

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**
Great America Committee

ADDRESS (number and street) PO Box 28022
Check if different than previously reported. (ACC) Washington DC 20038

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00640664 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 [MM] / [DD] / [YYYY] in the State of []
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on [MM] / [DD] / [YYYY] in the State of []

5. Covering Period [08] / [01] / [2020] through [08] / [31] / [2020]

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

Signature of Treasurer Hobbs, Cabell, , , [Electronically Filed] Date [09] / [18] / [2020]

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Great America Committee

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="98502.81"/>	<input type="text" value="98502.81"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="179790.61"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="146871.29"/>	<input type="text" value="676365.23"/>
(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="326661.90"/>	<input type="text" value="774868.04"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="131084.23"/>	<input type="text" value="579290.37"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="195577.67"/>	<input type="text" value="195577.67"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="12500.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Great America Committee

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).....	71625.00	492487.00
(ii) Unitemized	75246.29	76041.29
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	146871.29	568528.29
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	87000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	146871.29	655528.29
12. Transfers From Affiliated/Other Party Committees.....	0.00	20836.94
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	146871.29	676365.23
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	146871.29	676365.23

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	131084.23	503890.37
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	131084.23	503890.37
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	75400.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	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)) ..	131084.23	579290.37
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	131084.23	579290.37

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	146871.29	655528.29
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	146871.29	655528.29
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	131084.23	503890.37
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	131084.23	503890.37

**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 35
<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)
Great America Committee

A. WORKMAN, DONALD, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6904 GEORGETOWN PIKE
 City MCLEAN State VA Zip Code 22101-2147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BAKER HOSTETLER Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 17 / 2020
Transaction ID : SA11A.9891
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. RASTIN, THOMAS, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 332
 City MOUNT VERNON State OH Zip Code 43050-0332
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 19 / 2020
Transaction ID : SA11A.12838
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. ROOB, EDWARD, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 841 WOODBINE LN
 City NORTHBROOK State IL Zip Code 60062-3439
 FEC ID number of contributing 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 : SA11A.12839
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	11000.00
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 7 OF 35
	<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)
Great America Committee

A. SCHWAB, CHARLES, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 192861
 City SAN FRANCISCO State CA Zip Code 94119-2861
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHARLES SCHWAB CORPORATION Occupation (for Individual) CHAIRMAN & FOUNDER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 5000.00

Date of Receipt 08 / 19 / 2020
Transaction ID : SA11A.12836
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. WRIGHT, KAREN, ANNE, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1240 GAMBIER ROAD
 City MOUNT VERNON State OH Zip Code 43050-3842
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARIEL CORPORATION Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 5000.00

Date of Receipt 08 / 19 / 2020
Transaction ID : SA11A.12837
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. BEANE, C. ERNEST, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3250 36 1/2 AVE.
 City ROCK ISLAND State IL Zip Code 61201-6448
 FEC ID number of contributing 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 : SA11A.10278
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10250.00
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 8 OF 35
	(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)
Great America Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. BECHLER, LARRY, E., ,

Mailing Address 10140 W 550 S

City SAN PIERRE	State IN	Zip Code 46374-9657
--------------------	-------------	------------------------

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

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

Aggregate Year-to-Date ▼
500.00

Date of Receipt

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

Transaction ID : SA11A.10489

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

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

Mailing Address P.O. BOX 184

City MAUD	State TX	Zip Code 75567-0184
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

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 : SA11A.10212

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. BOLDT, LAWRENCE, W., MR.,

Mailing Address 2007 PINELAWN DR.

City TOLEDO	State OH	Zip Code 43614-3536
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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 ▼
400.00

Date of Receipt

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

Transaction ID : SA11A.10318

Amount of Each Receipt this Period
400.00

Memo Item CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 9 OF 35
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Great America Committee

A. BRICK, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5811 MITCHELL CANYON CT.
 City CLAYTON State CA Zip Code 94517-1334
 FEC ID number of contributing 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 : SA11A.10184
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. CAMERON, NAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 952 E BEAU ST.
 City WASHINGTON State PA Zip Code 15301-2925
 FEC ID number of contributing 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 : SA11A.10239
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. CARR, ARLINE, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 29 HARMONY RDG. APT. 129
 City ENDICOTT State NY Zip Code 13760-1283
 FEC ID number of contributing 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 : SA11A.10502
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1750.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 35
	<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)
Great America Committee

A. FRENCH, WILLIAM, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10968 WINDJAMMER DR. S
 City INDIANAPOLIS State IN Zip Code 46256-9673
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CUSHMAN & WAKEFIELD Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 26 / 2020
Transaction ID : SA11A.10296
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. HOLLINGSWORTH, BERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1356 N CLASSIC CT.
 City LONGWOOD State FL Zip Code 32779-5814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) C.M.A. Occupation (for Individual) FINANCIAL CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 26 / 2020
Transaction ID : SA11A.10550
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. LINCOLN, HARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 46
 City GRAYTOWN State OH Zip Code 43432-0046
 FEC ID number of contributing 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 : SA11A.10197
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1750.00
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 11 OF 35
	<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)
Great America Committee

A. MOLENDORP, DAYTON, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6507 CASTLE KNOLL CT.
 City INDIANAPOLIS State IN Zip Code 46250-1439
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 08 / 26 / 2020
Transaction ID : SA11A.10189
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. PIPPENS, MARTHA, , MISS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 503 OLD NEWTON RD.
 City DALEVILLE State AL Zip Code 36322-5507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 26 / 2020
Transaction ID : SA11A.10440
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. SARNS, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3645 DALEVIEW DR.
 City ANN ARBOR State MI Zip Code 48105-9687
 FEC ID number of contributing 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 : SA11A.10421
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	3000.00
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 12 OF 35
	<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)
Great America Committee

A. WIGGINS, RICHARD, C., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1009 BLACKBURN RD.
 City APEX State NC Zip Code 27502-5219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 26 / 2020
Transaction ID : SA11A.10390
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. BOOKER, PATRICIA, GALLIMORE, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1975 ASHLEY LN.
 City ROANOKE State VA Zip Code 24018-1645
 FEC ID number of contributing 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 / 27 / 2020
Transaction ID : SA11A.11506
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. BURDINE, ANNIE, LOIS, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10906 THORNCLIFF DR
 City HUMBLE State TX Zip Code 77396-2479
 FEC ID number of contributing 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 / 27 / 2020
Transaction ID : SA11A.11320
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1500.00
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 13 OF 35
	<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)
Great America Committee

A. DRUMMOND, A. , CAROLINE, MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 266 RICE BLUFF RD.

City PAWLEYS ISLAND	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 ▼
1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		27		2020

Transaction ID : SA11A.10603

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

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

Mailing Address 137 WILLIAM FEATHER DR.

City VOORHEES	State NJ	Zip Code 08043-2986
------------------	-------------	------------------------

FEC ID number of contributing 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		27		2020

Transaction ID : SA11A.11667

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

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

Mailing Address 150 S GRAND AVE APT 354

City WEST COVINA	State CA	Zip Code 91791-2371
---------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		27		2020

Transaction ID : SA11A.10997

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1750.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 14 OF 35
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Great America Committee

A. FISHER, JERROLD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 68
 City VEVAY State IN Zip Code 47043-0068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INNKEEPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 27 / 2020
Transaction ID : SA11A.11151
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. GARZA, ROBERTO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18543 S MCCONNELL RD.
 City ATASCOSA State TX Zip Code 78002-5507
 FEC ID number of contributing 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 / 27 / 2020
Transaction ID : SA11A.11607
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. HALL, JEAN, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1010 WALTHAM ST. APT. 493
 City LEXINGTON State MA Zip Code 02421-8066
 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 / 27 / 2020
Transaction ID : SA11A.11828
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2000.00
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 15 OF 35
	<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)
Great America Committee

A. HASSEY, ROBERT, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5217 E WIND LAKE RD.
 City UNION GROVE State WI Zip Code 53182-9654
 FEC ID number of contributing 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 / 27 / 2020
Transaction ID : SA11A.11037
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. INGLE, MARIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18304 CYPRESS COVE RD.
 City LUTZ State FL Zip Code 33549-5437
 FEC ID number of contributing 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 / 27 / 2020
Transaction ID : SA11A.10972
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. KING, NORMA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43 HILLSIDE DR
 City AVON State NY Zip Code 14414-9527
 FEC ID number of contributing 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 / 27 / 2020
Transaction ID : SA11A.10990
 Amount of Each Receipt this Period 400.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	900.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 16 OF 35
	(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)
Great America Committee

A. LAIR, ROSETTA, , ,
 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 ▼ 250.00

Date of Receipt 08 / 27 / 2020
Transaction ID : SA11A.11769
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. LEONE, SHANNON, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1238 TIMBER LN.
 City GRAND CANE State LA Zip Code 71032-5808
 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 ▼ 250.00

Date of Receipt 08 / 27 / 2020
Transaction ID : SA11A.11474
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MARTIN, ANNA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3020 S LAS CRUCES ST
 City DEMING State NM Zip Code 88030-8806
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 27 / 2020
Transaction ID : SA11A.11306
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	750.00
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 17 OF 35
	<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)
Great America Committee

A. MARTIN, EDWARD, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1046 WOODBERRY RD.
 City NEW KENSINGTON State PA Zip Code 15068-5308
 FEC ID number of contributing 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 / 27 / 2020
Transaction ID : SA11A.10609
 Amount of Each Receipt this Period 300.00
 Memo Item CONTRIBUTION

B. MCAMIS, JOHN, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3263 SHADYBROOK LN.
 City CHICO State CA Zip Code 95928-3984
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 27 / 2020
Transaction ID : SA11A.10955
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. MCFARLAND, J., WILLIAM, , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 429 GREEN SPRINGS HWY STE 161
 City BIRMINGHAM State AL Zip Code 35209-4938
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TSPSL INC Occupation (for Individual) TREASURER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 27 / 2020
Transaction ID : SA11A.11005
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 35
	<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)
Great America Committee

A. MCGAHON, LORRAINE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 30 TROON TRL.

City NEWMAN	State GA	Zip Code 30265-2082
----------------	-------------	------------------------

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

Name of Employer (for Individual) HOMEMAKER	Occupation (for Individual) HOMEMAKER
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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		27		2020

Transaction ID : SA11A.10906

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. MUNK, PATRICIA, L., MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 758 SANDLEWOOD DR

City CHAGRIN FALLS	State OH	Zip Code 44023-6734
-----------------------	-------------	------------------------

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 ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2020

Transaction ID : SA11A.10809

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. O'BRIEN, JULIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 26455 S TAMIAMI TRL. STE. 2207

City BONITA SPRINGS	State FL	Zip Code 34134-7825
------------------------	-------------	------------------------

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

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
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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		27		2020

Transaction ID : SA11A.11626

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1750.00
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 19 OF 35
	<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)
Great America Committee

A. PEDICORD, DOROTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2860 E BELLEVIEW AVE.
 City GREENWOOD VILLAGE State CO Zip Code 80121-1621
 FEC ID number of contributing 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 / 27 / 2020
Transaction ID : SA11A.11844
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. POOLE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 316 WOODCLIFF DR.
 City RALEIGH State NC Zip Code 27609-7030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PEDIATRICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 27 / 2020
Transaction ID : SA11A.11639
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. SHARP, MARION, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 29 PACES WEST PL. NW
 City ATLANTA State GA Zip Code 30327-2731
 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 ▼ 250.00

Date of Receipt 08 / 27 / 2020
Transaction ID : SA11A.10901
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1500.00
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 20 OF 35
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Great America Committee

A. STEPHAN, DEAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 84 S LA SENDA DR.
 City LAGUNA BEACH State CA Zip Code 92651-6736
 FEC ID number of contributing 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 / 27 / 2020
Transaction ID : SA11A.10919
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. SUMNER, MARGARET, , MISS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 340 RAMSAY PL.
 City LOVELAND State CO Zip Code 80537-2054
 FEC ID number of contributing 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 / 27 / 2020
Transaction ID : SA11A.11843
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. TIU, CLAUDIA, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1711 IVY BRIDGE RD.
 City GLENDALE State CA Zip Code 91207-1547
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) NURSE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 27 / 2020
Transaction ID : SA11A.11580
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1250.00
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 21 OF 35
	<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)
Great America Committee

A. VAVERE, VALDIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 278 CANYON PASS
 City HUDSON State WI Zip Code 54016-8354
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 08 / 27 / 2020
Transaction ID : SA11A.10815
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

B. BOOTH-CLIBBORN, GLENN, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2829 TUSCANNNA DR.
 City RICHLAND State WA Zip Code 99354-2699
 FEC ID number of contributing 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 : SA11A.12622
 Amount of Each Receipt this Period
 500.00
 Memo Item
 CONTRIBUTION

C. BROWN, DEE, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3365 HALL CREEK LN
 City OWINGS State MD Zip Code 20736-9588
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 08 / 28 / 2020
Transaction ID : SA11A.12718
 Amount of Each Receipt this Period
 250.00
 Memo Item
 CONTRIBUTION

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 22 OF 35
	<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)
Great America Committee

A. CASSELS, W., TOBIN, , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 1691
 City COLUMBIA State SC Zip Code 29202-1691
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOUTHERN FREIGHT LINES Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 28 / 2020
Transaction ID : SA11A.12711
 Amount of Each Receipt this Period 5000.00
 Memo Item
 CONTRIBUTION

B. DAVIS, JAMES, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2749 PALOS VERDES DR. N
 City PALOS VERDES ESTAT State CA Zip Code 90274-1006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 28 / 2020
Transaction ID : SA11A.12408
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

C. GUNDEN, DONALD, K., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 64874 ORCHARD DR.
 City GOSHEN State IN Zip Code 46526-9118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FOREST RIVER Occupation (for Individual) GENERAL MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 28 / 2020
Transaction ID : SA11A.12715
 Amount of Each Receipt this Period 5000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10250.00
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 23 OF 35
	<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)
Great America Committee

A. KENT, DONALD, D., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15004 SE 35TH ST.
 City VANCOUVER State WA Zip Code 98683-3763
 FEC ID number of contributing 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 : SA11A.12394
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. MITCHELL, ELIZABETH, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5300 N OSCEOLA AVE.
 City CHICAGO State IL Zip Code 60656-1720
 FEC ID number of contributing 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 : SA11A.12163
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. PODESLA, MARK, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 QUEENS PEAK
 City CANTON State CT Zip Code 06019-2609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 28 / 2020
Transaction ID : SA11A.12806
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

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 24 OF 35
	<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)
Great America Committee

A. SCOTT, BEVERLY, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15437 SW 114TH CT. UNIT 91

City PORTLAND	State OR	Zip Code 97224-3985
------------------	-------------	------------------------

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

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 08 / 28 / 2020
Transaction ID : SA11A.12396

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

B. SORENSON, FRANCES, F., MISS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4681 RUE BELLE MER

City SANIBEL	State FL	Zip Code 33957-2707
-----------------	-------------	------------------------

FEC ID number of contributing 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 / 28 / 2020
Transaction ID : SA11A.12382

Amount of Each Receipt this Period
275.00

Memo Item
CONTRIBUTION

C. VICK, JOHN, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6300 E SPEEDWAY BLVD. APT. 1109

City TUCSON	State AZ	Zip Code 85710-1152
----------------	-------------	------------------------

FEC ID number of contributing 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 : SA11A.12386

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1525.00
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 25 OF 35
	<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)
Great America Committee

A. DYKHOUSE, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 270 FARMSTEAD HILL ROAD
 City FAIRFIELD State CT Zip Code 06824-7119
 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 ▼ 5000.00

Date of Receipt **08 / 31 / 2020**
Transaction ID : SA11A.10312
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. DYKHOUSE, RICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 270 FARMSTEAD HILL ROAD
 City FAIRFIELD State CT Zip Code 06824-7119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **CHARTER COMMUNICATIONS** Occupation (for Individual) **ATTORNEY**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **08 / 31 / 2020**
Transaction ID : SA11A.10311
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. FLOYD, DANE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10363 CHESTNUT LANE
 City COLUMBUS State IN Zip Code 47201-8007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **VENEER SERVICES** Occupation (for Individual) **CEO**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **08 / 31 / 2020**
Transaction ID : SA11A.10301
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	11000.00
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 35
(check only one)

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

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NAME OF COMMITTEE (In Full)
Great America Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. MCNAMARA, DANIEL, , ,

Mailing Address **916 RAIL COURT**

City MC LEAN	State VA	Zip Code 22102-1312
------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) A10 ASSOCIATES	Occupation (for Individual) ATTORNEY/CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
08 / 31 / 2020

Transaction ID : SA11A.10304

Amount of Each Receipt this Period
5000.00

Memo Item CONTRIBUTION

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

Mailing Address **775 ADAMS RD**

City LOVELAND	State OH	Zip Code 45140-7241
-------------------------	--------------------	-------------------------------

FEC ID number of contributing 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 : SA11A.10302

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	5500.00
TOTAL This Period (last page this line number only).....	71625.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Great America Committee

Full Name (Last, First, Middle Initial) A. CHAIN BRIDGE BANK, NA		Date of Disbursement MM / DD / YYYY 08 / 03 / 2020
Mailing Address 1445-A LAUGHLIN AVE		FEC Identification Number C [] Transaction ID : SB21B003
City MCLEAN	State VA	Zip Code 22101
Purpose of Disbursement BANK FEE		Amount of Each Disbursement this Period [] 20.00
Candidate Name		Category/ Type
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. GOOGLE, INC.		Date of Disbursement MM / DD / YYYY 08 / 03 / 2020
Mailing Address 1600 AMPHITHEATRE PARKWAY		FEC Identification Number C [] Transaction ID : SB21B004
City MOUNTAIN VIEW	State CA	Zip Code 94043
Purpose of Disbursement WEB SERVICES		Amount of Each Disbursement this Period [] 310.67
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. STRIPE, INC.		Date of Disbursement MM / DD / YYYY 08 / 03 / 2020
Mailing Address 185 BERRY STREET, SUITE 550		FEC Identification Number C [] Transaction ID : SB21B018
City SAN FRANCISCO	State CA	Zip Code 94107
Purpose of Disbursement CREDIT CARD PROCESSING FEES		Amount of Each Disbursement this Period [] 639.45
Candidate Name		Category/ Type
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)..... ▶

970.12

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)
Great America Committee

Full Name (Last, First, Middle Initial) A. THE MAIL HAUS, INC.		Date of Disbursement MM / DD / YYYY 08 / 03 / 2020
Mailing Address 1745 SUBURBAN DRIVE		FEC Identification Number C Transaction ID : SB21B001 Amount of Each Disbursement this Period 1876.00
City DE PERE	State WI	
Zip Code 54115	Purpose of Disbursement POSTAGE	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
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. THE MAIL HAUS, INC.		Date of Disbursement MM / DD / YYYY 08 / 03 / 2020
Mailing Address 1745 SUBURBAN DRIVE		FEC Identification Number C Transaction ID : SB21B002 Amount of Each Disbursement this Period 21667.75
City DE PERE	State WI	
Zip Code 54115	Purpose of Disbursement POSTAGE	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. GRANT & EISENHOFER, P.A.		Date of Disbursement MM / DD / YYYY 08 / 06 / 2020
Mailing Address 123 JUSTISON STREET		FEC Identification Number C Transaction ID : SB21B005 Amount of Each Disbursement this Period 7035.45
City WILMINGTON	State DE	
Zip Code 19801	Purpose of Disbursement RENT	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
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)..... ▶

30579.20

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)
Great America Committee

Full Name (Last, First, Middle Initial)

A. INTUIT

Mailing Address 2700 COAST AVE

City
MOUNTAIN VIEW

State
CA

Zip Code
94043

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 11 / 2020

FEC Identification Number

C

Transaction ID : SB21B006

Amount of Each Disbursement this Period

135.03

Memo Item

Full Name (Last, First, Middle Initial)

B. INTUIT

Mailing Address 2700 COAST AVE

City
MOUNTAIN VIEW

State
CA

Zip Code
94043

Purpose of Disbursement
SUBSCRIPTION

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B007

Amount of Each Disbursement this Period

74.20

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT, INC.

Mailing Address 1920 MCKINNEY AVE, 7TH FLR

City
DALLAS

State
TX

Zip Code
75201

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 25 / 2020

FEC Identification Number

C

Transaction ID : SB21B019

Amount of Each Disbursement this Period

145.50

Memo Item

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

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

354.73

**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)
Great America Committee

A. CMDI

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement DATABASE MANAGEMENT

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 26 / 2020

FEC Identification Number: C

Transaction ID : SB21B008

Amount of Each Disbursement this Period: 500.00

Memo Item

B. CHAIN BRIDGE BANK, NA

Full Name (Last, First, Middle Initial)

Mailing Address 1445-A LAUGHLIN AVE

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement BANK FEE

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 : SB21B020

Amount of Each Disbursement this Period: 12.00

Memo Item

C. CHAIN BRIDGE BANK, NA

Full Name (Last, First, Middle Initial)

Mailing Address 1445-A LAUGHLIN AVE

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement BANK FEE

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 : SB21B021

Amount of Each Disbursement this Period: 762.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1274.00

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)
Great America Committee

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement
PO BOX RENTAL

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

C
Transaction ID : **SB21B012**
Amount of Each Disbursement this Period
1310.00

Memo Item

Full Name (Last, First, Middle Initial)

B. ELECTIONS, LLC

Mailing Address 1000 MAINE AVE., SW, 4TH FLR

City WASHINGTON State DC Zip Code 20024

Purpose of Disbursement
LEGAL CONSULTING

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

C
Transaction ID : **SB21B011**
Amount of Each Disbursement this Period
6000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. FIRST BANKCARD

Mailing Address PO BOX 2818

City OMAHA State NE Zip Code 68103-2818

Purpose of Disbursement
CREDIT CARD PAYMENT - SEE ITEMIZATION BELOW

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

C
Transaction ID : **SB21B009**
Amount of Each Disbursement this Period
6539.36

Memo Item

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

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

13849.36

**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)
Great America Committee

Full Name (Last, First, Middle Initial)

A. APPLE, INC.

Mailing Address 1 INFINITE LOOP

City CUPERTINO State CA Zip Code 95014

Purpose of Disbursement
COMPUTER EQUIPMENT

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 08 / 2020

FEC Identification Number

C
Transaction ID : SB21B009.02
Amount of Each Disbursement this Period
5889.36

Memo Item

Full Name (Last, First, Middle Initial)

B. ONE PARKING INC.

Mailing Address 1747 PENNSYLVANIA AVE. NW

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement
PARKING

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 01 / 2020

FEC Identification Number

C
Transaction ID : SB21B009.01
Amount of Each Disbursement this Period
620.00

Memo Item

Full Name (Last, First, Middle Initial)

C. FIRST BANKCARD

Mailing Address PO BOX 2818

City OMAHA State NE Zip Code 68103-2818

Purpose of Disbursement
CREDIT CARD PAYMENT - SHIPPING

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2020

FEC Identification Number

C
Transaction ID : SB21B010
Amount of Each Disbursement this Period
39.68

Memo Item

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

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

39.68

**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)
Great America Committee

Full Name (Last, First, Middle Initial) A. GREEN MONSTER CONSULTING, LLC		Date of Disbursement MM / DD / YYYY 08 / 31 / 2020
Mailing Address PO BOX 1492		FEC Identification Number C [] Transaction ID : SB21B015 Amount of Each Disbursement this Period [] 10000.00
City SALEM	State NH	Zip Code 03079
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. MAPLE CREEK CONSULTING, LLC		Date of Disbursement MM / DD / YYYY 08 / 31 / 2020
Mailing Address 811 8TH ST, NE, #1		FEC Identification Number C [] Transaction ID : SB21B016 Amount of Each Disbursement this Period [] 20000.00
City WASHINGTON	State DC	Zip Code 20002
Purpose of Disbursement FINANCE CONSULTING		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. MO STRATEGIES, INC.		Date of Disbursement MM / DD / YYYY 08 / 31 / 2020
Mailing Address PO BOX 4		FEC Identification Number C [] Transaction ID : SB21B014 Amount of Each Disbursement this Period [] 12500.00
City WESTFIELD	State IN	Zip Code 46074
Purpose of Disbursement EXECUTIVE AND FINANCE CONSULTING		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 42500.00
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Great America Committee

A. RIGHTSIDE COMPLIANCE LLC

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 341027

City AUSTIN State TX Zip Code 78734

Purpose of Disbursement COMPLIANCE CONSULTING

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 : SB21B013

Amount of Each Disbursement this Period: 4500.00

Memo Item

B. THE LUKENS COMPANY

Full Name (Last, First, Middle Initial)

Mailing Address 2800 SHIRLINGTON RD, SUITE 900

City ARLINGTON State VA Zip Code 22206

Purpose of Disbursement PRINTING

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 : SB21B017

Amount of Each Disbursement this Period: 37017.14

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

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	41517.14
TOTAL This Period (last page this line number only).....▶	131084.23

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 35 OF 35
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)
Great America Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor GREEN MONSTER CONSULTING, LLC			Nature of Debt (Purpose): POLITICAL STRATEGY CONSULTING
Mailing Address PO BOX 1492			
City SALEM	State NH	Zip Code 03079	

Outstanding Balance Beginning This Period 10000.00	Transaction ID : SCHD002	
Amount Incurred This Period 0.00	Payment This Period 10000.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor MAPLE CREEK CONSULTING, LLC			Nature of Debt (Purpose): FINANCE CONSULTING
Mailing Address 811 8TH ST, NE, #1			
City WASHINGTON	State DC	Zip Code 20002	

Outstanding Balance Beginning This Period 20000.00	Transaction ID : SCHD003	
Amount Incurred This Period 0.00	Payment This Period 20000.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor MO STRATEGIES, INC.			Nature of Debt (Purpose): EXECUTIVE AND FINANCE CONSULTING
Mailing Address PO BOX 4			
City WESTFIELD	State IN	Zip Code 46074	

Outstanding Balance Beginning This Period 25000.00	Transaction ID : SCHD001	
Amount Incurred This Period 0.00	Payment This Period 12500.00	Outstanding Balance at Close of This Period 12500.00

1) SUBTOTALS This Period This Page (optional)..... ▶	12500.00
2) TOTALS This Period (last page this line number only)..... ▶	12500.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	12500.00