

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

MAKE AMERICA EXCEPTIONAL MAX PAC

Report Covering the Period: From: 01 / 01 / 2024 To: 03 / 31 / 2024

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2024		0.00
(b) Cash on Hand at Beginning of Reporting Period.....	0.00	
(c) Total Receipts (from Line 19)	27250.00	27250.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	27250.00	27250.00
7. Total Disbursements (from Line 31).....	27250.00	27250.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	0.00	0.00
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 the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

MAKE AMERICA EXCEPTIONAL MAX PAC

Report Covering the Period: From: 01 / 01 / 2024 To: 03 / 31 / 2024

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).....	27250.00	27250.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	27250.00	27250.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	27250.00	27250.00
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)).....▶	27250.00	27250.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	27250.00	27250.00

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	17350.00	17350.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	17350.00	17350.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	9900.00	9900.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	27250.00	27250.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	27250.00	27250.00

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)	27250.00	27250.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	27250.00	27250.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	17350.00	17350.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	17350.00	17350.00

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

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

FOR LINE NUMBER: PAGE 6 OF 11
(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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
MAKE AMERICA EXCEPTIONAL MAX PAC

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

Mailing Address 705 West Bay Avenue

City Newport Beach	State CA	Zip Code 92661
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	26	/	2024

Transaction ID : SA11AI.4113

Amount of Each Receipt this Period
5000.00

Memo Item

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

Mailing Address 84 Old Course Dr.

City Newport Beach	State CA	Zip Code 92660
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Coldwell Banker	Occupation (for Individual) Real Estate
--	--

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
02	/	29	/	2024

Transaction ID : SA11AI.4121

Amount of Each Receipt this Period
5000.00

Memo Item

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

Mailing Address 1221 W Coast hwy Apt 422

City Newport Beach	State CA	Zip Code 92663
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FEC ID number of contributing federal political committee. **C**

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

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2024

Transaction ID : SA11AI.4117

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	15000.00
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 11
<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)
MAKE AMERICA EXCEPTIONAL MAX PAC

A. Munson, Perry, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1221 W Coast hwy Apt 422
 City Newport Beach State CA Zip Code 92663
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 22 / 2024
Transaction ID : SA11AI.4122
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. Schulze, Debra, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 68 Corsica Drive
 City Newport Beach State CA Zip Code 92660
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) retired Occupation (for Individual) retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2024
Transaction ID : SA11AI.4119
 Amount of Each Receipt this Period
 2000.00
 Memo Item

C. Tolstad, Jeffrey Iver, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28828 Mac Tan Rd
 City Valley Center State CA Zip Code 92082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) retired Occupation (for Individual) retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 23 / 2024
Transaction ID : SA11AI.4111
 Amount of Each Receipt this Period
 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	7250.00
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 8 OF 11
<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)
MAKE AMERICA EXCEPTIONAL MAX PAC

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

Mailing Address 6 Oakmont Lane

City Newport Beach	State CA	Zip Code 92660
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FEC ID number of contributing federal political committee. **C**

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

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
02 / 26 / 2024

Transaction ID : SA11AI.4115

Amount of Each Receipt this Period
5000.00

Memo Item

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

Mailing Address

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

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

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY

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

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

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY

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).....	27250.00

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)

Form for line numbers 21b-30b with checkboxes. 21b is checked.

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NAME OF COMMITTEE (In Full)
MAKE AMERICA EXCEPTIONAL MAX PAC

Form A: 10Six Consulting. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

Form B: 10Six Consulting. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

Form C: 10Six Consulting. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

SUBTOTAL of Disbursements This Page (optional) 12904.10
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)

Form for line numbers 21b-30b with checkboxes. 21b is checked.

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NAME OF COMMITTEE (In Full)
MAKE AMERICA EXCEPTIONAL MAX PAC

Form A: A. Anedot. Includes fields for Full Name, Mailing Address (1340 Poydras St), City (New Orleans), State (LA), Zip Code (70112), Purpose of Disbursement (Credit Card Fees), Candidate Name (MAKE AMERICA EXCEPTIONAL MAX PAC), Office Sought, Disbursement For, Date of Disbursement (02/29/2024), FEC Identification Number (C00870220), Transaction ID (SB21B.4103), and Amount of Each Disbursement (410.90).

Form B: B. AxCapital, LLC. Includes fields for Full Name, Mailing Address (800 W 47th St), City (Kansas City), State (MO), Zip Code (64112), Purpose of Disbursement (Compliance Consulting), Candidate Name (MAKE AMERICA EXCEPTIONAL MAX PAC), Office Sought, Disbursement For, Date of Disbursement (02/29/2024), FEC Identification Number (C00870220), Transaction ID (SB21B.4126), and Amount of Each Disbursement (2500.00).

Form C: C. Clark, Andrew, , , . Includes fields for Full Name, Mailing Address (517 Promontory Dr E), City (Newport Beach), State (CA), Zip Code (92660), Purpose of Disbursement (Campaign Consulting), Candidate Name (MAKE AMERICA EXCEPTIONAL MAX PAC), Office Sought, Disbursement For, Date of Disbursement (03/07/2024), FEC Identification Number (C00870220), Transaction ID (SB21B.4101), and Amount of Each Disbursement (1500.00).

SUBTOTAL of Disbursements This Page (optional) 4410.90
TOTAL This Period (last page this line number only) 17315.00

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)

Form for line numbers 21b-28a, 22-28b, 23-28c, 26-29, 27-30b with checkboxes.

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NAME OF COMMITTEE (In Full)

MAKE AMERICA EXCEPTIONAL MAX PAC

Full Name (Last, First, Middle Initial)

A. MARIO FRATTO FOR CONGRESS

Mailing Address 95 RIDGEWOOD DRIVE

City GENEVA State NY Zip Code 14456

Purpose of Disbursement Political Contribution Category/Type 011

Candidate Name

FRATTO, MARIO, , ,

Office Sought: House, Senate, President; Disbursement For: 2024; Primary, General, Other (specify); State: NY District: 24

Date of Disbursement

Date of Disbursement form: 03 / 11 / 2024

FEC Identification Number

C00800045

Transaction ID : SB23.4108

Amount of Each Disbursement this Period

Amount of Each Disbursement this Period form: 3300.00

Memo Item

Full Name (Last, First, Middle Initial)

B. MAX UKROPINA FOR CONGRESS 2024

Mailing Address 3843 S BRISTOL ST STE 604

City SANTA ANA State CA Zip Code 92704

Purpose of Disbursement Political Contribution Category/Type 011

Candidate Name

UKROPINA, MAX, , ,

Office Sought: House, Senate, President; Disbursement For: 2024; Primary, General, Other (specify); State: CA District: 47

Date of Disbursement

Date of Disbursement form: 02 / 29 / 2024

FEC Identification Number

C00837617

Transaction ID : SB23.4132

Amount of Each Disbursement this Period

Amount of Each Disbursement this Period form: 3300.00

Memo Item

Full Name (Last, First, Middle Initial)

C. RULLI FOR OHIO

Mailing Address P.O. BOX 2971

City YOUNGSTOWN State OH Zip Code 44511

Purpose of Disbursement Political Contribution Category/Type 011

Candidate Name

RULLI, MICHAEL, , ,

Office Sought: House, Senate, President; Disbursement For: 2024; Primary, General, Other (specify); State: OH District: 06

Date of Disbursement

Date of Disbursement form: 02 / 29 / 2024

FEC Identification Number

C00858415

Transaction ID : SB23.4136

Amount of Each Disbursement this Period

Amount of Each Disbursement this Period form: 3300.00

Memo Item

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

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

Summary table with amounts: 9900.00