

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**
OPPORTUNITY MATTERS FUND, INC.

ADDRESS (number and street) **C/O BULLDOG COMPLIANCE**
138 CONANT STREET 2ND FLR
 Check if different than previously reported. (ACC) **BEVERLY MA 01915**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00750182 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 / / 2021 through / / 2021

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

Signature of Treasurer **GANTT, CHARLES, , ,** [Electronically Filed] Date / / 2021

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

OPPORTUNITY MATTERS FUND, 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="2021"/>		2708488.07
(b) Cash on Hand at Beginning of Reporting Period.....	2543864.07	
(c) Total Receipts (from Line 19)	5428117.93	5429117.93
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	7971982.00	8137606.00
7. Total Disbursements (from Line 31).....	355249.70	520873.70
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	7616732.30	7616732.30
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

OPPORTUNITY MATTERS FUND, INC.

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
01 / 26 / 2021 To: M M / D D / Y Y Y Y Y Y
06 / 30 / 2021

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).....	5426092.93	5427092.93
(ii) Unitemized	25.00	25.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	5426117.93	5427117.93
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	2000.00	2000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	5428117.93	5429117.93
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).....	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)).....▶	5428117.93	5429117.93
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	5428117.93	5429117.93

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	340249.70	410873.70
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	340249.70	410873.70
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	95000.00
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).....	15000.00	15000.00
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)) ..	355249.70	520873.70
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	355249.70	520873.70

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	5428117.93	5429117.93
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5428117.93	5429117.93
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	340249.70	410873.70
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	340249.70	410873.70

**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)
OPPORTUNITY MATTERS FUND, INC.

A. BERKOWITZ, BRUCE, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 TAHITI BEACH ISLAND RD
 City CORAL GABLES State FL Zip Code 33143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 FAIRHOLME CAPITAL MANAGEMENT INVESTMENT ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 16 / 2021
Transaction ID : SA11AI.5276
 Amount of Each Receipt this Period
 10000.00
 Memo Item

B. BREWSTER/JORY ASSOCIATES, LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 499 S CAPITOL STREET SW STE 608
 City WASHINGTON State DC Zip Code 20003-4049
 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 ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 12 / 2021
Transaction ID : SA11AI.5263
 Amount of Each Receipt this Period
 2500.00
 Memo Item

C. C-30A, LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13123 E EMERALD COAST PKWY STE B
 City INLET BEACH State FL Zip Code 32413
 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 ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 12 / 2021
Transaction ID : SA11AI.5255
 Amount of Each Receipt this Period
 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	13500.00
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"/> 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)
OPPORTUNITY MATTERS FUND, INC.

A. CAMERON, RONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 21440
 City LITTLE ROCK State AR Zip Code 72221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MOUNTAIRE CORP Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt **04 / 13 / 2021**
Transaction ID : SA11AI.5274
 Amount of Each Receipt this Period 50000.00
 Memo Item

B. DISERNIA, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3605 DELWOOD DR
 City PANAMA CITY BEACH State FL Zip Code 32408-7404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt **04 / 12 / 2021**
Transaction ID : SA11AI.5273
 Amount of Each Receipt this Period 3000.00
 Memo Item

C. ELLISON, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 YGNACIO VALLEY RD SUITE 320
 City WALNUT CREEK State CA Zip Code 94596-4087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ORACLE CORPORATION Occupation (for Individual) EXECUTIVE CHAIRMAN AND CTO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1342.93

Date of Receipt **04 / 07 / 2021**
Transaction ID : SA11AI.5292
 Amount of Each Receipt this Period 1342.93
 Memo Item
 IN-KIND - TRAVEL: LODGING

SUBTOTAL of Receipts This Page (optional)..... ▶ 54342.93
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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
OPPORTUNITY MATTERS FUND, INC.

A. ELLISON, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 YGNACIO VALLEY RD
 SUITE 320
 City WALNUT CREEK State CA Zip Code 94596-4087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ORACLE CORPORATION Occupation (for Individual) EXECUTIVE CHAIRMAN AND CTO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5001342.93

Date of Receipt 06 / 25 / 2021
Transaction ID : SA11AI.5283
 Amount of Each Receipt this Period 5000000.00
 Memo Item

B. FRH HOLDINGS, LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 1380
 City SANTA ROSA BEACH State FL Zip Code 32459
 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 ▼ 3000.00

Date of Receipt 04 / 12 / 2021
Transaction ID : SA11AI.5259
 Amount of Each Receipt this Period 3000.00
 Memo Item

C. GONZALEZ, JORGE, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 19983
 City PANAMA CITY BEACH State FL Zip Code 32417
 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 ▼ 3000.00

Date of Receipt 04 / 12 / 2021
Transaction ID : SA11AI.5261
 Amount of Each Receipt this Period 3000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	5006000.00
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 9 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)
OPPORTUNITY MATTERS FUND, INC.

A. HOBSON, H, LEE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4237 ARMSTRONG PKWY
 City DALLAS State TX Zip Code 75205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HIGHSIDE CAPITAL MANAGEMENT Occupation (for Individual) MANAGING PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 06 / 30 / 2021
Transaction ID : SA11AI.5285
 Amount of Each Receipt this Period 50000.00
 Memo Item

B. INLET BEACH COMMONS, LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13123 E EMERALD COAST PKWY STE B
 City INLET BEACH State FL Zip Code 32413
 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 ▼ 1000.00

Date of Receipt 04 / 12 / 2021
Transaction ID : SA11AI.5253
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. JOHNSTON, KELLY, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 121
 City NEWTOWN SQUARE State PA Zip Code 19073
 FEC ID number of contributing 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 04 / 02 / 2021
Transaction ID : SA11AI.5250
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	51500.00
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"/> 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)
OPPORTUNITY MATTERS FUND, INC.

A. WINRED

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

Mailing Address PO BOX 9891

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2402.30

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		02		2021

Transaction ID : SA11AI.5250.0

Amount of Each Receipt this Period
480.70

Memo Item
EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

B. KEISER, MICHAEL, L, ,

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

Mailing Address 2450 N LAKEVIEW AVE

City CHICAGO	State IL	Zip Code 60614
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)
BDGR INC BUSINESS

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
05		17		2021

Transaction ID : SA11AI.5278

Amount of Each Receipt this Period
1000.00

Memo Item

C. KIRTLEY, JOHN, FOSTER, ,

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

Mailing Address 511 W BAY ST #363

City TAMPA	State FL	Zip Code 33606
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)
J+J INVESTMENT VENTURES LLC PARTNER

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		22		2021

Transaction ID : SA11AI.5245

Amount of Each Receipt this Period
10000.00

Memo Item

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 11 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)
OPPORTUNITY MATTERS FUND, INC.

A. NEUBAUER, MARGARET, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 608 SHORELINE DR
 City PANAMA CITY State FL Zip Code 32404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ERA NEUBAUER Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 04 / 12 / 2021
Transaction ID : SA11AI.5271
 Amount of Each Receipt this Period 1500.00
 Memo Item

B. OBERNDORF ENTERPRISES, LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 615 FRONT ST
 City SAN FRANCISCO State CA Zip Code 94111
 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 ▼ 100000.00

Date of Receipt 03 / 09 / 2021
Transaction ID : SA11AI.5247
 Amount of Each Receipt this Period 100000.00
 Memo Item

C. PRENGER, JEANETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1601 IRON ST STE 200
 City KANSAS CITY State MO Zip Code 64116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ECCO SELECT Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 01 / 26 / 2021
Transaction ID : SA11AI.5238
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 101750.00
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"/> 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)
OPPORTUNITY MATTERS FUND, INC.

A. WINRED

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

Mailing Address PO BOX 9891

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1201.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	26	/	2021

Transaction ID : SA11AI.5238.0

Amount of Each Receipt this Period
240.20

Memo Item
EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

B. PRENGER, JEANETTE, , ,

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

Mailing Address 1601 IRON ST STE 200

City KANSAS CITY	State MO	Zip Code 64116
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)
ECCO SELECT EXECUTIVE

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
02	/	02	/	2021

Transaction ID : SA11AI.5239

Amount of Each Receipt this Period
250.00

Memo Item
EARMARKED THROUGH WINRED

C. WINRED

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

Mailing Address PO BOX 9891

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1441.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	02	/	2021

Transaction ID : SA11AI.5239.0

Amount of Each Receipt this Period
240.20

Memo Item
EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

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:	PAGE 13 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

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)
OPPORTUNITY MATTERS FUND, INC.

A. PRENGER, JEANETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1601 IRON ST
 STE 200
 City KANSAS CITY State MO Zip Code 64116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ECCO SELECT Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1750.00**

Date of Receipt **02 / 18 / 2021**
Transaction ID : SA11AI.5243
 Amount of Each Receipt this Period **250.00**
 Memo Item
EARMARKED THROUGH WINRED

B. WINRED
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9891
 City ARLINGTON State VA Zip Code 22219
 FEC ID number of contributing federal political committee. **C** C00694323
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1681.40**

Date of Receipt **02 / 18 / 2021**
Transaction ID : SA11AI.5243.0
 Amount of Each Receipt this Period **240.20**
 Memo Item
EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

C. PRENGER, JEANETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1601 IRON ST
 STE 200
 City KANSAS CITY State MO Zip Code 64116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ECCO SELECT Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2000.00**

Date of Receipt **03 / 18 / 2021**
Transaction ID : SA11AI.5248
 Amount of Each Receipt this Period **250.00**
 Memo Item
EARMARKED THROUGH WINRED

SUBTOTAL of Receipts This Page (optional).....	500.00
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 14 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)
OPPORTUNITY MATTERS FUND, INC.

A. WINRED

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

Mailing Address PO BOX 9891

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1921.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 18 / 2021

Transaction ID : SA11AI.5248.0

Amount of Each Receipt this Period
240.20

Memo Item
 EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

B. PRENGER, JEANETTE, , ,

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

Mailing Address 1601 IRON ST STE 200

City KANSAS CITY	State MO	Zip Code 64116
---------------------	-------------	-------------------

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

Name of Employer (for Individual) ECCO SELECT	Occupation (for Individual) EXECUTIVE
--	--

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
 04 / 18 / 2021

Transaction ID : SA11AI.5277

Amount of Each Receipt this Period
250.00

Memo Item

C. WINRED

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

Mailing Address PO BOX 9891

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2642.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 18 / 2021

Transaction ID : SA11AI.5277.0

Amount of Each Receipt this Period
240.20

Memo Item
 EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

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 15 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)
OPPORTUNITY MATTERS FUND, INC.

A. PRENGER, JEANETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1601 IRON ST
STE 200

City KANSAS CITY State MO Zip Code 64116

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

Name of Employer (for Individual) ECCO SELECT Occupation (for Individual) EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 18 / 2021

Transaction ID : SA11AI.5279

Amount of Each Receipt this Period
250.00

Memo Item
EARMARKED THROUGH WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2882.70

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 18 / 2021

Transaction ID : SA11AI.5279.0

Amount of Each Receipt this Period
240.20

Memo Item
EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

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

Mailing Address 1601 IRON ST
STE 200

City KANSAS CITY State MO Zip Code 64116

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

Name of Employer (for Individual) ECCO SELECT Occupation (for Individual) EXECUTIVE

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 18 / 2021

Transaction ID : SA11AI.5282

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED 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"/> 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)
OPPORTUNITY MATTERS FUND, INC.

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

Mailing Address PO BOX 9891

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3122.90

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 18 / 2021

Transaction ID : SA11AI.5282.0

Amount of Each Receipt this Period
240.20

Memo Item
EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

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

Mailing Address 9 W 57TH ST

City NEW YORK	State NY	Zip Code 10019
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)
APOLLO GLOBAL MANAGEMENT CO-FOUNDER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
150000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
02 / 11 / 2021

Transaction ID : SA11AI.5240

Amount of Each Receipt this Period
150000.00

Memo Item

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

Mailing Address 13123 E EMERALD COAST PKWY

City INLET BEACH	State FL	Zip Code 32461
---------------------	-------------	-------------------

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 ▼
1000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 12 / 2021

Transaction ID : SA11AI.5257

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	151000.00
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"/> 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)
OPPORTUNITY MATTERS FUND, INC.

A. SOUTHERLAND, WILLIAM, STEVE, , II
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 E 19TH ST

City PANAMA CITY	State FL	Zip Code 32405
---------------------	-------------	-------------------

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 ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		12		2021

Transaction ID : SA11AI.5265

Amount of Each Receipt this Period
2500.00

Memo Item

B. THE ST JOE COMPANY
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 130 RICHARD JACKSON BLVD

City PANAMA CITY BEACH	State FL	Zip Code 32407
---------------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		12		2021

Transaction ID : SA11AI.5289

Amount of Each Receipt this Period
3000.00

Memo Item

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

Mailing Address 10595 STRAIT LN

City DALLAS	State TX	Zip Code 75229
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
25000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		01		2021

Transaction ID : SA11AI.5281

Amount of Each Receipt this Period
25000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	30500.00
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"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
OPPORTUNITY MATTERS FUND, INC.

A. TRUMBULL BOTTLED WATER INC

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

Mailing Address 315 E 15TH ST

City PANAMA CITY	State FL	Zip Code 32405-5408
---------------------	-------------	------------------------

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 ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	12	/	2021

Transaction ID : SA11AI.5267

Amount of Each Receipt this Period
2500.00

Memo Item

B. TRUMBULL WATER SERVICES OF NW FLORIDA

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

Mailing Address 315 E 15TH ST

City PANAMA CITY	State FL	Zip Code 32405-5408
---------------------	-------------	------------------------

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 ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	12	/	2021

Transaction ID : SA11AI.5269

Amount of Each Receipt this Period
2500.00

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	5426092.93

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

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

FOR LINE NUMBER: PAGE 19 OF 35
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
OPPORTUNITY MATTERS FUND, INC.

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
AMERICAN VICTORY PAC

Mailing Address 502 MONROE STREET

City NEWPORT State KY Zip Code 41071

FEC ID number of contributing federal political committee. **C** C00491183

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 12 / 2021

Transaction ID : SA11C.5367

Amount of Each Receipt this Period
 2000.00

Memo Item

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

Mailing Address

City State Zip Code

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	2000.00
TOTAL This Period (last page this line number only).....▶	2000.00

**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)
OPPORTUNITY MATTERS FUND, INC.

Full Name (Last, First, Middle Initial) A. ADVANCED AVIATION TEAM		Date of Disbursement MM / DD / YYYY 03 / 18 / 2021
Mailing Address 4201 WILSON BLVD 3RD FLOOR		FEC Identification Number C [REDACTED] Transaction ID : SB21B.5306 Amount of Each Disbursement this Period [REDACTED] 16566.45
City ARLINGTON	State VA	Zip Code 22203
Purpose of Disbursement TRAVEL: AIR		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. ALASKA AIRLINES		Date of Disbursement MM / DD / YYYY 03 / 25 / 2021
Mailing Address P.O. BOX 68900		FEC Identification Number C [REDACTED] Transaction ID : SB21B.5320 Amount of Each Disbursement this Period [REDACTED] 659.00
City SEATTLE	State WA	Zip Code 98168
Purpose of Disbursement TRAVEL: AIR		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 03 / 08 / 2021
Mailing Address 1 SKYVIEW DR		FEC Identification Number C [REDACTED] Transaction ID : SB21B.5303 Amount of Each Disbursement this Period [REDACTED] 1063.31
City FORT WORTH	State TX	Zip Code 76155
Purpose of Disbursement TRAVEL: AIR		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 18288.76
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
OPPORTUNITY MATTERS FUND, INC.

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 04 / 09 / 2021
Mailing Address 1 SKYVIEW DR		FEC Identification Number C Transaction ID : SB21B.5328 Amount of Each Disbursement this Period 58.04
City FORT WORTH	State TX	
Zip Code 76155	Purpose of Disbursement TRAVEL: AIR	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. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 04 / 09 / 2021
Mailing Address 1 SKYVIEW DR		FEC Identification Number C Transaction ID : SB21B.5329 Amount of Each Disbursement this Period 730.66
City FORT WORTH	State TX	
Zip Code 76155	Purpose of Disbursement TRAVEL: AIR	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. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 04 / 21 / 2021
Mailing Address 1445-A LAUGHLIN AVE		FEC Identification Number C Transaction ID : SB21B.5334 Amount of Each Disbursement this Period 25.00
City MCLEAN	State VA	
Zip Code 22101	Purpose of Disbursement BANK FEE	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).....▶	813.70
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)
OPPORTUNITY MATTERS FUND, INC.

Full Name (Last, First, Middle Initial) A. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 05 / 06 / 2021	
Mailing Address 1445-A LAUGHLIN AVE		FEC Identification Number C [] Transaction ID : SB21B.5337 Amount of Each Disbursement this Period [] 25.00	
City MCLEAN	State VA	Zip Code 22101	Category/ Type []
Purpose of Disbursement BANK FEE		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. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 05 / 06 / 2021	
Mailing Address 1445-A LAUGHLIN AVE		FEC Identification Number C [] Transaction ID : SB21B.5338 Amount of Each Disbursement this Period [] 25.00	
City MCLEAN	State VA	Zip Code 22101	Category/ Type []
Purpose of Disbursement BANK FEE		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. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 05 / 13 / 2021	
Mailing Address 1445-A LAUGHLIN AVE		FEC Identification Number C [] Transaction ID : SB21B.5344 Amount of Each Disbursement this Period [] 25.00	
City MCLEAN	State VA	Zip Code 22101	Category/ Type []
Purpose of Disbursement BANK FEE		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).....▶	[] 75.00
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)
OPPORTUNITY MATTERS FUND, INC.

Full Name (Last, First, Middle Initial) A. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 05 / 14 / 2021	
Mailing Address 1445-A LAUGHLIN AVE		FEC Identification Number C [] Transaction ID : SB21B.5348	
City MCLEAN	State VA	Zip Code 22101	Amount of Each Disbursement this Period [] 25.00
Purpose of Disbursement BANK FEE		Category/ Type []	Memo Item <input type="checkbox"/>
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. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 05 / 18 / 2021	
Mailing Address 1445-A LAUGHLIN AVE		FEC Identification Number C [] Transaction ID : SB21B.5354	
City MCLEAN	State VA	Zip Code 22101	Amount of Each Disbursement this Period [] 25.00
Purpose of Disbursement BANK FEE		Category/ Type []	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 06 / 15 / 2021	
Mailing Address 1445-A LAUGHLIN AVE		FEC Identification Number C [] Transaction ID : SB21B.5361	
City MCLEAN	State VA	Zip Code 22101	Amount of Each Disbursement this Period [] 25.00
Purpose of Disbursement BANK FEE		Category/ Type []	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 75.00
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)
OPPORTUNITY MATTERS FUND, INC.

Full Name (Last, First, Middle Initial) A. CHAIN BRIDGE BANK, N.A.		Date of Disbursement MM / DD / YYYY 06 / 22 / 2021
Mailing Address 1445-A LAUGHLIN AVE		FEC Identification Number C [REDACTED] Transaction ID : SB21B.5363
City MCLEAN	State VA	Zip Code 22101
Purpose of Disbursement BANK FEE		Amount of Each Disbursement this Period [REDACTED] 25.00
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. DELVE LLC		Date of Disbursement MM / DD / YYYY 05 / 06 / 2021
Mailing Address 1146 19TH STREET NW STE 200		FEC Identification Number C [REDACTED] Transaction ID : SB21B.5340
City WASHINGTON	State DC	Zip Code 20036
Purpose of Disbursement RESEARCH CONSULTING		Amount of Each Disbursement this Period [REDACTED] 7500.00
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) C. DELVE LLC		Date of Disbursement MM / DD / YYYY 05 / 06 / 2021
Mailing Address 1146 19TH STREET NW STE 200		FEC Identification Number C [REDACTED] Transaction ID : SB21B.5341
City WASHINGTON	State DC	Zip Code 20036
Purpose of Disbursement RESEARCH CONSULTING		Amount of Each Disbursement this Period [REDACTED] 7500.00
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

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 15025.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
OPPORTUNITY MATTERS FUND, INC.

A. DELVE LLC

Full Name (Last, First, Middle Initial)

Mailing Address 1146 19TH STREET NW
STE 200

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement RESEARCH CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 13 / 2021

FEC Identification Number: C

Transaction ID : SB21B.5345

Amount of Each Disbursement this Period: 7500.00

Memo Item

B. DICKINSON WRIGHT PLLC

Full Name (Last, First, Middle Initial)

Mailing Address 1825 EYE ST NW
STE 900

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement LEGAL CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
02 / 02 / 2021

FEC Identification Number: C

Transaction ID : SB21B.5296

Amount of Each Disbursement this Period: 5532.50

Memo Item

C. DICKINSON WRIGHT PLLC

Full Name (Last, First, Middle Initial)

Mailing Address 1825 EYE ST NW
STE 900

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement LEGAL CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 06 / 2021

FEC Identification Number: C

Transaction ID : SB21B.5342

Amount of Each Disbursement this Period: 10803.25

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 23835.75

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)
OPPORTUNITY MATTERS FUND, INC.

Full Name (Last, First, Middle Initial) A. ELLISON, LAWRENCE, , ,		Date of Disbursement MM / DD / YYYY 04 / 07 / 2021
Mailing Address 101 YGNACIO VALLEY RD SUITE 320		FEC Identification Number C [] Transaction ID : SB21B.5293 Amount of Each Disbursement this Period [] 1342.93
City WALNUT CREEK	State CA	Zip Code 94596-4087
Purpose of Disbursement IN-KIND - TRAVEL: LODGING		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. FOUR SEASONS LANAI CITY HI		Date of Disbursement MM / DD / YYYY 05 / 13 / 2021
Mailing Address ONE KEOMOKU HIGHWAY		FEC Identification Number C [] Transaction ID : SB21B.5347 Amount of Each Disbursement this Period [] 1230.72
City LANAI CITY	State HI	Zip Code 96763
Purpose of Disbursement TRAVEL: LODGING		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. GRAND HYATT DFW		Date of Disbursement MM / DD / YYYY 04 / 12 / 2021
Mailing Address 2337 S INTERNATIONAL PKWY		FEC Identification Number C [] Transaction ID : SB21B.5331 Amount of Each Disbursement this Period [] 291.87
City DALLAS	State TX	Zip Code 75261
Purpose of Disbursement TRAVEL: LODGING		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)..... ▶

2865.52

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)
OPPORTUNITY MATTERS FUND, INC.

Full Name (Last, First, Middle Initial) A. HAWAIIAN AIRLINES		Date of Disbursement MM / DD / YYYY 03 / 08 / 2021	
Mailing Address P.O. BOX 30008		FEC Identification Number C [REDACTED] Transaction ID : SB21B.5304 Amount of Each Disbursement this Period [REDACTED] 1950.58	
City HONOLULU	State HI	Zip Code 96820	Category/ Type [REDACTED]
Purpose of Disbursement TRAVEL: AIR		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. HAWAIIAN AIRLINES		Date of Disbursement MM / DD / YYYY 03 / 18 / 2021	
Mailing Address P.O. BOX 30008		FEC Identification Number C [REDACTED] Transaction ID : SB21B.5308 Amount of Each Disbursement this Period [REDACTED] 808.00	
City HONOLULU	State HI	Zip Code 96820	Category/ Type [REDACTED]
Purpose of Disbursement TRAVEL: AIR		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. HAWAIIAN AIRLINES		Date of Disbursement MM / DD / YYYY 03 / 31 / 2021	
Mailing Address P.O. BOX 30008		FEC Identification Number C [REDACTED] Transaction ID : SB21B.5323 Amount of Each Disbursement this Period [REDACTED] 80.00	
City HONOLULU	State HI	Zip Code 96820	Category/ Type [REDACTED]
Purpose of Disbursement TRAVEL: AIR		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

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

[REDACTED] 2838.58

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

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
OPPORTUNITY MATTERS FUND, INC.

A. HAWAIIAN AIRLINES

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 30008

City HONOLULU State HI Zip Code 96820

Purpose of Disbursement TRAVEL: AIR

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 05 / 2021

FEC Identification Number: C

Transaction ID : SB21B.5324

Amount of Each Disbursement this Period: 30.00

Memo Item

B. HIGHWOOD CAPITAL, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 1724 20TH ST NW STE 102

City WASHINGTON State DC Zip Code 20009

Purpose of Disbursement FUNDRAISING CONSULTANT

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 18 / 2021

FEC Identification Number: C

Transaction ID : SB21B.5310

Amount of Each Disbursement this Period: 11000.00

Memo Item

C. LANAI EXPEDITIONS

Full Name (Last, First, Middle Initial)

Mailing Address 658 FRONT ST STE 127

City LAHAINA State HI Zip Code 96761

Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 24 / 2021

FEC Identification Number: C

Transaction ID : SB21B.5314

Amount of Each Disbursement this Period: 240.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 11270.00

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)
OPPORTUNITY MATTERS FUND, INC.

Full Name (Last, First, Middle Initial) A. LANAI EXPEDITIONS		Date of Disbursement MM / DD / YYYY 03 / 24 / 2021
Mailing Address 658 FRONT ST STE 127		FEC Identification Number C [] Transaction ID : SB21B.5315 Amount of Each Disbursement this Period [] 360.00
City LAHAINA	State HI	Zip Code 96761
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		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. LANAI EXPEDITIONS		Date of Disbursement MM / DD / YYYY 03 / 24 / 2021
Mailing Address 658 FRONT ST STE 127		FEC Identification Number C [] Transaction ID : SB21B.5316 Amount of Each Disbursement this Period [] 360.00
City LAHAINA	State HI	Zip Code 96761
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		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. MAJORITY MONEY		Date of Disbursement MM / DD / YYYY 02 / 11 / 2021
Mailing Address 12854 KENAN DRIVE SUITE 145		FEC Identification Number C [] Transaction ID : SB21B.5301 Amount of Each Disbursement this Period [] 8000.00
City JACKSONVILLE	State FL	Zip Code 32258
Purpose of Disbursement FUNDRAISING CONSULTANT		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).....▶	[] 8720.00
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)
OPPORTUNITY MATTERS FUND, INC.

Full Name (Last, First, Middle Initial) A. MAJORITY STRATEGIES, LLC		Date of Disbursement MM / DD / YYYY 03 / 18 / 2021
Mailing Address 12854 KENAN DR STE 145		FEC Identification Number C [] Transaction ID : SB21B.5311 Amount of Each Disbursement this Period [] 376.20
City JACKSONVILLE	State FL	Zip Code 32258
Purpose of Disbursement MEDIA DESIGN		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. MAJORITY STRATEGIES, LLC		Date of Disbursement MM / DD / YYYY 03 / 29 / 2021
Mailing Address 12854 KENAN DR STE 145		FEC Identification Number C [] Transaction ID : SB21B.5322 Amount of Each Disbursement this Period [] 4000.00
City JACKSONVILLE	State FL	Zip Code 32258
Purpose of Disbursement FUNDRAISING CONSULTANT		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. MAJORITY STRATEGIES, LLC		Date of Disbursement MM / DD / YYYY 04 / 21 / 2021
Mailing Address 12854 KENAN DR STE 145		FEC Identification Number C [] Transaction ID : SB21B.5335 Amount of Each Disbursement this Period [] 40000.00
City JACKSONVILLE	State FL	Zip Code 32258
Purpose of Disbursement ONLINE ADVERTISING		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).....▶	[] 44376.20
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)
OPPORTUNITY MATTERS FUND, INC.

Full Name (Last, First, Middle Initial) A. MAJORITY STRATEGIES, LLC		Date of Disbursement MM / DD / YYYY 05 / 06 / 2021
Mailing Address 12854 KENAN DR STE 145		FEC Identification Number C [] Transaction ID : SB21B.5343 Amount of Each Disbursement this Period 15000.00
City JACKSONVILLE	State FL	Zip Code 32258
Purpose of Disbursement ONLINE ADVERTISING		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. MAJORITY STRATEGIES, LLC		Date of Disbursement MM / DD / YYYY 06 / 15 / 2021
Mailing Address 12854 KENAN DR STE 145		FEC Identification Number C [] Transaction ID : SB21B.5362 Amount of Each Disbursement this Period 25000.00
City JACKSONVILLE	State FL	Zip Code 32258
Purpose of Disbursement ONLINE ADVERTISING		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. MARRIOTT IRVINE		Date of Disbursement MM / DD / YYYY 06 / 07 / 2021
Mailing Address 18000 VON KARMAN AVE		FEC Identification Number C [] Transaction ID : SB21B.5360 Amount of Each Disbursement this Period 433.96
City IRVINE	State CA	Zip Code 92612
Purpose of Disbursement TRAVEL: LODGING		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).....▶	40433.96
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)
OPPORTUNITY MATTERS FUND, INC.

Full Name (Last, First, Middle Initial) A. MOUNTAIN TOP ADVISORS, LLC		Date of Disbursement MM / DD / YYYY 05 / 14 / 2021
Mailing Address 1100 NEW JERSEY AVE SE STE 2163		FEC Identification Number C [REDACTED] Transaction ID : SB21B.5349 Amount of Each Disbursement this Period 45700.00
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement DIGITAL 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. MOUNTAIN TOP ADVISORS, LLC		Date of Disbursement MM / DD / YYYY 05 / 14 / 2021
Mailing Address 1100 NEW JERSEY AVE SE STE 2163		FEC Identification Number C [REDACTED] Transaction ID : SB21B.5350 Amount of Each Disbursement this Period 39000.00
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement FUNDRAISING 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. MOUNTAIN TOP ADVISORS, LLC		Date of Disbursement MM / DD / YYYY 05 / 14 / 2021
Mailing Address 1100 NEW JERSEY AVE SE STE 2163		FEC Identification Number C [REDACTED] Transaction ID : SB21B.5351 Amount of Each Disbursement this Period 32500.00
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement STRATEGY AND FUNDRAISING CONSULTANT EXPENSES: TRAVEL: AIR, LODGING AND GROUND TRANSPORTATION		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).....▶	117200.00
TOTAL This Period (last page this line number only).....▶	

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

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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)
OPPORTUNITY MATTERS FUND, INC.

Full Name (Last, First, Middle Initial) A. MOUNTAIN TOP ADVISORS, LLC		Date of Disbursement MM / DD / YYYY 05 / 14 / 2021
Mailing Address 1100 NEW JERSEY AVE SE STE 2163		FEC Identification Number C [REDACTED] Transaction ID : SB21B.5352 Amount of Each Disbursement this Period 18970.00
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement 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. MOUNTAIN TOP ADVISORS, LLC		Date of Disbursement MM / DD / YYYY 05 / 14 / 2021
Mailing Address 1100 NEW JERSEY AVE SE STE 2163		FEC Identification Number C [REDACTED] Transaction ID : SB21B.5353 Amount of Each Disbursement this Period 20625.00
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement WEBSITE DEVELOPMENT		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. NATIONAL AD PLACEMENT		Date of Disbursement MM / DD / YYYY 05 / 18 / 2021
Mailing Address PO BOX 191271		FEC Identification Number C [REDACTED] Transaction ID : SB21B.5355 Amount of Each Disbursement this Period 10000.00
City DALLAS	State TX	Zip Code 75219
Purpose of Disbursement DIGITAL PRODUCTION COSTS		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).....▶	49595.00
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)
OPPORTUNITY MATTERS FUND, INC.

Full Name (Last, First, Middle Initial) A. THE BEVERLY HILTON		Date of Disbursement MM / DD / YYYY 06 / 04 / 2021
Mailing Address 9876 WILSHIRE BLVD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.5358 Amount of Each Disbursement this Period [REDACTED] 541.28
City BEVERLY HILLS	State CA	Zip Code 90210
Purpose of Disbursement TRAVEL: LODGING		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. WATERCOLOR INN RESORT		Date of Disbursement MM / DD / YYYY 03 / 24 / 2021
Mailing Address 25 CENTRAL SQUARE UNIT C-2		FEC Identification Number C [REDACTED] Transaction ID : SB21B.5318 Amount of Each Disbursement this Period [REDACTED] 911.68
City SANTA ROSA BEACH	State FL	Zip Code 32459
Purpose of Disbursement TRAVEL: LODGING		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. WESTIN MAUI RESORT		Date of Disbursement MM / DD / YYYY 04 / 12 / 2021
Mailing Address 2365 KAA NAPALI PKWY		FEC Identification Number C [REDACTED] Transaction ID : SB21B.5333 Amount of Each Disbursement this Period [REDACTED] 3104.43
City LAHAINA	State HI	Zip Code 96761
Purpose of Disbursement TRAVEL: LODGING		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 4557.39
TOTAL This Period (last page this line number only).....▶	[REDACTED] 339969.86

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
OPPORTUNITY MATTERS FUND, INC.

Full Name (Last, First, Middle Initial) A. YOUNG REPUBLICAN NATIONAL FEDERATION, INC.		Date of Disbursement MM / DD / YYYY 06 / 22 / 2021
Mailing Address 11341 JAYNES ST		FEC Identification Number C [] Transaction ID : SB29.5369
City OMAHA	State NE	Zip Code 68164
Purpose of Disbursement CONTRIBUTION		Amount of Each Disbursement this Period 15000.00
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

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

SUBTOTAL of Disbursements This Page (optional).....▶	15000.00
TOTAL This Period (last page this line number only).....▶	15000.00