-AI
Mailing Address 26 MILMARSON PL NW
City WASHINGTON State DC Zip Code 20011-2334
Purpose of Expenditure DIGITAL CONSULTING
Name of Federal Candidate: LOOMER, LAURA, , ,
Office Sought: House District: 21 State: FL
Disbursement For: General 2020
Amount 2108.00
Transaction ID: EB5110EA906504783945

Full Name of Payee GOLDEN AGE CONSULTING GROUP, LLC
Mailing Address 3009 S. OCEAN BLVD
City HIGHLAND BEACH State FL Zip Code 33487-1869
Purpose of Expenditure MEDIA PLACEMENT
Name of Federal Candidate: BIDEN, JOSEPH R JR, , ,
Office Sought: President State: ZZ
Disbursement For: General 2020
Amount 75000.00
Transaction ID: EF0DEB4522DD249FDB9F

(a) SUBTOTAL of Itemized Independent Expenditures 2108.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

DATWYLER, THOMAS, , ,

[Electronically Filed]

Date 09 / 16 / 2020

Signature



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
NEW JOURNEY PAC, INC.
FEC IDENTIFICATION NUMBER
C C00709691

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

Full Name of Payee: GOLDEN AGE CONSULTING GROUP, LLC
Mailing Address: 3009 S. OCEAN BLVD
City: HIGHLAND BEACH, State: FL, Zip Code: 33487-1869
Purpose of Expenditure: MEDIA PLACEMENT
Category/Type:
Name of Federal Candidate: TRUMP, DONALD, , , Support
Office Sought: President
Disbursement For: General 2020
Amount: 75000.00
Transaction ID: E33B666317FA04B4790C

Full Name of Payee: LGM CONSULTING GROUP
Mailing Address: 8 THE GREEN, SUITE 7592
City: DOVER, State: DE, Zip Code: 19901-3618
Purpose of Expenditure: ONLINE VOTER CONTACT
Category/Type:
Name of Federal Candidate: DONALDS, BYRON, , , Support
Office Sought: House
Disbursement For: General 2020
Amount: 20481.96
Transaction ID: EF58014CF60794ED8922

(a) SUBTOTAL of Itemized Independent Expenditures: 20481.96
(b) SUBTOTAL of Unitemized Independent Expenditures:
(c) TOTAL Independent Expenditures:

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

DATWYLER, THOMAS, , ,

[Electronically Filed]

Date 09 / 16 / 2020

Signature

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

NAME OF COMMITTEE (In Full) <b>NEW JOURNEY PAC, INC.</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00709691
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Check if  24-hour report  48-hour report  New report Amends report filed on  /  /

Full Name of Payee <input type="checkbox"/> Memo Item <b>LGM CONSULTING GROUP</b>		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address <b>8 THE GREEN SUITE 7592</b>		Amount <input type="text"/>	
City <b>DOVER</b>	State <b>DE</b>	Zip Code <b>19901-3618</b>	<b>14329.00</b>
Purpose of Expenditure <b>ONLINE VOTER CONTACT</b>		Category/ Type <input type="text"/>	<b>Transaction ID : E1CFE3362300D42798FF</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: <b>BIDEN, JOSEPH R JR, , ,</b>		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <b>00</b> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>ZZ</b>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	
<b>135641.45</b>		<b>08 / 13 / 2020</b>	

Full Name of Payee <input type="checkbox"/> Memo Item <b>LGM CONSULTING GROUP</b>		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address <b>8 THE GREEN SUITE 7592</b>		Amount <input type="text"/>	
City <b>DOVER</b>	State <b>DE</b>	Zip Code <b>19901-3618</b>	<b>1430.00</b>
Purpose of Expenditure <b>ONLINE VOTER CONTACT</b>		Category/ Type <input type="text"/>	<b>Transaction ID : E47ACE5E888ED4DA3B9</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: <b>BIDEN, JOSEPH R JR, , ,</b>		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <b>00</b> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <b>ZZ</b>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	
<b>135641.45</b>		<b>08 / 13 / 2020</b>	

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

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

DATWYLER, THOMAS, , , [Electronically Filed] Date  /  /

Signature **09 / 16 / 2020**

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

NAME OF COMMITTEE (In Full) <b>NEW JOURNEY PAC, INC.</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00709691
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Check if  24-hour report  48-hour report  New report Amends report filed on  /  /

Full Name of Payee <input type="checkbox"/> Memo Item <b>LGM CONSULTING GROUP</b>		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address <b>8 THE GREEN SUITE 7592</b>		Amount <input type="text"/>	
City <b>DOVER</b>	State <b>DE</b>	Zip Code <b>19001-3618</b>	<b>1280.00</b>
Purpose of Expenditure <b>ONLINE VOTER CONTACT</b>		Category/Type <input type="text"/>	<b>Transaction ID : EC18A60F66E144A439FD</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: <b>COLLINS, JOE, , ,</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <b>43</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>CA</b>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
<b>1280.00</b>		<b>2020</b>	

Full Name of Payee <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination	
Mailing Address		Amount	
City	State	Zip Code	<input type="text"/>
Purpose of Expenditure		Category/Type	Date of Disbursement or Obligation
Name of Federal Candidate:		<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
<input type="text"/>		<input type="text"/>	

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<input type="text"/>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....	<input type="text"/>
<b>(c) TOTAL</b> Independent Expenditures .....	<input type="text"/>
	<b>1280.00</b>
	<b>39628.96</b>

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

DATWYLER, THOMAS, , ,

*[Electronically Filed]*

Date  /  /

Signature