

# 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**  
**PROTECT AMERICA FIRST**

ADDRESS (number and street) **16743 E PALISADES STE 201**  
Check if different than previously reported. (ACC) **FOUNTAIN HILLS AZ 85268**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00687392** 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  **11** /  **06** /  **2018** in the State of

5. Covering Period  **10** /  **01** /  **2018** through  **11** /  **26** /  **2018**

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

Signature of Treasurer Wilson, Sonny, , , [Electronically Filed] Date  **01** /  **31** /  **2019**

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

**PROTECT AMERICA FIRST**

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="2018"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="3178.06"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="28410.44"/>	<input type="text" value="32051.44"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="31588.50"/>	<input type="text" value="32051.44"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="12562.19"/>	<input type="text" value="13025.13"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="19026.31"/>	<input type="text" value="19026.31"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="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

**PROTECT AMERICA FIRST**

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

<b>I. Receipts</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1794.44	5435.44
(ii) Unitemized .....	11616.00	11616.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	13410.44	17051.44
(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) .....	13410.44	17051.44
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.).....	15000.00	15000.00
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)).....▶	28410.44	32051.44
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	28410.44	32051.44

**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 .....	12562.19	13025.13
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	12562.19	13025.13
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	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)) ..	12562.19	13025.13
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12562.19	13025.13

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	13410.44	17051.44
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	13410.44	17051.44
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	12562.19	13025.13
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	12562.19	13025.13

**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 14
	<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)  
**PROTECT AMERICA FIRST**

**A. Cannon, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2928 Claremont Road  
 City Shaker Heights State OH Zip Code 44122  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Independent stock trader  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 19 / 2018  
**Transaction ID : SA11AI.4106**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
 Contribution

**B. Hathorn, Samuel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 19819 Skycountry Lane  
 City Houston State TX Zip Code 77094  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) retired Occupation (for Individual) retired  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 09 / 2018  
**Transaction ID : SA11AI.4150**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
 Contribution

**C. Kostas, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2810 cobb lane  
 City Smyrna State GA Zip Code 30082  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Chiropractic  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 31 / 2018  
**Transaction ID : SA11AI.4137**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
 Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 14
	<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)  
**PROTECT AMERICA FIRST**

**A. Love, Steven, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 260  
 City HEALY State AK Zip Code 99743  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) retired Occupation (for Individual) retired  
 Receipt For: 2018  
 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  
 10 / 04 / 2018  
**Transaction ID : SA11AI.4155**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item Contribution

**B. Love, Steven, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 260  
 City HEALY State AK Zip Code 99743  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) retired Occupation (for Individual) retired  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2018  
**Transaction ID : SA11AI.4144**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item Contribution

**C. Roth, Guy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8487 Farralone Avenue  
 8487 Farralone Avenue  
 City Los Angeles State CA Zip Code 91304  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Small Business Owner  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 02 / 2018  
**Transaction ID : SA11AI.4129**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item Contribution

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

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

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

FOR LINE NUMBER: PAGE 8 OF 14  
(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

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NAME OF COMMITTEE (In Full)  
**PROTECT AMERICA FIRST**

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

Mailing Address 4860 shepard rd

City marcellus	State NY	Zip Code 13108
-------------------	-------------	-------------------

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

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
444.44

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	08	/	2018

**Transaction ID : SA11AI.4154**

Amount of Each Receipt this Period  
444.44

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  

M M M	/	D 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 M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	444.44
<b>TOTAL</b> This Period (last page this line number only).....	1794.44



**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 14
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PROTECT AMERICA FIRST**

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

Mailing Address 721 Emerson Rd

City St Louis	State MO	Zip Code 63141
------------------	-------------	-------------------

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

Name of Employer (for Individual) Drury Hotels	Occupation (for Individual) CEO
---	------------------------------------

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
10		02		2018

**Transaction ID : SA17.5345**

Amount of Each Receipt this Period  
10000.00

Memo Item  
Contribution - Carey Acct

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

Mailing Address

City West Sullivan	State MO	Zip Code
-----------------------	-------------	----------

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

Name of Employer (for Individual) Play-Mor Coin Op	Occupation (for Individual) Owner
---	--------------------------------------

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
10		31		2018

**Transaction ID : SA17.5347**

Amount of Each Receipt this Period  
5000.00

Memo Item  
Contribution - Carey Acct

**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)
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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).....	15000.00
<b>TOTAL</b> This Period (last page this line number only).....	15000.00

**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)  
**PROTECT AMERICA FIRST**

**A. DDI Media**

Full Name (Last, First, Middle Initial)

Mailing Address 8315 Drury Industrial Pkwy

City St Louis State MO Zip Code 63114

Purpose of Disbursement Digital Services

Candidate Name **PROTECT AMERICA FIRST**

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 09 / 2018

FEC Identification Number: C00687392  
**Transaction ID : SB21B.5332**

Amount of Each Disbursement this Period: 1200.00

Memo Item

**B. DDI Media**

Full Name (Last, First, Middle Initial)

Mailing Address 8315 Drury Industrial Pkwy

City St Louis State MO Zip Code 63114

Purpose of Disbursement Digital Services

Candidate Name **PROTECT AMERICA FIRST**

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 05 / 2018

FEC Identification Number: C00687392  
**Transaction ID : SB21B.5306**

Amount of Each Disbursement this Period: 900.00

Memo Item

**C. Drury Hotels**

Full Name (Last, First, Middle Initial)

Mailing Address 721 Emerson Rd

City St Louis State MO Zip Code 63141

Purpose of Disbursement Hotel

Candidate Name **PROTECT AMERICA FIRST**

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 29 / 2018

FEC Identification Number: C00687392  
**Transaction ID : SB21B.5336**

Amount of Each Disbursement this Period: 364.94

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2464.94

**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)  
**PROTECT AMERICA FIRST**

Full Name (Last, First, Middle Initial)

**A. Exact Data**

Mailing Address 33 N Dearborn St  
Ste 200

City Chicago State IL Zip Code 60602

Purpose of Disbursement  
Data Services

Candidate Name  
**PROTECT AMERICA FIRST**

Office Sought:  House  Senate  President  
Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 10 / 2018

FEC Identification Number

**C** C00687392

**Transaction ID : SB21B.5341**

Amount of Each Disbursement this Period

1085.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Exact Data**

Mailing Address 33 N Dearborn St  
Ste 200

City Chicago State IL Zip Code 60602

Purpose of Disbursement  
Data Services

Candidate Name  
**PROTECT AMERICA FIRST**

Office Sought:  House  Senate  President  
Disbursement For: 2018  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 13 / 2018

FEC Identification Number

**C** C00687392

**Transaction ID : SB21B.5328**

Amount of Each Disbursement this Period

1085.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Fairfield Inn**

Mailing Address 185 MacArthur Dr

City New Bedford State MA Zip Code 02740

Purpose of Disbursement  
Hotel

Candidate Name  
**PROTECT AMERICA FIRST**

Office Sought:  House  Senate  President  
Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 05 / 2018

FEC Identification Number

**C** C00687392

**Transaction ID : SB21B.5333**

Amount of Each Disbursement this Period

515.35

Memo Item

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

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

2685.35

**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)  
**PROTECT AMERICA FIRST**

Full Name (Last, First, Middle Initial)

**A. Fairfield Inn**

Mailing Address 185 MacArthur Dr

City New Bedford State MA Zip Code 02740

Purpose of Disbursement  
Hotel

Candidate Name  
**PROTECT AMERICA FIRST**

Office Sought:  House  Senate  President  
Disbursement For: 2018  
 Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 09 / 2018

FEC Identification Number

C00687392

Transaction ID : SB21B.5330

Amount of Each Disbursement this Period

264.73

Memo Item

Full Name (Last, First, Middle Initial)

**B. Monster Displays**

Mailing Address 18502 NE 5th Ave

City Miami State FL Zip Code 33179

Purpose of Disbursement  
Display

Candidate Name  
**PROTECT AMERICA FIRST**

Office Sought:  House  Senate  President  
Disbursement For: 2018  
 Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 06 / 2018

FEC Identification Number

C00687392

Transaction ID : SB21B.5304

Amount of Each Disbursement this Period

867.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. PIO'S**

Mailing Address 403 1st Capitol Dr

City St Charles State MO Zip Code 63301

Purpose of Disbursement  
Event Food

Candidate Name  
**PROTECT AMERICA FIRST**

Office Sought:  House  Senate  President  
Disbursement For: 2018  
 Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 29 / 2018

FEC Identification Number

C00687392

Transaction ID : SB21B.5311

Amount of Each Disbursement this Period

695.47

Memo Item

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

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

1827.20

**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)  
**PROTECT AMERICA FIRST**

Full Name (Last, First, Middle Initial) <b>A. Webster, Kristine, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 09 / 2018	
Mailing Address 16743 E PALISADES		FEC Identification Number C00687392 <b>Transaction ID : SB21B.5343</b> Amount of Each Disbursement this Period 2315.00	
City Fountain Hills	State AZ	Zip Code 85268	Category/ Type
Purpose of Disbursement Reimbursement			
Candidate Name <b>PROTECT AMERICA FIRST</b>		Disbursement For: 2018	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>B. Webster, Kristine, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 30 / 2018	
Mailing Address 16743 E PALISADES		FEC Identification Number C00687392 <b>Transaction ID : SB21B.5308</b> Amount of Each Disbursement this Period 1674.56	
City Fountain Hills	State AZ	Zip Code 85268	Category/ Type
Purpose of Disbursement Reimbursement			
Candidate Name <b>PROTECT AMERICA FIRST</b>		Disbursement For: 2018	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>C. Zerobounce</b>		Date of Disbursement MM / DD / YYYY 10 / 29 / 2018	
Mailing Address 10 E Yanonali St		FEC Identification Number C00687392 <b>Transaction ID : SB21B.5338</b> Amount of Each Disbursement this Period 375.00	
City Santa Barbara	State CA	Zip Code 93101	Category/ Type
Purpose of Disbursement Email Services			
Candidate Name <b>PROTECT AMERICA FIRST</b>		Disbursement For: 2018	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

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

4364.56

**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)  
**PROTECT AMERICA FIRST**

**A. Zerobounce**

Full Name (Last, First, Middle Initial)

Mailing Address 10 E Yanonali St

City Santa Barbara State CA Zip Code 93101

Purpose of Disbursement Email Services

Candidate Name **PROTECT AMERICA FIRST**

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 14 / 2018

FEC Identification Number: C00687392

Transaction ID : **SB21B.5324**

Amount of Each Disbursement this Period: 375.00

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	375.00
<b>TOTAL</b> This Period (last page this line number only).....▶	11717.05