

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 1820 PAC

ADDRESS (number and street) PO BOX 15283 WASHINGTON DC 20003 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE C C00698126 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X]

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

5. Covering Period 07 / 01 / 2019 through 12 / 31 / 2019

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

Signature of Treasurer DATWYLER, THOMAS, , , [Electronically Filed] Date 01 / 31 / 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)

Page 2

Write or Type Committee Name

1820 PAC

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

|  | COLUMN A<br>This Period                 | COLUMN B<br>Calendar Year-to-Date       |
|--|---|---|
| 6. (a) Cash on Hand<br>January 1, <input type="text" value="2019"/>  | <input type="text" value="0.00"/>       | <input type="text" value="0.00"/>       |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....  | <input type="text" value="749621.39"/>  |   |
| (c) Total Receipts (from Line 19) .....  | <input type="text" value="788000.00"/>  | <input type="text" value="1564000.00"/> |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | <input type="text" value="1537621.39"/> | <input type="text" value="1564000.00"/> |
| 7. Total Disbursements (from Line 31).....   | <input type="text" value="901124.80"/>  | <input type="text" value="927503.41"/>  |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)).....                         | <input type="text" value="636496.59"/>  | <input type="text" value="636496.59"/>  |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | <input type="text" value="0.00"/>       |   |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | <input type="text" value="0.00"/>       |   |

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name  
**1820 PAC**

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

| <b>I. Receipts</b>  | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>Calendar Year-to-Date</b> |
|---|---------------------------------------|---|
| 11. Contributions (other than loans) From:  |                                       |   |
| (a) Individuals/Persons Other Than Political Committees   |                                       |   |
| (i) Itemized (use Schedule A).....  | 733000.00                             | 1509000.00                                |
| (ii) Unitemized .....   | 0.00                                  | 0.00                                      |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶   | 733000.00                             | 1509000.00                                |
| (b) Political Party Committees .....  | 0.00                                  | 0.00                                      |
| (c) Other Political Committees (such as PACs).....  | 55000.00                              | 55000.00                                  |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....  | 788000.00                             | 1564000.00                                |
| 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)).....▶                         | 788000.00                             | 1564000.00                                |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶                                   | 788000.00                             | 1564000.00                                |

**DETAILED SUMMARY PAGE**  
of Disbursements

| II. Disbursements  | COLUMN A<br>Total This Period | COLUMN B<br>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 .....   | 200180.80                     | 226559.41                         |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 200180.80                     | 226559.41                         |
| 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) .....  | 700944.00                     | 700944.00                         |
| 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)) ..      | 901124.80                     | 927503.41                         |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 901124.80                     | 927503.41                         |

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

| <b>III. Net Contributions/<br/>Operating Expenditures</b>                            | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>Calendar Year-to-Date</b> |
|--|---------------------------------------|---|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....        | 788000.00                             | 1564000.00                                |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                            | 0.00                                  | 0.00                                      |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....    | 788000.00                             | 1564000.00                                |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... | 200180.80                             | 226559.41                                 |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                 | 0.00                                  | 0.00                                      |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....              | 200180.80                             | 226559.41                                 |

**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 24  |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 |

|                             |                             |                             |
|-----------------------------|-----------------------------|-----------------------------|
| <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)  
**1820 PAC**

**A. BERG, CARL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 16050 BANDLEY DRIVE  
 City CUPERTINO State CA Zip Code 95014  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) WEST COAST VENTURE CAPITAL Occupation (for Individual) VENTURE CAPITAL  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 30000.00

Date of Receipt **12 / 13 / 2019**  
**Transaction ID : SA11AI.4205**  
 Amount of Each Receipt this Period 30000.00  
 Memo Item CONTRIBUTION

**B. BRADY, KATHERINE D., , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 126  
 City OLDWICK State NJ Zip Code 08858  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt **09 / 03 / 2019**  
**Transaction ID : SA11AI.4152**  
 Amount of Each Receipt this Period 50000.00  
 Memo Item CONTRIBUTION

**C. BRADY, NICHOLAS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 126  
 City OLDWICK State NJ Zip Code 08858  
 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 ▼ 50000.00

Date of Receipt **10 / 09 / 2019**  
**Transaction ID : SA11AI.4170**  
 Amount of Each Receipt this Period 50000.00  
 Memo Item CONTRIBUTION

|   |           |
|---|-----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 130000.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |           |

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

|   |                              |                                   |   |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page |                              | FOR LINE NUMBER: (check only one) | PAGE 7 OF 24  |
| <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)  
**1820 PAC**

|   |  |   |
|---|--|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>A. BROUGHALL, MARGARET, , ,</b>           |  | Date of Receipt<br>M M M / D D D / Y Y Y Y Y Y<br>12 / 31 / 2019            |
| Mailing Address 91 JOHNSON POINT ROAD   |  | <b>Transaction ID : SA11AI.4235</b>   |
| City<br>ORR'S ISLAND  | State<br>ME                            | Zip Code<br>04066   |
| FEC ID number of contributing federal political committee.<br>C   |  | Amount of Each Receipt this Period<br>500.00                                |
| Name of Employer (for Individual)<br>RETIRED  | Occupation (for Individual)<br>RETIRED | <input type="checkbox"/> Memo Item<br>CONTRIBUTION EARMARKED THROUGH WINRED |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>500.00     |   |

|   |   |  |
|---|---|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>B. DAVIS, JAMES, , ,</b>                  |   | Date of Receipt<br>M M M / D D D / Y Y Y Y Y Y<br>11 / 15 / 2019 |
| Mailing Address 100 GUEST STREET  |   | <b>Transaction ID : SA11AI.4185</b>                              |
| City<br>BOSTON  | State<br>MA                             | Zip Code<br>02135  |
| FEC ID number of contributing federal political committee.<br>C   |   | Amount of Each Receipt this Period<br>25000.00                   |
| Name of Employer (for Individual)<br>NEW BALANCE  | Occupation (for Individual)<br>CHAIRMAN | <input type="checkbox"/> Memo Item<br>CONTRIBUTION               |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>25000.00    |  |

|   |                                      |  |
|---|--------------------------------------|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name<br><b>C. FEUNGOLD, JEFFREY, , ,</b>           |                                      | Date of Receipt<br>M M M / D D D / Y Y Y Y Y Y<br>12 / 16 / 2019 |
| Mailing Address 200 WEST CYPRESS CREEK ROAD<br>500  |                                      | <b>Transaction ID : SA11AI.4210</b>                              |
| City<br>FORT LAUDERDALE   | State<br>FL                          | Zip Code<br>33309  |
| FEC ID number of contributing federal political committee.<br>C   |                                      | Amount of Each Receipt this Period<br>10000.00                   |
| Name of Employer (for Individual)<br>MCNA DENTAL  | Occupation (for Individual)<br>CEO   | <input type="checkbox"/> Memo Item<br>CONTRIBUTION               |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼<br>10000.00 |  |

|   |          |
|---|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 35500.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |          |

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

|   |  |   |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)                                      | PAGE 8 OF 24  |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><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)  
**1820 PAC**

**A. GEO ACQUISITION II**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 621 NW 53RD STREET  
 SUITE 700  
 City BOCA RATON State FL Zip Code 33487  
 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 ▼ 12500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 21 / 2019  
**Transaction ID : SA11AI.4144**  
 Amount of Each Receipt this Period  
 12500.00  
 Memo Item  
**CONTRIBUTION**

**B. MCINERNEY, THOMAS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2 MANITOU CT  
 City WESTPORT State CT Zip Code 06880  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 BLUFF POINT ASSOCIATES CORP INVESTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 26 / 2019  
**Transaction ID : SA11AI.4166**  
 Amount of Each Receipt this Period  
 50000.00  
 Memo Item  
**CONTRIBUTION**

**C. NEWSMAX MEDIA**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 750 PARK OF COMMERCE BLVD  
 City BOCA RATON State FL Zip Code 33487  
 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 ▼ 50000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 22 / 2019  
**Transaction ID : SA11AI.4148**  
 Amount of Each Receipt this Period  
 50000.00  
 Memo Item  
**CONTRIBUTION**

|   |           |
|---|-----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 112500.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |           |



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

|   |   |                              |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 9 OF 24                 |
|   | <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)  
**1820 PAC**

**A. SOCIETY OF YOUNG WOMAN SCIENTIST AND ENGINEERS LLC**

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

Mailing Address 335 MERCHANT STREET  
UNIT 2394

City HONOLULU State HI Zip Code 96804

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 ▼  
150000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2019

**Transaction ID : SA11AI.4219**

Amount of Each Receipt this Period  
150000.00

Memo Item  
CONTRIBUTION

**B. STEPHENS, WARREN, A, ,**

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

Mailing Address 111 CENTER STREET

City LITTLE ROCK State AR Zip Code 72201

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

Name of Employer (for Individual) Occupation (for Individual)  
STEPHENS, INC. CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 24 / 2019

**Transaction ID : SA11AI.4176**

Amount of Each Receipt this Period  
250000.00

Memo Item  
CONTRIBUTION

**C. WEISER, RONALD, , ,**

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

Mailing Address 320 N MAIN STREET  
SUITE 200

City ANN ARBOR State MI Zip Code 48104

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
50000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 17 / 2019

**Transaction ID : SA11AI.4173**

Amount of Each Receipt this Period  
50000.00

Memo Item  
CONTRIBUTION

|  |           |
|--|-----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 450000.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |           |

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

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

FOR LINE NUMBER: PAGE 10 OF 24  
(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)  
**1820 PAC**

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

Mailing Address **2 N RIVERSIDE PLAZA  
SUITE 600**

City **CHICAGO** State **IL** Zip Code **60606**

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

Name of Employer (for Individual) **EQUITY GROUP INVESTMENTS** Occupation (for Individual) **CHAIRMAN**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**5000.00**

Date of Receipt  
**10 / 29 / 2019**

**Transaction ID : SA11AI.4180**

Amount of Each Receipt this Period  
**5000.00**

Memo Item  
**CONTRIBUTION**

**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

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

Amount of Each Receipt this Period

Memo Item

|   |                  |
|---|------------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | <b>5000.00</b>   |
| <b>TOTAL</b> This Period (last page this line number only)..... | <b>733000.00</b> |

**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 24   |
| <input type="checkbox"/> 11a  | <input type="checkbox"/> 11b | <input checked="" 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)  
**1820 PAC**

**A. CLEARPATH ACTION FUND, INC.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1355 GREENWOOD CLIFF RD  
 STE 201  
 City CHARLOTTE State NC Zip Code 28204  
 FEC ID number of contributing federal political committee. **C** C00608943  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 50000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 23 / 2019  
**Transaction ID : SA11C.4216**  
 Amount of Each Receipt this Period  
 50000.00  
 Memo Item  
**CONTRIBUTION**

**B. RJC VICTORY FUND**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 228 S WASHINGTON ST  
 SUITE 115  
 City ALEXANDRIA State VA Zip Code 22314  
 FEC ID number of contributing federal political committee. **C** C00528554  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 15 / 2019  
**Transaction ID : SA11C.4188**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item  
**CONTRIBUTION**

**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

|   |          |
|---|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 55000.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... | 55000.00 |

**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)  
**1820 PAC**

|   |  |  |   |
|---|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. 9SEVEN CONSULTING</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 01 / 2019 |   |
| Mailing Address 499 SOUTH CAPITOL STREET SW<br>#405   |  | FEC Identification Number<br>C [REDACTED]                |   |
| City<br>WASHINGTON  | State<br>DC  | Zip Code<br>20003  | Transaction ID : <b>SB21B.4133</b>                |
| Purpose of Disbursement<br>COMPLIANCE CONSULTIGN  |  | Category/<br>Type<br>001                                 | Amount of Each Disbursement this Period<br>850.00 |
| Candidate Name  |  | Memo Item <input type="checkbox"/>                       |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |   |
| State: District:  |  |  |   |

|   |  |  |   |
|---|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. 9SEVEN CONSULTING</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 31 / 2019 |   |
| Mailing Address 499 SOUTH CAPITOL STREET SW<br>#405   |  | FEC Identification Number<br>C C00698126                 |   |
| City<br>WASHINGTON  | State<br>DC  | Zip Code<br>20003  | Transaction ID : <b>SB21B.4139</b>                |
| Purpose of Disbursement<br>COMPLIANCE CONSULTING  |  | Category/<br>Type<br>001                                 | Amount of Each Disbursement this Period<br>825.00 |
| Candidate Name<br><b>1820 PAC</b>   |  | Memo Item <input type="checkbox"/>                       |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |   |
| State: District:  |  |  |   |

|   |  |  |   |
|---|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. 9SEVEN CONSULTING</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>09 / 01 / 2019 |   |
| Mailing Address 499 SOUTH CAPITOL STREET SW<br>#405   |  | FEC Identification Number<br>C C00698126                 |   |
| City<br>WASHINGTON  | State<br>DC  | Zip Code<br>20003  | Transaction ID : <b>SB21B.4151</b>                |
| Purpose of Disbursement<br>COMPLIANCE CONSULTING  |  | Category/<br>Type<br>001                                 | Amount of Each Disbursement this Period<br>550.00 |
| Candidate Name<br><b>1820 PAC</b>   |  | Memo Item <input type="checkbox"/>                       |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |   |
| State: District:  |  |  |   |

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

2225.00

**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)  
**1820 PAC**

|  |  |                          |  |  |
|--|--|--------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. 9SEVEN CONSULTING</b> |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y Y<br>10 / 02 / 2019  |  |
| Mailing Address 499 SOUTH CAPITOL STREET SW<br>#405                    |  |                          |  |  |
| City<br>WASHINGTON   | State<br>DC  | Zip Code<br>20003        |  |  |
| Purpose of Disbursement<br>COMPLIANCE CONSULTING                       |  | Category/<br>Type<br>001 | FEC Identification Number<br>C C00698126<br><b>Transaction ID : SB21B.4168</b><br>Amount of Each Disbursement this Period<br>737.50  |  |
| Candidate Name<br><b>1820 PAC</b>                                      | Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |                          | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: _____<br>District: _____  |  |                          | <input type="checkbox"/> Memo Item   |  |

|  |  |                          |  |  |
|--|--|--------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. 9SEVEN CONSULTING</b> |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y Y<br>10 / 07 / 2019  |  |
| Mailing Address 499 SOUTH CAPITOL STREET SW<br>#405                    |  |                          |  |  |
| City<br>WASHINGTON   | State<br>DC  | Zip Code<br>20003        |  |  |
| Purpose of Disbursement<br>COMPLIANCE CONSULTING                       |  | Category/<br>Type<br>001 | FEC Identification Number<br>C C00698126<br><b>Transaction ID : SB21B.4169</b><br>Amount of Each Disbursement this Period<br>150.00  |  |
| Candidate Name<br><b>1820 PAC</b>                                      | Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |                          | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: _____<br>District: _____  |  |                          | <input type="checkbox"/> Memo Item   |  |

|  |  |                          |  |  |
|--|--|--------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. 9SEVEN CONSULTING</b> |  |                          | Date of Disbursement<br>M M / D D / Y Y Y Y Y<br>11 / 04 / 2019  |  |
| Mailing Address 499 SOUTH CAPITOL STREET SW<br>#405                    |  |                          |  |  |
| City<br>WASHINGTON   | State<br>DC  | Zip Code<br>20003        |  |  |
| Purpose of Disbursement<br>COMPLIANCE CONSULTING                       |  | Category/<br>Type<br>001 | FEC Identification Number<br>C C00698126<br><b>Transaction ID : SB21B.4183</b><br>Amount of Each Disbursement this Period<br>737.50  |  |
| Candidate Name<br><b>1820 PAC</b>                                      | Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |                          | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: _____<br>District: _____  |  |                          | <input type="checkbox"/> Memo Item   |  |

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

1625.00

**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)  
**1820 PAC**

**A. 9SEVEN CONSULTING**

Full Name (Last, First, Middle Initial)

Mailing Address **499 SOUTH CAPITOL STREET SW #405**

City **WASHINGTON** State **DC** Zip Code **20003**

Purpose of Disbursement **COMPLIANCE CONSULTING** Category/Type **001**

Candidate Name **1820 PAC**

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

State: District:

Date of Disbursement: **11 / 30 / 2019**

FEC Identification Number: **C 00698126**  
**Transaction ID : SB21B.4196**  
Amount of Each Disbursement this Period: **800.00**

Memo Item

**B. ANEDOT**

Full Name (Last, First, Middle Initial)

Mailing Address **1920 MCKINNEY AVENUE 7TH FLOOR**

City **DALLAS** State **TX** Zip Code **75201**

Purpose of Disbursement **CREDIT CARD FEES** Category/Type **001**

Candidate Name **1820 PAC**

Office Sought:  House  Senate  President  
Disbursement For: **2020**  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: **08 / 22 / 2019**

FEC Identification Number: **C 00698126**  
**Transaction ID : SB21B.4146**  
Amount of Each Disbursement this Period: **2000.30**

Memo Item

**C. ANEDOT**

Full Name (Last, First, Middle Initial)

Mailing Address **1920 MCKINNEY AVENUE 7TH FLOOR**

City **DALLAS** State **TX** Zip Code **75201**

Purpose of Disbursement **CREDIT CARD FEES** Category/Type **001**

Candidate Name

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

State: District:

Date of Disbursement: **10 / 17 / 2019**

FEC Identification Number: **C**  
**Transaction ID : SB21B.4172**  
Amount of Each Disbursement this Period: **2000.30**

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ **4800.60**

**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)  
**1820 PAC**

Full Name (Last, First, Middle Initial)

**A. ANEDOT**

Mailing Address **1920 MCKINNEY AVENUE  
7TH FLOOR**

City **DALLAS** State **TX** Zip Code **75201**

Purpose of Disbursement **CREDIT CARD FEES**  001

Candidate Name **1820 PAC** Category/Type

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement  
M M / D D / Y Y Y Y Y  
**11 / 15 / 2019**

FEC Identification Number  
**C C00698126**  
**Transaction ID : SB21B.4187**  
Amount of Each Disbursement this Period  
**1000.30**

Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT**

Mailing Address **1920 MCKINNEY AVENUE  
7TH FLOOR**

City **DALLAS** State **TX** Zip Code **75201**

Purpose of Disbursement **CREDIT CARD FEES**  001

Candidate Name **1820 PAC** Category/Type

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

Date of Disbursement  
M M / D D / Y Y Y Y Y  
**12 / 13 / 2019**

FEC Identification Number  
**C C00698126**  
**Transaction ID : SB21B.4207**  
Amount of Each Disbursement this Period  
**1200.30**

Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT**

Mailing Address **1920 MCKINNEY AVENUE  
7TH FLOOR**

City **DALLAS** State **TX** Zip Code **75201**

Purpose of Disbursement **CREDIT CARD FEES**  001

Candidate Name **1820 PAC** Category/Type

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

Date of Disbursement  
M M / D D / Y Y Y Y Y  
**12 / 16 / 2019**

FEC Identification Number  
**C C00698126**  
**Transaction ID : SB21B.4208**  
Amount of Each Disbursement this Period  
**400.30**

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... **2600.90**

**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)  
**1820 PAC**

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. ARISTEIA GROUP INC.</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>08 / 07 / 2019                     |
| Mailing Address 1020 N. FAIRFAX STREET<br>SUITE 201   |  | FEC Identification Number<br>C00698126<br><b>Transaction ID : SB21B.4140</b> |
| City ALEXANDRIA   | State VA   | Zip Code 22314   |
| Purpose of Disbursement<br>FUNDRAISING CONSULTING   |  | Category/Type<br>001   |
| Candidate Name<br><b>1820 PAC</b>   |  | Amount of Each Disbursement this Period<br>2500.00                           |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item   |
| State: District:  |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. ARISTEIA GROUP INC.</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>10 / 31 / 2019                     |
| Mailing Address 1020 N. FAIRFAX STREET<br>SUITE 201   |  | FEC Identification Number<br>C00698126<br><b>Transaction ID : SB21B.4182</b> |
| City ALEXANDRIA   | State VA   | Zip Code 22314   |
| Purpose of Disbursement<br>FUNDRAISING CONSULTING   |  | Category/Type<br>001   |
| Candidate Name<br><b>1820 PAC</b>   |  | Amount of Each Disbursement this Period<br>5000.00                           |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item   |
| State: District:  |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. FOLEY &amp; LARDNER LLP</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>07 / 23 / 2019                     |
| Mailing Address 3000 K STREET, N.W.<br>SUITE 600  |  | FEC Identification Number<br>C00698126<br><b>Transaction ID : SB21B.4138</b> |
| City WASHINGTON   | State DC   | Zip Code 20007   |
| Purpose of Disbursement<br>LEGAL CONSULTING   |  | Category/Type<br>001   |
| Candidate Name<br><b>1820 PAC</b>   |  | Amount of Each Disbursement this Period<br>297.00                            |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Memo Item   |
| State: District:  |  |  |

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

7797.00

**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)  
**1820 PAC**

**A. FOLEY & LARDNER LLP**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 3000 K STREET, N.W.  
SUITE 600

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08    |   | 19    |   | 2019      |

City  
WASHINGTON

State  
DC

Zip Code  
20007

FEC Identification Number

Purpose of Disbursement  
LEGAL CONSULTING

|   |           |
|---|-----------|
| C                                       | C00698126 |
| <b>Transaction ID : SB21B.4143</b>      |           |
| Amount of Each Disbursement this Period |           |
| 10098.00                                |           |
| <input type="checkbox"/> Memo Item      |           |

Candidate Name  
**1820 PAC**

Office Sought:  House  
 Senate  
 President

State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:

Primary  General  
 Other (specify) ▼

**B. FOLEY & LARDNER LLP**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 3000 K STREET, N.W.  
SUITE 600

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    |   | 18    |   | 2019      |

City  
WASHINGTON

State  
DC

Zip Code  
20007

FEC Identification Number

Purpose of Disbursement  
LEGAL CONSULTING

|   |           |
|---|-----------|
| C                                       | C00698126 |
| <b>Transaction ID : SB21B.4161</b>      |           |
| Amount of Each Disbursement this Period |           |
| 495.00                                  |           |
| <input type="checkbox"/> Memo Item      |           |

Candidate Name  
**1820 PAC**

Office Sought:  House  
 Senate  
 President

State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:

Primary  General  
 Other (specify) ▼

**C. FOLEY & LARDNER LLP**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 3000 K STREET, N.W.  
SUITE 600

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 10    |   | 29    |   | 2019      |

City  
WASHINGTON

State  
DC

Zip Code  
20007

FEC Identification Number

Purpose of Disbursement  
LEGAL CONSULTING

|   |           |
|---|-----------|
| C                                       | C00698126 |
| <b>Transaction ID : SB21B.4184</b>      |           |
| Amount of Each Disbursement this Period |           |
| 693.00                                  |           |
| <input type="checkbox"/> Memo Item      |           |

Candidate Name  
**1820 PAC**

Office Sought:  House  
 Senate  
 President

State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:

Primary  General  
 Other (specify) ▼

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

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

|          |
|----------|
| 11286.00 |
|----------|

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|--|
|  |
|--|

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**1820 PAC**

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. FOLEY &amp; LARDNER LLP</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>12 / 02 / 2019   |
| Mailing Address 3000 K STREET, N.W.<br>SUITE 600  |  | FEC Identification Number<br>C C00698126<br><b>Transaction ID : SB21B.4197</b><br>Amount of Each Disbursement this Period<br>3564.00 |
| City<br>WASHINGTON  | State<br>DC  | Zip Code<br>20007  |
| Purpose of Disbursement<br>LEGAL CONSULTING   |  | Category/<br>Type<br>001   |
| Candidate Name<br><b>1820 PAC</b>   |  | Memo Item <input type="checkbox"/>   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: _____  | District: _____  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. FOLEY &amp; LARDNER LLP</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>12 / 12 / 2019   |
| Mailing Address 3000 K STREET, N.W.<br>SUITE 600  |  | FEC Identification Number<br>C C00698126<br><b>Transaction ID : SB21B.4204</b><br>Amount of Each Disbursement this Period<br>6039.00 |
| City<br>WASHINGTON  | State<br>DC  | Zip Code<br>20007  |
| Purpose of Disbursement<br>LEGAL CONSULTING   |  | Category/<br>Type<br>001   |
| Candidate Name<br><b>1820 PAC</b>   |  | Memo Item <input type="checkbox"/>   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: _____  | District: _____  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. HUETER, KRISTIN, , ,</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>12 / 17 / 2019   |
| Mailing Address PO BOX 8533   |  | FEC Identification Number<br>C C00698126<br><b>Transaction ID : SB21B.4213</b><br>Amount of Each Disbursement this Period<br>2100.00 |
| City<br>EMERYVILLE  | State<br>CA  | Zip Code<br>94662  |
| Purpose of Disbursement<br>FUNDRAISING CONSULTING   |  | Category/<br>Type<br>001   |
| Candidate Name<br><b>1820 PAC</b>   |  | Memo Item <input type="checkbox"/>   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |
| State: _____  | District: _____  |  |

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

11703.00

**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)  
**1820 PAC**

**A. SCR AND ASSOCIATES, LLC**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 100 TRADECENER  
SUITE G-700

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12    |   | 09    |   | 2019      |

City WOBURN State MA Zip Code 01801

FEC Identification Number

Purpose of Disbursement  
FUNDRAISING CONSULTING

|   |           |
|---|-----------|
| C | C00698126 |
|---|-----------|

|                   |
|-------------------|
| 001               |
| Category/<br>Type |

**Transaction ID : SB21B.4201**

Amount of Each Disbursement this Period

Candidate Name  
**1820 PAC**

|         |
|---------|
| 1250.00 |
|---------|

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Memo Item

**B. THE MORNING GROUP**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 5918 4TH STREET NW

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 07    |   | 01    |   | 2019      |

City WASHINGTON State DC Zip Code 20011

FEC Identification Number

Purpose of Disbursement  
FUNDRAISING CONSULTING

|   |  |
|---|--|
| C |  |
|---|--|

|                   |
|-------------------|
| 001               |
| Category/<br>Type |

**Transaction ID : SB21B.4132**

Amount of Each Disbursement this Period

Candidate Name

|          |
|----------|
| 10000.00 |
|----------|

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Memo Item

**C. THE MORNING GROUP**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 5918 4TH STREET NW

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08    |   | 27    |   | 2019      |

City WASHINGTON State DC Zip Code 20011

FEC Identification Number

Purpose of Disbursement  
FUNDRAISING CONSULTING

|   |           |
|---|-----------|
| C | C00698126 |
|---|-----------|

|                   |
|-------------------|
| 001               |
| Category/<br>Type |

**Transaction ID : SB21B.4150**

Amount of Each Disbursement this Period

Candidate Name  
**1820 PAC**

|         |
|---------|
| 5000.00 |
|---------|

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Memo Item

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

|          |
|----------|
| 16250.00 |
|----------|

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**1820 PAC**

**A. THE MORNING GROUP**

Full Name (Last, First, Middle Initial)

Mailing Address 5918 4TH STREET NW

City  
WASHINGTON

State  
DC

Zip Code  
20011

Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Category/  
Type

Candidate Name  
**1820 PAC**

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    | / | 26    | / | 2019      |

FEC Identification Number

C C00698126

**Transaction ID : SB21B.4165**

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Memo Item

**B. THE MORNING GROUP**

Full Name (Last, First, Middle Initial)

Mailing Address 5918 4TH STREET NW

City  
WASHINGTON

State  
DC

Zip Code  
20011

Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Category/  
Type

Candidate Name  
**1820 PAC**

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 10    | / | 20    | / | 2019      |

FEC Identification Number

C C00698126

**Transaction ID : SB21B.4175**

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Memo Item

**C. THE MORNING GROUP**

Full Name (Last, First, Middle Initial)

Mailing Address 5918 4TH STREET NW

City  
WASHINGTON

State  
DC

Zip Code  
20011

Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Category/  
Type

Candidate Name  
**1820 PAC**

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 10    | / | 25    | / | 2019      |

FEC Identification Number

C C00698126

**Transaction ID : SB21B.4178**

Amount of Each Disbursement this Period

|          |
|----------|
| 25500.00 |
|----------|

Memo Item

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

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

|          |
|----------|
| 35500.00 |
|----------|

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**1820 PAC**

**A. THE MORNING GROUP**

Full Name (Last, First, Middle Initial)

Mailing Address 5918 4TH STREET NW

City WASHINGTON State DC Zip Code 20011

Purpose of Disbursement COMPLIANCE CONSULTING

Candidate Name 1820 PAC

Office Sought:  House  Senate  President

Disbursement For: 2020  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 11 / 19 / 2019

FEC Identification Number C00698126

Transaction ID : SB21B.4190

Amount of Each Disbursement this Period 1250.00

Memo Item

**B. THE MORNING GROUP**

Full Name (Last, First, Middle Initial)

Mailing Address 5918 4TH STREET NW

City WASHINGTON State DC Zip Code 20011

Purpose of Disbursement FUNDRAISING CONSULTING

Candidate Name 1820 PAC

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 12 / 16 / 2019

FEC Identification Number C00698126

Transaction ID : SB21B.4212

Amount of Each Disbursement this Period 2500.00

Memo Item

**C. THE MORNING GROUP**

Full Name (Last, First, Middle Initial)

Mailing Address 5918 4TH STREET NW

City WASHINGTON State DC Zip Code 20011

Purpose of Disbursement FUNDRAISING CONSULTING

Candidate Name 1820 PAC

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 12 / 23 / 2019

FEC Identification Number C00698126

Transaction ID : SB21B.4215

Amount of Each Disbursement this Period 5000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 8750.00

**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)  
**1820 PAC**

**A. THE TARRANCE GROUP, INC.**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 201 N UNION STREET  
SUITE 410

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 08    |   | 16    |   | 2019      |

City ALEXANDRIA State VA Zip Code 22314

FEC Identification Number

Purpose of Disbursement  
POLLING

|                   |
|-------------------|
| 005               |
| Category/<br>Type |

C C00698126

**Transaction ID : SB21B.4141**

Amount of Each Disbursement this Period

Candidate Name  
**1820 PAC**

|          |
|----------|
| 46930.00 |
|----------|

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Memo Item

**B. THE TARRANCE GROUP, INC.**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 201 N UNION STREET  
SUITE 410

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 11    |   | 21    |   | 2019      |

City ALEXANDRIA State VA Zip Code 22314

FEC Identification Number

Purpose of Disbursement  
POLLING

|                   |
|-------------------|
| 001               |
| Category/<br>Type |

C C00698126

**Transaction ID : SB21B.4191**

Amount of Each Disbursement this Period

Candidate Name  
**1820 PAC**

|          |
|----------|
| 50134.00 |
|----------|

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Memo Item

**C. UPT STRATEGIES**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 31403

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12    |   | 23    |   | 2019      |

City CHARLESTON State SC Zip Code 29417

FEC Identification Number

Purpose of Disbursement  
WEBSITE

|                   |
|-------------------|
| 001               |
| Category/<br>Type |

C C00698126

**Transaction ID : SB21B.4218**

Amount of Each Disbursement this Period

Candidate Name  
**1820 PAC**

|        |
|--------|
| 500.00 |
|--------|

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Memo Item

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

|          |
|----------|
| 97564.00 |
|----------|

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

|           |
|-----------|
| 200101.50 |
|-----------|

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
1820 PAC
FEC IDENTIFICATION NUMBER
C C00698126

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee SRCP MEDIA, INC.
Mailing Address 201 N UNION STREET SUITE 200
City ALEXANDRIA State VA Zip Code 22314
Purpose of Expenditure MEDIA PLACEMENT Category/Type 004
Date of Public Distribution/Dissemination 09/17/2019
Amount 276780.00
Transaction ID : SE.4156
Date of Disbursement or Obligation 09/10/2019
Name of Federal Candidate: COLLINS, SUSAN M., , Support
Office Sought: Senate State: ME
Calendar Year-To-Date Per Election for Office Sought 276780.00
Disbursement For: Primary

Full Name of Payee SRCP MEDIA, INC.
Mailing Address 201 N UNION STREET SUITE 200
City ALEXANDRIA State VA Zip Code 22314
Purpose of Expenditure MEDIA PRODUCTION Category/Type 004
Date of Public Distribution/Dissemination 09/20/2019
Amount 11705.00
Transaction ID : SE.4162
Date of Disbursement or Obligation 09/20/2019
Name of Federal Candidate: COLLINS, SUSAN M., , Support
Office Sought: Senate State: ME
Calendar Year-To-Date Per Election for Office Sought 288485.00
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 288485.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

DATWYLER, THOMAS, ,

[Electronically Filed]

Date 01/31/2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
1820 PAC
FEC IDENTIFICATION NUMBER
C C00698126

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee SRCP MEDIA, INC.
Mailing Address 201 N UNION STREET SUITE 200
City ALEXANDRIA State VA Zip Code 22314
Purpose of Expenditure MEDIA PLACEMENT Category/Type 004
Date of Public Distribution/Dissemination 12/03/2019
Amount 398169.00
Transaction ID : SE.4192
Date of Disbursement or Obligation 11/25/2019

Name of Federal Candidate: COLLINS, SUSAN M., ,
Support Oppose
Office Sought: House District: 00
President Senate State: ME
Calendar Year-To-Date Per Election for Office Sought 686654.00
Disbursement For: Primary General
Other (specify)

Full Name of Payee SRCP MEDIA, INC.
Mailing Address 201 N UNION STREET SUITE 200
City ALEXANDRIA State VA Zip Code 22314
Purpose of Expenditure MEDIA PRODUCTION Category/Type 004
Date of Public Distribution/Dissemination 12/06/2019
Amount 14290.00
Transaction ID : SE.4198
Date of Disbursement or Obligation 12/06/2019

Name of Federal Candidate: COLLINS, SUSAN M., ,
Support Oppose
Office Sought: House District: 00
President Senate State: ME
Calendar Year-To-Date Per Election for Office Sought 700944.00
Disbursement For: Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 412459.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures 700944.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

DATWYLER, THOMAS, ,

[Electronically Filed]

Date 01/31/2020

Signature