

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines. 12FE4M5
AMANDA MAKKI FOR CONGRESS

ADDRESS (number and street) PO BOX 47483
 ST PETERSBURG FL 33743
CITY STATE ZIP CODE

2. **FEC IDENTIFICATION NUMBER** C C00708263
3. IS THIS REPORT NEW (N) OR AMENDED (A)
STATE DISTRICT
FL 13

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)
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on 08 / 18 / 2020 in the State of FL
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period 07 / 01 / 2020 through 07 / 29 / 2020

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer CRATE, BRADLEY, T.,
Signature of Treasurer CRATE, BRADLEY, T., [Electronically Filed] Date 09 / 14 / 2021

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

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
AMANDA MAKKI FOR CONGRESS

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	141897.23	1209194.47
(b) Total Contribution Refunds (from Line 20(d))	5600.00	5625.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	136297.23	1203569.47
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	446123.87	722461.42
(b) Total Offsets to Operating Expenditures (from Line 14).....	3325.00	3499.45
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	442798.87	718961.97
8. Cash on Hand at Close of Reporting Period (from Line 27).....	484607.50	
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).....	2204.50	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

AMANDA MAKKI FOR CONGRESS

Report Covering the Period: From: M M / D D / Y Y Y Y
07 / 01 / 2020 To: M M / D D / Y Y Y Y
07 / 29 / 2020

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	89786.35	919847.67
(ii) Unitemized	45610.88	145996.80
(iii) TOTAL of contributions from individuals	135397.23	1065844.47
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	6500.00	143350.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	141897.23	1209194.47
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	3325.00	3499.45
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	145222.23	1212693.92

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	446123.87	722461.42
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	5600.00	5625.00
(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 20(a), (b), and (c)).....	5600.00	5625.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	451723.87	728086.42

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	791109.14
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	145222.23
25. SUBTOTAL (add Line 23 and Line 24).....	936331.37
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	451723.87
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	484607.50

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

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

FOR LINE NUMBER: PAGE 5 OF 103
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ABRAHIM, ATHIR, , ,
 Mailing Address 908 AVENIDA DEL OCEANO
 City EL CAJON State CA Zip Code 92019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CORONADO SHELL Occupation MANAGER
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 20 / 2020
Transaction ID : SA11A1.13102
 Amount of Each Receipt this Period
 250.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11391]

B. Full Name (Last, First, Middle Initial)
ACKERMAN, ALEXANDRA, , ,
 Mailing Address 4072 ALHAMBRA DRIVE WEST
 City JACKSONVILLE State FL Zip Code 32207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer IRIDIUM HOLDINGS INC Occupation DIRECTOR
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 5600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 14 / 2020
Transaction ID : SA11A1.12347
 Amount of Each Receipt this Period
 5600.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11385]:
 SEE REDESIGNATION

C. Full Name (Last, First, Middle Initial)
ACKERMAN, ALEXANDRA, , ,
 Mailing Address 4072 ALHAMBRA DRIVE WEST
 City JACKSONVILLE State FL Zip Code 32207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer IRIDIUM HOLDINGS INC Occupation DIRECTOR
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 2800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 14 / 2020
Transaction ID : SA11A1.12348
 Amount of Each Receipt this Period
 - 2800.00
 Memo Item
 REDESIGNATION TO GENERAL

SUBTOTAL of Receipts This Page (optional) ▶ 5850.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 OF 103
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ACKERMAN, ALEXANDRA, , ,

Mailing Address 4072 ALHAMBRA DRIVE WEST

City JACKSONVILLE State FL Zip Code 32207

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

Name of Employer IRIDIUM HOLDINGS INC Occupation DIRECTOR

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 14 / 2020

Transaction ID : SA11A1.12349

Amount of Each Receipt this Period
2800.00

Memo Item
REDESIGNATION FROM PRIMARY

B. Full Name (Last, First, Middle Initial)
AGGARWAL, NITIN, , ,

Mailing Address 3 INDIAN RIVER AVENUE
801

City TITUSVILLE State FL Zip Code 32796

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

Name of Employer HOPKINS PHARMACY Occupation OWNER

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2750.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 08 / 2020

Transaction ID : SA11A1.11976

Amount of Each Receipt this Period
50.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11357]

C. Full Name (Last, First, Middle Initial)
AGNEW, FRAN, , ,

Mailing Address 2707 SKIMMER POINT WAY SOUTH

City GULFPORT State FL Zip Code 33707

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

Name of Employer SELF-EMPLOYED Occupation MARKETING

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 14 / 2020

Transaction ID : SA11A1.12335

Amount of Each Receipt this Period
250.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11385]

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 OF 103
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ALBERTI, SUSANA, , ,

Mailing Address 101 S ROSSMORE

City LOS ANGELES State CA Zip Code 90004

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 22 / 2020

Transaction ID : SA11A1.13222

Amount of Each Receipt this Period
500.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11392]

B. Full Name (Last, First, Middle Initial)
ALVAREZ, MAXIMO, , ,

Mailing Address 1650 NORTHWEST 87TH AVENUE

City DORAL State FL Zip Code 33172

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

Name of Employer SUNSHINE GASOLINE DIST. Occupation BUSINESS EXECUTIVE

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 29 / 2020

Transaction ID : SA11A1.14054

Amount of Each Receipt this Period
2800.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11397]

C. Full Name (Last, First, Middle Initial)
AMEN, BRIAN, J, ,

Mailing Address 25638 ELK LICK ROAD

City CHANTILLY State VA Zip Code 20152

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

Name of Employer RENEGADE TECHNOLOGY LLC Occupation ANALYST

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
900.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 15 / 2020

Transaction ID : SA11A1.12585

Amount of Each Receipt this Period
100.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11387]

SUBTOTAL of Receipts This Page (optional)..... ▶ 3400.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 8 OF 103	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ARMSTRONG, CHRISTOPHER, , ,

Mailing Address 3228 N PERSHING DRIVE

City ARLINGTON	State VA	Zip Code 22201
-------------------	-------------	-------------------

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

Name of Employer HOLLAND KNIGHT	Occupation ATTORNEY
------------------------------------	------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 2019 2020 2021 2022 2023 2024 2025 2026 2027 2028 2029 2030

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 14 / 2020

Transaction ID : SA11A1.12382

Amount of Each Receipt this Period
 0.00 500.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11386]

B. Full Name (Last, First, Middle Initial)
BARDES, MERRILYN, , ,

Mailing Address 126 CASA BENDITA

City PALM BEACH	State FL	Zip Code 33480
--------------------	-------------	-------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 2019 2020 2021 2022 2023 2024 2025 2026 2027 2028 2029 2030

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 01 / 2020

Transaction ID : SA11A1.11434

Amount of Each Receipt this Period
 0.00 250.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.6686]

C. Full Name (Last, First, Middle Initial)
BARTLETT, MATTHEW, , ,

Mailing Address 520 N STREET SW
S113

City WASHINGTON	State DC	Zip Code 20024
--------------------	-------------	-------------------

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

Name of Employer FEDERAL GOVERNMENT	Occupation SPECIAL ASSISTANT
--	---------------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 2019 2020 2021 2022 2023 2024 2025 2026 2027 2028 2029 2030

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 23 / 2020

Transaction ID : SA11A1.13376

Amount of Each Receipt this Period
 0.00 50.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11393]

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

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

0.00 800.00

0.00 800.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 103
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BAUR, EDWARD, , ,
 Mailing Address 305 KINGSTOWN DRIVE
 City NAPLES State FL Zip Code 34102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 22 / 2020
Transaction ID : SA11A1.13204
 Amount of Each Receipt this Period
 250.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11392]

B. Full Name (Last, First, Middle Initial)
BAUR, MICHELE, , ,
 Mailing Address 9008 HAVERFORD TERRACE
 City RICHMOND HEIGHTS State MO Zip Code 63117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 27 / 2020
Transaction ID : SA11A1.13716
 Amount of Each Receipt this Period
 250.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11396]

C. Full Name (Last, First, Middle Initial)
BENAVI, IRIT, , ,
 Mailing Address 4501 SPANISH OAK TRAIL
 City AUSTIN State TX Zip Code 78731
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 283.33

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 18 / 2020
Transaction ID : SA11A1.13005
 Amount of Each Receipt this Period
 100.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11390]

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 103
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BENAVI, IRIT, , ,
 Mailing Address 4501 SPANISH OAK TRAIL
 City AUSTIN State TX Zip Code 78731
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 333.33

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 21 / 2020
Transaction ID : SA11A1.13189
 Amount of Each Receipt this Period
 50.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11392]

B. Full Name (Last, First, Middle Initial)
BOURDET, SHAWN, , ,
 Mailing Address 10164 PACHECO PASS HWY
 City HOLLISTER State CA Zip Code 95023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation CATTLE RANCHER
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 01 / 2020
Transaction ID : SA11A1.11428
 Amount of Each Receipt this Period
 250.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11A1.6686]

C. Full Name (Last, First, Middle Initial)
BREHM, SAM, , ,
 Mailing Address 480 WEST CLEBURN STREET
 City FAYETTEVILLE State AR Zip Code 72701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MEARS GROUP Occupation PROJECT COORDINATOR
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2020
Transaction ID : SA11A1.14253
 Amount of Each Receipt this Period
 500.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11403]

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

800.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 103
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BULLARD, FRANK, , ,

Mailing Address 2325 ULMERTON ROAD

City CLEARWATER State FL Zip Code 33762

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

Name of Employer SELF-EMPLOYED Occupation REAL ESTATE INVESTMENT

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 29 / 2020

Transaction ID : SA11A1.14085

Amount of Each Receipt this Period
2500.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11397]

B. Full Name (Last, First, Middle Initial)
BUSCH, AUGUST, A., , III

Mailing Address 1 MID RIVERS MALL DR
STE 210

City ST PETERS State MO Zip Code 63376

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 21 / 2020

Transaction ID : SA11A1.13136

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
CAMPAGNA, MICHAEL, P, ,

Mailing Address 4916 TURTLE CREEK TRL

City OLDSMAR State FL Zip Code 34677

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

Name of Employer CAMPAGNA HOMES Occupation OWNER

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 29 / 2020

Transaction ID : SA11A1.14226

Amount of Each Receipt this Period
500.00

Memo Item

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

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

5500.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 12 OF 103	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
12	13a	13b	14
			15

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CARAM, GEORGE, , ,

Mailing Address 1331 MARYLAND AVE SW
APT 136

City WASHINGTON	State DC	Zip Code 20024
--------------------	-------------	-------------------

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

Name of Employer MILLER STRATEGIES	Occupation CONSULTANT
---------------------------------------	--------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 29 / 2020

Transaction ID : SA11A1.14087

Amount of Each Receipt this Period
2800.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11397]

B. Full Name (Last, First, Middle Initial)
CARLSON, ROY, , ,

Mailing Address 8452 LOWER SCARBOROUGH CT

City SAN DIEGO	State CA	Zip Code 92127
-------------------	-------------	-------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 01 / 2020

Transaction ID : SA11A1.11544

Amount of Each Receipt this Period
100.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.6686]

C. Full Name (Last, First, Middle Initial)
CARLSON, ROY, , ,

Mailing Address 8452 LOWER SCARBOROUGH CT

City SAN DIEGO	State CA	Zip Code 92127
-------------------	-------------	-------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
320.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 13 / 2020

Transaction ID : SA11A1.12300

Amount of Each Receipt this Period
20.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11385]

SUBTOTAL of Receipts This Page (optional)..... ▶	2920.00
TOTAL This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 13 OF 103
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CARLSON, ROY, , ,

Mailing Address 8452 LOWER SCARBOROUGH CT

City SAN DIEGO	State CA	Zip Code 92127
-------------------	-------------	-------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
420.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 13 / 2020

Transaction ID : SA11A1.12301

Amount of Each Receipt this Period
100.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11385]

B. Full Name (Last, First, Middle Initial)
CHACON, ROY, BEULAH, ,

Mailing Address P.O. BOX 787

City BISHOP	State CA	Zip Code 93515
----------------	-------------	-------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 29 / 2020

Transaction ID : SA11A1.14198

Amount of Each Receipt this Period
1000.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11397]

C. Full Name (Last, First, Middle Initial)
CIOCIA, JAMES, C, ,

Mailing Address 16305 MILLAN D AVILA

City TAMPA	State FL	Zip Code 33613
---------------	-------------	-------------------

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

Name of Employer NATIONAL TAX AND FINANCIAL SERVICES	Occupation PRESIDENT
---	-------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 29 / 2020

Transaction ID : SA11A1.14228

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	1600.00
TOTAL This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 14 OF 103
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CLARKE, JOHN, M, ,

Mailing Address 8498 TALLAHASSEE DRIVE NE

City ST. PETERSBURG	State FL	Zip Code 33705
------------------------	-------------	-------------------

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

Name of Employer HCA	Occupation PHYSICIAN
-------------------------	-------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1925.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 08 / 2020

Transaction ID : SA11A1.11987

Amount of Each Receipt this Period
100.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11357]

B. Full Name (Last, First, Middle Initial)
CLERKIN, ROBERT, , ,

Mailing Address 206 COTTONWOOD RD

City ARNOLD	State MO	Zip Code 63010
----------------	-------------	-------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 24 / 2020

Transaction ID : SA11A1.13404

Amount of Each Receipt this Period
1000.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11394]

C. Full Name (Last, First, Middle Initial)
COHN, DOUGLAS, B, ,

Mailing Address 4616 SAN MIGUEL STREET

City TAMPA	State FL	Zip Code 33629
---------------	-------------	-------------------

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

Name of Employer TAMPA BAT TRANE	Occupation OWNER
-------------------------------------	---------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 17 / 2020

Transaction ID : SA11A1.12881

Amount of Each Receipt this Period
500.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11389]

SUBTOTAL of Receipts This Page (optional)..... ▶	1600.00
TOTAL This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 15 OF 103
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
COLLINS, HENRY, L, , III

Mailing Address P.O. BOX 237

City VERBANK State NY Zip Code 12585

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 21 / 2020

Transaction ID : SA11A1.13187

Amount of Each Receipt this Period
250.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11392]

B. Full Name (Last, First, Middle Initial)
COLLINS, HENRY, L, , III

Mailing Address P.O. BOX 237

City VERBANK State NY Zip Code 12585

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 21 / 2020

Transaction ID : SA11A1.13188

Amount of Each Receipt this Period
250.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11392]

C. Full Name (Last, First, Middle Initial)
COLLINS, HENRY, L, , III

Mailing Address P.O. BOX 237

City VERBANK State NY Zip Code 12585

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1575.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 27 / 2020

Transaction ID : SA11A1.13773

Amount of Each Receipt this Period
75.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11396]

SUBTOTAL of Receipts This Page (optional)..... ▶ 575.00

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

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

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

FOR LINE NUMBER: PAGE 16 OF 103
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CRANNELL, DAVID, , ,

Mailing Address 5800 SR 80 WEST
LOT 82

City LABELLE State FL Zip Code 33935

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 14 / 2020

Transaction ID : SA11A1.12323

Amount of Each Receipt this Period
 250.00

Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11385]

B. Full Name (Last, First, Middle Initial)
D'ORSIE, FRANK, J, MR.,

Mailing Address 36 W BROADWAY

City RED LION State PA Zip Code 17356-2102

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
553.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 21 / 2020

Transaction ID : SA11A1.13126

Amount of Each Receipt this Period
 20.00

Memo Item

C. Full Name (Last, First, Middle Initial)
D'ORSIE, FRANK, J, MR.,

Mailing Address 36 W BROADWAY

City RED LION State PA Zip Code 17356-2102

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
573.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2020

Transaction ID : SA11A1.14212

Amount of Each Receipt this Period
 20.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 290.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 OF 103
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
D'ORSIE, FRANK, J, MR.,

Mailing Address 36 W BROADWAY

City: RED LION State: PA Zip Code: 17356-2102

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

Name of Employer: RETIRED Occupation: RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 593.00

Date of Receipt: 07 / 29 / 2020

Transaction ID : SA11AI.14217

Amount of Each Receipt this Period: 20.00

Memo Item

B. Full Name (Last, First, Middle Initial)
DAY, PAMELA, , ,

Mailing Address 1513 GALES STREET NE

City: WASHINGTON State: DC Zip Code: 20002

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

Name of Employer: US CONGRESS Occupation: CHIEF OF STAFF

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 750.00

Date of Receipt: 07 / 29 / 2020

Transaction ID : SA11AI.14083

Amount of Each Receipt this Period: 250.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11397]

C. Full Name (Last, First, Middle Initial)
DEALOIA, PATRICIA, A, ,

Mailing Address 12042 SE PRESTWICK TERR

City: JUPITER State: FL Zip Code: 33469

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

Name of Employer: RETIRED Occupation: RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 500.00

Date of Receipt: 07 / 28 / 2020

Transaction ID : SA11AI.14022

Amount of Each Receipt this Period: 250.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11397]

SUBTOTAL of Receipts This Page (optional) ▶ 520.00

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

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

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

FOR LINE NUMBER: PAGE 18 OF 103
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DEININGER, JAMES, , ,

Mailing Address 5047 KERNWOOD COURT

City PALM HARBOR State FL Zip Code 34685

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 04 / 2020

Transaction ID : SA11A1.11655

Amount of Each Receipt this Period
 _____ 250.00

Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11357]

B. Full Name (Last, First, Middle Initial)
DEININGER, JAMES, , ,

Mailing Address 5047 KERNWOOD COURT

City PALM HARBOR State FL Zip Code 34685

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 850.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 22 / 2020

Transaction ID : SA11A1.13242

Amount of Each Receipt this Period
 _____ 500.00

Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11392]

C. Full Name (Last, First, Middle Initial)
DELOACH, SHERIN, , ,

Mailing Address 5 PINE HILL COURT

City BLUFFTON State SC Zip Code 29910

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

Name of Employer HBCS Occupation BILLER

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2020

Transaction ID : SA11A1.14264

Amount of Each Receipt this Period
 _____ 200.00

Memo Item

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

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

_____ 950.00

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

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

FOR LINE NUMBER: PAGE 19 OF 103
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
EDWARDS, GARRY, , ,

Mailing Address 2409 FULTON STREET SOUTHWEST

City LARGO State FL Zip Code 33774

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 210.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 18 / 2020

Transaction ID : SA11A1.12974

Amount of Each Receipt this Period
 _____ 50.00

Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11390]

B. Full Name (Last, First, Middle Initial)
EVENSON, JOSEPH, , ,

Mailing Address 14222 WUNDERLICH DRIVE

City HOUSTON State TX Zip Code 77069

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

Name of Employer ALIGHT Occupation BENEFITS ADMINISTRATOR

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 314.29

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 07 / 2020

Transaction ID : SA11A1.11758

Amount of Each Receipt this Period
 _____ 100.00

Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11357]

C. Full Name (Last, First, Middle Initial)
FOTOPOULOS, TED, , ,

Mailing Address 2166 CIELO CIRCLE EAST

City CLEARWATER State FL Zip Code 33759

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

Name of Employer NEW IMAGE DERMATOLOGY Occupation PHYSICIAN

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 11 / 2020

Transaction ID : SA11A1.12116

Amount of Each Receipt this Period
 _____ 250.00

Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11384]

SUBTOTAL of Receipts This Page (optional)..... ▶ _____ 400.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 20 OF 103	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
FOX, JASON, , ,

Mailing Address 13031 W. LINEBAUGH AVE

City TAMPA	State FL	Zip Code 33626
---------------	-------------	-------------------

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

Name of Employer OLIVER FOX PA	Occupation ATTORNEY
-----------------------------------	------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 29 / 2020

Transaction ID : SA11A1.14248

Amount of Each Receipt this Period
1000.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11403]

B. Full Name (Last, First, Middle Initial)
FROELICH, KALEB, , ,

Mailing Address 4707 WARREN STREET NW

City WASHINGTON	State DC	Zip Code 20004
--------------------	-------------	-------------------

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

Name of Employer HOLLAND & HART LLP	Occupation CONSULTANT
--	--------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
750.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 20 / 2020

Transaction ID : SA11A1.13055

Amount of Each Receipt this Period
250.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11390]

C. Full Name (Last, First, Middle Initial)
GASTON, GEORGE, R, ,

Mailing Address 803 CAMELLIA DR

City LARGO	State FL	Zip Code 33770
---------------	-------------	-------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 17 / 2020

Transaction ID : SA11A1.12880

Amount of Each Receipt this Period
50.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11389]

SUBTOTAL of Receipts This Page (optional)..... ▶	1300.00
TOTAL This Period (last page this line number only)..... ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 OF 103
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GEORGES, JOHN, B, ,

Mailing Address 15200 SOBEY ROAD

City SARATOGA State CA Zip Code 95070

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

Name of Employer SELF-EMPLOYED Occupation ENGINEER

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 14 / 2020

Transaction ID : SA11A1.12328

Amount of Each Receipt this Period
250.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11385]

B. Full Name (Last, First, Middle Initial)
GILBERT, DONALD, , ,

Mailing Address 147 98TH AVENUE NORTHEAST

City ST. PETERSBURG State FL Zip Code 33702

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 09 / 2020

Transaction ID : SA11A1.12066

Amount of Each Receipt this Period
250.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11358]

C. Full Name (Last, First, Middle Initial)
GRIFFIS, CADE, , ,

Mailing Address 10066 COUNTY ROAD 133

City CELINA State TX Zip Code 75009

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

Name of Employer D-BAT SPORTS Occupation OWNER

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 24 / 2020

Transaction ID : SA11A1.13461

Amount of Each Receipt this Period
250.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11394]

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00

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

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

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

FOR LINE NUMBER: PAGE 22 OF 103
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HARRISON, WILLIAM, , ,

Mailing Address 1037 SOUTHWEST 22ND STREET

City MIAMI State FL Zip Code 33129

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 15 / 2020

Transaction ID : SA11A1.12464

Amount of Each Receipt this Period
 _____ 100.00

Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11386]

B. Full Name (Last, First, Middle Initial)
HEIST, CHARLES, H, ,

Mailing Address 2241 ALLIGATOR CREEK RD.

City CLEARWATER State FL Zip Code 33765

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 925.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 24 / 2020

Transaction ID : SA11A1.13520

Amount of Each Receipt this Period
 _____ 125.00

Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11394]

C. Full Name (Last, First, Middle Initial)
HERBERT, MARSHALL, LINTON, ,

Mailing Address 216 HARBOR VIEW LN

City LARGO State FL Zip Code 33770-4007

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

Name of Employer SELF-EMPLOYED Occupation MD

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 4700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2020

Transaction ID : SA11A1.14209

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ _____ 1225.00

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

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

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

FOR LINE NUMBER: PAGE 23 OF 103
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HODGE, LLOYD, W, , JR

Mailing Address 114 10TH ST E

City SAINT PETERSBURG State FL Zip Code 33715

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 17 / 2020

Transaction ID : SA11A1.12898

Amount of Each Receipt this Period
 _____ 50.00

Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11389]

B. Full Name (Last, First, Middle Initial)
HONKAMP, MIKE, , ,

Mailing Address 12720 LEE COURT

City ELM GROVE State WI Zip Code 53122

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 11 / 2020

Transaction ID : SA11A1.12120

Amount of Each Receipt this Period
 _____ 250.00

Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11384]

C. Full Name (Last, First, Middle Initial)
HUGHES, ANNE, , ,

Mailing Address 3812 MISTY WAY

City DESTIN State FL Zip Code 32541

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

Name of Employer BEACON HOUSE ADOPTION SERVICES Occupation DIRECTOR

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 205.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 14 / 2020

Transaction ID : SA11A1.12451

Amount of Each Receipt this Period
 _____ 100.00

Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11386]

SUBTOTAL of Receipts This Page (optional)..... ▶ _____ 400.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 24 OF 103	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HYATT, DONALD, W, ,

Mailing Address 1111 HUMMINGBIRD LN

City ADKINS	State TX	Zip Code 78101
----------------	-------------	-------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 29 / 2020

Transaction ID : SA11A1.14214

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
JANOWIECKI, MARTIN, , ,

Mailing Address 216 SEA ISLAND DR

City PONTE VEDRA BEACH	State FL	Zip Code 32082
---------------------------	-------------	-------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 09 / 2020

Transaction ID : SA11A1.12044

Amount of Each Receipt this Period
250.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11358]

C. Full Name (Last, First, Middle Initial)
JANOWIECKI, MARTIN, , ,

Mailing Address 216 SEA ISLAND DR

City PONTE VEDRA BEACH	State FL	Zip Code 32082
---------------------------	-------------	-------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
255.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 13 / 2020

Transaction ID : SA11A1.12183

Amount of Each Receipt this Period
5.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11384]

SUBTOTAL of Receipts This Page (optional)..... ▶	755.00
TOTAL This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 25 OF 103
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JANOWIECKI, MARTIN, , ,
 Mailing Address 216 SEA ISLAND DR
 City PONTE VEDRA BEACH State FL Zip Code 32082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 505.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 13 / 2020
Transaction ID : SA11A1.12184
 Amount of Each Receipt this Period
 250.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11384]

B. Full Name (Last, First, Middle Initial)
JAVDAN, DAVID, , ,
 Mailing Address 7205 ARROWOOD ROAD
 City BETHESDA State MD Zip Code 20817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ALVAREZ MARSAL Occupation CONSULTANT
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 16 / 2020
Transaction ID : SA11A1.12749
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11387]

C. Full Name (Last, First, Middle Initial)
JENSEN, LARRY, , ,
 Mailing Address 880 SAND PINE DR N.E.
 City ST PETERSBURG State FL Zip Code 33703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer JOULE YACHT TRANSPORT INC Occupation PRESIDENT
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 2465.19

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 28 / 2020
Transaction ID : SA11A1.13837
 Amount of Each Receipt this Period
 250.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11396]

SUBTOTAL of Receipts This Page (optional)..... ▶ 1500.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 26 OF 103
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JOHNSON, ANN, L, ,

Mailing Address 1220 SOUTH OCEAN BOULEVARD

City PALM BEACH	State FL	Zip Code 33480
--------------------	-------------	-------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 23 / 2020

Transaction ID : SA11AI.13306

Amount of Each Receipt this Period
5600.00

Memo Item
SEE REDESIGNATION

B. Full Name (Last, First, Middle Initial)
JOHNSON, ANN, L, ,

Mailing Address 1220 SOUTH OCEAN BOULEVARD

City PALM BEACH	State FL	Zip Code 33480
--------------------	-------------	-------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 23 / 2020

Transaction ID : SA11AI.13307

Amount of Each Receipt this Period
- 2800.00

Memo Item
REDESIGNATION TO GENERAL

C. Full Name (Last, First, Middle Initial)
JOHNSON, ANN, L, ,

Mailing Address 1220 SOUTH OCEAN BOULEVARD

City PALM BEACH	State FL	Zip Code 33480
--------------------	-------------	-------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 23 / 2020

Transaction ID : SA11AI.13308

Amount of Each Receipt this Period
2800.00

Memo Item
REDESIGNATION FROM PRIMARY

SUBTOTAL of Receipts This Page (optional).....▶	5600.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 27 OF 103		
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JOHNSON, CHARLES, B, ,

Mailing Address 1220 SOUTH OCEAN BOULEVARD

City PALM BEACH	State FL	Zip Code 33480
--------------------	-------------	-------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 23 / 2020

Transaction ID : SA11AI.13302

Amount of Each Receipt this Period
5600.00

Memo Item
SEE REDESIGNATION

B. Full Name (Last, First, Middle Initial)
JOHNSON, CHARLES, B, ,

Mailing Address 1220 SOUTH OCEAN BOULEVARD

City PALM BEACH	State FL	Zip Code 33480
--------------------	-------------	-------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 23 / 2020

Transaction ID : SA11AI.13303

Amount of Each Receipt this Period
- 2800.00

Memo Item
REDESIGNATION TO GENERAL

C. Full Name (Last, First, Middle Initial)
JOHNSON, CHARLES, B, ,

Mailing Address 1220 SOUTH OCEAN BOULEVARD

City PALM BEACH	State FL	Zip Code 33480
--------------------	-------------	-------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 23 / 2020

Transaction ID : SA11AI.13304

Amount of Each Receipt this Period
2800.00

Memo Item
REDESIGNATION FROM PRIMARY

SUBTOTAL of Receipts This Page (optional)..... ▶	5600.00
TOTAL This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 28 OF 103
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JONES, BRYANT, , ,
 Mailing Address 2211 7TH STREET NORTH
 City ST. PETERSBURG State FL Zip Code 33704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SABAL TRUST Occupation CEO
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 1525.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2020
Transaction ID : SA11A1.14254
 Amount of Each Receipt this Period
 375.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11403]

B. Full Name (Last, First, Middle Initial)
KANSU, NEVZAT, , ,
 Mailing Address 1156 RIVER BAY RD.
 City ANNAPOLIS State MD Zip Code 21409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NEKA INC Occupation OWNER
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 23 / 2020
Transaction ID : SA11A1.13380
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11393]

C. Full Name (Last, First, Middle Initial)
KEINATH, WARREN, C, ,
 Mailing Address 24 RAVENS POINTE DR.
 City LAKE SAINT LOUIS State MO Zip Code 63367
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 07 / 2020
Transaction ID : SA11A1.11839
 Amount of Each Receipt this Period
 250.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11357]

SUBTOTAL of Receipts This Page (optional)..... ▶ 1625.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 29 OF 103
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
KEMP, STACY, , ,
 Mailing Address 2871 KENSINGTON TRCE
 City State Zip Code
 TARPON SPRINGS FL 34688
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 KEMP RUGE GREEN ATTORNEY
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 5600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 10 2020
Transaction ID : SA11A1.12082
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11359]

B. Full Name (Last, First, Middle Initial)
KEMP, STACY, , ,
 Mailing Address 2871 KENSINGTON TRCE
 City State Zip Code
 TARPON SPRINGS FL 34688
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 KEMP RUGE GREEN ATTORNEY
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 4600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 14 2020
Transaction ID : SA11A1.12302
 Amount of Each Receipt this Period
 - 1000.00
 Memo Item
 CHARGEBACK

C. Full Name (Last, First, Middle Initial)
KING, KENNETH, , ,
 Mailing Address PO BOX 158
 City State Zip Code
 LAMONT FL 32336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 13 2020
Transaction ID : SA11A1.12186
 Amount of Each Receipt this Period
 250.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11384]

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 30 OF 103
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
KITTLE, LORI, , ,
 Mailing Address 2108 ELMEN ST
 City HOUSTON State TX Zip Code 77019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LANDRYS INC Occupation SVP OF LOYALTY
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 27 / 2020
Transaction ID : SA11A1.13729
 Amount of Each Receipt this Period
 100.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11396]

B. Full Name (Last, First, Middle Initial)
KITTLE, LORI, , ,
 Mailing Address 2108 ELMEN ST
 City HOUSTON State TX Zip Code 77019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LANDRYS INC Occupation SVP OF LOYALTY
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 28 / 2020
Transaction ID : SA11A1.14035
 Amount of Each Receipt this Period
 100.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11397]

C. Full Name (Last, First, Middle Initial)
KLEIN, MICHAEL, , ,
 Mailing Address 5220 KLESS MILL ROAD
 City SYKESVILLE State MD Zip Code 21784
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CHARLES A. KLEIN SONS INC. Occupation MECHANICAL CONT
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2020
Transaction ID : SA11A1.14185
 Amount of Each Receipt this Period
 250.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11397]

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 31 OF 103	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
12	13a	13b	14
			15

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
KNIGHT, PATRICIA, , ,

Mailing Address 817 NORTH LINCOLN STREET

City ARLINGTON	State VA	Zip Code 22201
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FEC ID number of contributing federal political committee. **C**

Name of Employer KNIGHT CAPITOL CONSULTANTS	Occupation CONSULTANT
--	--------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 24 / 2020

Transaction ID : SA11A1.13523

Amount of Each Receipt this Period
500.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11394]

B. Full Name (Last, First, Middle Initial)
KOERSELMAN, BERNARD, , ,

Mailing Address 18737 N CELOSIA LN

City SURPRISE	State AZ	Zip Code 85387
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FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 29 / 2020

Transaction ID : SA11A1.14073

Amount of Each Receipt this Period
25.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11397]

C. Full Name (Last, First, Middle Initial)
KOMNINOS, SPIRO, , ,

Mailing Address 4124 WEST LINEBAUGH AVENUE

City TAMPA	State FL	Zip Code 33624
---------------	-------------	-------------------

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

Name of Employer KOMNINOS LAW FIRM PA	Occupation LAWYER
--	----------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
251.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 02 / 2020

Transaction ID : SA11A1.11596

Amount of Each Receipt this Period
251.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.6689]

SUBTOTAL of Receipts This Page (optional).....▶	776.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 32 OF 103
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
KOPKO, CHARLES, , ,
 Mailing Address 30646 TURTLE CRK
 City FARMINGTON HILLS State MI Zip Code 48331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TNG Occupation SALES
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2020
Transaction ID : SA11A1.14207
 Amount of Each Receipt this Period
 50.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11397]

B. Full Name (Last, First, Middle Initial)
LAUTER, ROBERT, , ,
 Mailing Address 757 BINNACLE DR
 City NAPLES State FL Zip Code 34103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASTER SPAS Occupation CEO
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 25 / 2020
Transaction ID : SA11A1.13576
 Amount of Each Receipt this Period
 50.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11395]

C. Full Name (Last, First, Middle Initial)
LAWLOR, JEFFREY, P, ,
 Mailing Address 100 BLUFFVIEW DR
 507A
 City BELLLEAIR BLUFFS State FL Zip Code 33770
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 375.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 21 / 2020
Transaction ID : SA11A1.13129
 Amount of Each Receipt this Period
 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

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

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

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(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LEVINE, STUART, , ,

Mailing Address 1208 EAST KENNEDY BOULEVARD

City TAMPA State FL Zip Code 33602

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

Name of Employer WALTERS LEVINE Occupation ATTORNEY

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 01 / 2020

Transaction ID : SA11A1.11441

Amount of Each Receipt this Period
 _____ 250.00

Memo Item
 EARMARKED THROUGH WINRED [SA11A1.6686]

B. Full Name (Last, First, Middle Initial)
LILLARD, JOHN, S, ,

Mailing Address 1340 N WAUKEGAN RD

City LAKE FOREST State IL Zip Code 60045

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 23 / 2020

Transaction ID : SA11A1.13298

Amount of Each Receipt this Period
 _____ 250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
LLOYD, CINDY, , ,

Mailing Address 15885 ROUTE 6

City SMETHPORT State PA Zip Code 16749

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 275.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 17 / 2020

Transaction ID : SA11A1.12883

Amount of Each Receipt this Period
 _____ 100.00

Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11389]

SUBTOTAL of Receipts This Page (optional)..... ▶ _____ 600.00

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

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

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

FOR LINE NUMBER: PAGE 34 OF 103
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LOUDON, GREG, , ,

Mailing Address 14010 VENUS WAY

City ANCHORAGE State AK Zip Code 99515

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

Name of Employer PARKER, SMITH FEEK Occupation INSURANCE

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 08 2020

Transaction ID : SA11A1.12015

Amount of Each Receipt this Period
500.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11358]

B. Full Name (Last, First, Middle Initial)
MAKKI, MARK, , ,

Mailing Address 5802 NICHOLSON LANE

City NORTH BETHESDA State MD Zip Code 20852

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

Name of Employer GREENBELT ENT Occupation OFFICE MANAGER

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
210.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 09 2020

Transaction ID : SA11A1.12078

Amount of Each Receipt this Period
50.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11359]

C. Full Name (Last, First, Middle Initial)
MAKKI, MARK, , ,

Mailing Address 5802 NICHOLSON LANE

City NORTH BETHESDA State MD Zip Code 20852

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

Name of Employer GREENBELT ENT Occupation OFFICE MANAGER

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
610.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 29 2020

Transaction ID : SA11A1.14076

Amount of Each Receipt this Period
400.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11397]

SUBTOTAL of Receipts This Page (optional)..... ▶ 950.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 35 OF 103	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MASSEY, HARVEY, L, ,

Mailing Address 1461 VIA TUSCANY

City WINTER PARK	State FL	Zip Code 32789
---------------------	-------------	-------------------

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

Name of Employer MASSEY PEST CONTROL	Occupation OWNER
---	---------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 29 / 2020

Transaction ID : SA11AI.14232

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MCBRIDE, ANITA, , ,

Mailing Address 5016 UPTON ST., NW

City WASHINGTON	State DC	Zip Code 20016
--------------------	-------------	-------------------

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

Name of Employer SELF-EMPLOYED	Occupation CONSULTANT
-----------------------------------	--------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 28 / 2020

Transaction ID : SA11AI.13943

Amount of Each Receipt this Period
500.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11396]

C. Full Name (Last, First, Middle Initial)
MCCAIN, MICHAEL, , ,

Mailing Address 100 OAKMONT LN

City BELLEAIR	State FL	Zip Code 33756
------------------	-------------	-------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
256.29

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 17 / 2020

Transaction ID : SA11AI.12872

Amount of Each Receipt this Period
100.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11389]

SUBTOTAL of Receipts This Page (optional)..... ▶	1100.00
TOTAL This Period (last page this line number only)..... ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 OF 103
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MCCARTHY, TERENCE, , ,

Mailing Address 5801 ULMERTON RD

City CLEARWATER State FL Zip Code 33760

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

Name of Employer TJM PROPERTIES Occupation REAL ESTATE INVESTOR

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 24 / 2020

Transaction ID : SA11A1.13489

Amount of Each Receipt this Period
250.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11394]

B. Full Name (Last, First, Middle Initial)
MCKENNEY, JOHN, , ,

Mailing Address 15000 GULF BLVD
APT 508

City MADEIRA BEACH State FL Zip Code 33708

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
215.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 06 / 2020

Transaction ID : SA11A1.11718

Amount of Each Receipt this Period
15.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11357]

C. Full Name (Last, First, Middle Initial)
MCKENNEY, JOHN, , ,

Mailing Address 15000 GULF BLVD
APT 508

City MADEIRA BEACH State FL Zip Code 33708

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
240.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 08 / 2020

Transaction ID : SA11A1.11919

Amount of Each Receipt this Period
25.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11357]

SUBTOTAL of Receipts This Page (optional)..... ▶ 290.00

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

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

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

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 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MCNULTY, ANDREW, , ,
 Mailing Address PO BOX 13275
 City PORTLAND State OR Zip Code 97213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 14 / 2020
Transaction ID : SA11A1.12441
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11386]

B. Full Name (Last, First, Middle Initial)
MEINTZER, KYLE, , ,
 Mailing Address 14310 QUAIL RAVINE CT
 City RENO State NV Zip Code 89511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LINCOLN FINANCIAL ADVISORS Occupation CFP
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 23 / 2020
Transaction ID : SA11A1.13336
 Amount of Each Receipt this Period
 50.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11393]

C. Full Name (Last, First, Middle Initial)
MILLER, JIM, , ,
 Mailing Address 860 43RD AVENUE
 City SAN FRANCISCO State CA Zip Code 94121
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 1005.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 14 / 2020
Transaction ID : SA11A1.12331
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11385]

SUBTOTAL of Receipts This Page (optional)..... ▶ 2050.00
TOTAL This Period (last page this line number only)..... ▶

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

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

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 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MILLER, JIM, , ,
Mailing Address 15290 WEADON FARM LANE

City WATERFORD State VA Zip Code 20197

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

Name of Employer QUANTUM LEAP RESEARCH Occupation CEO

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 28 / 2020

Transaction ID : SA11A1.13931

Amount of Each Receipt this Period
1000.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11396]

B. Full Name (Last, First, Middle Initial)
MOORE, KEVIN, , ,
Mailing Address 2774 E ROSEWOOD DR

City MOORESVILLE State IN Zip Code 46158

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

Name of Employer ANTHEM INC Occupation BI CONSULTANT

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 09 / 2020

Transaction ID : SA11A1.12055

Amount of Each Receipt this Period
1000.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11358]

C. Full Name (Last, First, Middle Initial)
MOTAHARIAN, HOUMAN, , ,
Mailing Address 60 ANDOVER TERRACE

City GLEN ROCK State NJ Zip Code 07452

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

Name of Employer SELF-EMPLOYED Occupation FINANCE

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 29 / 2020

Transaction ID : SA11A1.14244

Amount of Each Receipt this Period
1000.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11403]

SUBTOTAL of Receipts This Page (optional)..... ▶ 3000.00

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

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

Use separate schedule(s)
for each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MOTAZEDI, ABBAS, , ,

Mailing Address 1004 WALKER RD

City GREAT FALLS	State VA	Zip Code 22066
---------------------	-------------	-------------------

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

Name of Employer ABBAS MOTAZEDI	Occupation PHYSICIAN
------------------------------------	-------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
750.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 29 / 2020

Transaction ID : SA11A1.14050

Amount of Each Receipt this Period
150.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11397]

B. Full Name (Last, First, Middle Initial)
NASET, JIM, , ,

Mailing Address 5000 94TH ST N

City ST. PETE	State FL	Zip Code 33702
------------------	-------------	-------------------

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

Name of Employer PREOMARINE, INC	Occupation VP PARTNER
-------------------------------------	--------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
417.95

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 29 / 2020

Transaction ID : SA11A1.14267

Amount of Each Receipt this Period
417.95

Memo Item
IN-KIND: CATERING SERVICES

C. Full Name (Last, First, Middle Initial)
NEWMAN, ROBERT, L, ,

Mailing Address 208 DRIFTWOOD LANE

City LARGO	State FL	Zip Code 33770
---------------	-------------	-------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 20 / 2020

Transaction ID : SA11A1.13047

Amount of Each Receipt this Period
250.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11390]

SUBTOTAL of Receipts This Page (optional)..... ▶	817.95
TOTAL This Period (last page this line number only)..... ▶	

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

Use separate schedule(s)
for each category of the
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(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NORTON, RITA, , ,
 Mailing Address 3530 PINETREE TERRACE
 City FALLS CHURCH State VA Zip Code 22041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AMERISOURCEBERGEN Occupation SVP GOVERNMENT AFFAIRS
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 01 / 2020
Transaction ID : SA11A1.11455
 Amount of Each Receipt this Period
 500.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11A1.6686]

B. Full Name (Last, First, Middle Initial)
OCONNELL, TRISTAN, , ,
 Mailing Address 7809 3RD AVE S
 City ST. PETERSBURG State FL Zip Code 33707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 06 / 2020
Transaction ID : SA11A1.11706
 Amount of Each Receipt this Period
 250.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11357]

C. Full Name (Last, First, Middle Initial)
ORLANDO, MATTHEW, , ,
 Mailing Address 1406 WAYNEPORT RD S.
 City MACEDON State NY Zip Code 14502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 950.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2020
Transaction ID : SA11A1.14060
 Amount of Each Receipt this Period
 500.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11397]

SUBTOTAL of Receipts This Page (optional)..... ▶ 1250.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s)
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 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PASLEY, SCOTT, , ,

Mailing Address 3770 NORTHEAST 199TH TERRACE

City AVENTURA State FL Zip Code 33180

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 23 / 2020

Transaction ID : SA11A1.13375

Amount of Each Receipt this Period
250.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11393]

B. Full Name (Last, First, Middle Initial)
PERRELL, CHARLES, , ,

Mailing Address 26300 SILENT HILLS LANE

City LOS ALTOS HILLS State CA Zip Code 94022

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 16 / 2020

Transaction ID : SA11A1.12666

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name (Last, First, Middle Initial)
POSEY, THOMAS, , ,

Mailing Address 2920 ELLA LEE LN

City HOUSTON State TX Zip Code 77019

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

Name of Employer ORBIX Occupation ATTORNEY

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 14 / 2020

Transaction ID : SA11A1.12369

Amount of Each Receipt this Period
100.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11385]

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

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(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
POSEY, THOMAS, , ,

Mailing Address 2920 ELLA LEE LN

City HOUSTON State TX Zip Code 77019

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

Name of Employer ORBIX Occupation ATTORNEY

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 16 / 2020

Transaction ID : SA11A1.12787

Amount of Each Receipt this Period
100.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11387]

B. Full Name (Last, First, Middle Initial)
POSEY, THOMAS, , ,

Mailing Address 2920 ELLA LEE LN

City HOUSTON State TX Zip Code 77019

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

Name of Employer ORBIX Occupation ATTORNEY

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
900.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 28 / 2020

Transaction ID : SA11A1.13893

Amount of Each Receipt this Period
100.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11396]

C. Full Name (Last, First, Middle Initial)
REHNKE, TAMMY, , ,

Mailing Address 3011 82ND WAY N

City SAINT PETERSBURG State FL Zip Code 33710

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

Name of Employer ROBERT REHNKE Occupation PLASTIC SURGEON

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
450.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 08 / 2020

Transaction ID : SA11A1.11932

Amount of Each Receipt this Period
250.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11357]

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00

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

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

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

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(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
REID, WILLIAM, , ,

Mailing Address 445 MADISON STREET

City DENVER State CO Zip Code 80206

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2020

Transaction ID : SA11A1.14070

Amount of Each Receipt this Period
 _____ 500.00

Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11397]

B. Full Name (Last, First, Middle Initial)
RHEIN, PETER, , ,

Mailing Address 1407 HOLMBY AVENUE

City LOS ANGELES State CA Zip Code 90024

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

Name of Employer SELF-EMPLOYED Occupation REAL ESTATE

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 15 / 2020

Transaction ID : SA11A1.12595

Amount of Each Receipt this Period
 _____ 250.00

Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11387]

C. Full Name (Last, First, Middle Initial)
RICHMOND, JOEL, , ,

Mailing Address 63 VALLEY VIEW RD

City CLAYSVILLE State PA Zip Code 15323

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

Name of Employer OTIS EASTERN SERVICE Occupation PROJECT MANAGER

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 201.66

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 17 / 2020

Transaction ID : SA11A1.12832

Amount of Each Receipt this Period
 _____ 10.00

Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11389]

SUBTOTAL of Receipts This Page (optional)..... ▶ _____ 760.00

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

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

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

FOR LINE NUMBER: PAGE 44 OF 103
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
RICHMOND, JOEL, , ,

Mailing Address 63 VALLEY VIEW RD

City: CLAYSVILLE State: PA Zip Code: 15323

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

Name of Employer: OTIS EASTERN SERVICE Occupation: PROJECT MANAGER

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 211.66

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 20 / 2020

Transaction ID : SA11A1.13070

Amount of Each Receipt this Period
 _____ 10.00

Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11391]

B. Full Name (Last, First, Middle Initial)
RICHMOND, JOEL, , ,

Mailing Address 63 VALLEY VIEW RD

City: CLAYSVILLE State: PA Zip Code: 15323

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

Name of Employer: OTIS EASTERN SERVICE Occupation: PROJECT MANAGER

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 224.16

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 21 / 2020

Transaction ID : SA11A1.13194

Amount of Each Receipt this Period
 _____ 12.50

Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11392]

C. Full Name (Last, First, Middle Initial)
RICHMOND, JOEL, , ,

Mailing Address 63 VALLEY VIEW RD

City: CLAYSVILLE State: PA Zip Code: 15323

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

Name of Employer: OTIS EASTERN SERVICE Occupation: PROJECT MANAGER

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 234.16

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 24 / 2020

Transaction ID : SA11A1.13532

Amount of Each Receipt this Period
 _____ 10.00

Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11395]

SUBTOTAL of Receipts This Page (optional)..... ▶ _____ 32.50

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

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

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

FOR LINE NUMBER: PAGE 45 OF 103
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
RINKER, LEIGHAN, , ,
Mailing Address PO BOX 3485

City WEST PALM BEACH State FL Zip Code 33402

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
237.50

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 28 / 2020

Transaction ID : SA11A1.13927

Amount of Each Receipt this Period
50.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11396]

B. Full Name (Last, First, Middle Initial)
RINKER, LEIGHAN, , ,
Mailing Address PO BOX 3485

City WEST PALM BEACH State FL Zip Code 33402

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
287.50

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 28 / 2020

Transaction ID : SA11A1.13928

Amount of Each Receipt this Period
50.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11396]

C. Full Name (Last, First, Middle Initial)
ROBERTSON, PAUL, , ,
Mailing Address 3436 MAGAZINE STREET #617

City NEW ORLEANS State LA Zip Code 70115

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 23 / 2020

Transaction ID : SA11A1.13360

Amount of Each Receipt this Period
250.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11393]

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00

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

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

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

FOR LINE NUMBER: PAGE 46 OF 103
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
RUGE, ALYSSA, A., ,
Mailing Address 18007 MALAKAI ISLE DRIVE

City TAMPA State FL Zip Code 33647

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

Name of Employer KEMP RUGE AND GREEN Occupation ATTORNEY

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 01 / 2020

Transaction ID : SA11A1.11448

Amount of Each Receipt this Period
 250.00

Memo Item
 EARMARKED THROUGH WINRED [SA11A1.6686]

B. Full Name (Last, First, Middle Initial)
SARAFIAN, BERC, , ,
Mailing Address 408 22ND STREET

City BELLEAIR BEACH State FL Zip Code 33786

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

Name of Employer SELF-EMPLOYED Occupation MD

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2020

Transaction ID : SA11A1.14108

Amount of Each Receipt this Period
 500.00

Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11397]

C. Full Name (Last, First, Middle Initial)
SCHULTZ, JANE, , ,
Mailing Address 1436 NORTH MADISON AVENUE

City MASON CITY State IA Zip Code 50401

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2020

Transaction ID : SA11A1.14119

Amount of Each Receipt this Period
 5600.00

Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11397]:
 SEE REDESIGNATION

SUBTOTAL of Receipts This Page (optional)..... ▶ 6350.00

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

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

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

FOR LINE NUMBER: PAGE 47 OF 103
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SCHULTZ, JANE, , ,
 Mailing Address 1436 NORTH MADISON AVENUE
 City MASON CITY State IA Zip Code 50401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 2800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2020
Transaction ID : SA11AI.14120
 Amount of Each Receipt this Period
 - 2800.00
 Memo Item
 REDESIGNATION TO GENERAL

B. Full Name (Last, First, Middle Initial)
SCHULTZ, JANE, , ,
 Mailing Address 1436 NORTH MADISON AVENUE
 City MASON CITY State IA Zip Code 50401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 5600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2020
Transaction ID : SA11AI.14121
 Amount of Each Receipt this Period
 2800.00
 Memo Item
 REDESIGNATION FROM PRIMARY

C. Full Name (Last, First, Middle Initial)
SCHULTZ, JEFF, , ,
 Mailing Address 1436 NORTH MADISON AVENUE
 City MASON CITY State IA Zip Code 50401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 5600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2020
Transaction ID : SA11AI.14123
 Amount of Each Receipt this Period
 5600.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11397]:
 SEE REDESIGNATION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5600.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 48 OF 103	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
12	13a	13b	14
			15

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SCHULTZ, JEFF, , ,

Mailing Address 1436 NORTH MADISON AVENUE

City MASON CITY	State IA	Zip Code 50401
--------------------	-------------	-------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 , , 2800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 29 / 2020

Transaction ID : SA11AI.14124

Amount of Each Receipt this Period
 , , - 2800.00

Memo Item
REDESIGNATION TO GENERAL

B. Full Name (Last, First, Middle Initial)
SCHULTZ, JEFF, , ,

Mailing Address 1436 NORTH MADISON AVENUE

City MASON CITY	State IA	Zip Code 50401
--------------------	-------------	-------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 , , 5600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 29 / 2020

Transaction ID : SA11AI.14125

Amount of Each Receipt this Period
 , , 2800.00

Memo Item
REDESIGNATION FROM PRIMARY

C. Full Name (Last, First, Middle Initial)
SCULLY, MARK, , ,

Mailing Address 125 BELLEVIEW BOULEVARD

City BELLEAIR	State FL	Zip Code 33756
------------------	-------------	-------------------

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

Name of Employer GREEN COURTE PARTNERS	Occupation REAL ESTATE
---	---------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 , , 269.90

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 06 / 2020

Transaction ID : SA11AI.11671

Amount of Each Receipt this Period
 , , 19.90

Memo Item

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

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

<input type="text" value=""/> , <input type="text" value=""/> , <input type="text" value=""/> 19.90
<input type="text" value=""/> , <input type="text" value=""/> , <input type="text" value=""/>

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

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

FOR LINE NUMBER: PAGE 49 OF 103
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SEPAHPOUR, FARROKH, , ,
Mailing Address 45546 RUISLIP MANOR WAY

City: STERLING State: VA Zip Code: 20166

FEC ID number of contributing federal political committee: C

Name of Employer: LOUDOUN COUNTY GOVERNMENT VIRGINIA Occupation: MANAGER

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 500.00

Date of Receipt: 07 / 24 / 2020
Transaction ID : SA11A1.13531

Amount of Each Receipt this Period: 100.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11395]

B. Full Name (Last, First, Middle Initial)
SEYED-MAKKI, NOUSHIN, , ,
Mailing Address 10 SAINTSBURY

City: IRVINE State: CA Zip Code: 92602

FEC ID number of contributing federal political committee: C

Name of Employer: HBCS, INC Occupation: ACCOUNTING

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 1700.00

Date of Receipt: 07 / 29 / 2020
Transaction ID : SA11A1.14061

Amount of Each Receipt this Period: 1500.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11397]

C. Full Name (Last, First, Middle Initial)
SIMON, DEB, , ,
Mailing Address 114 BAYSIDE DRIVE

City: CLEARWATER State: FL Zip Code: 33767

FEC ID number of contributing federal political committee: C

Name of Employer: RETIRED Occupation: RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 205.00

Date of Receipt: 07 / 14 / 2020
Transaction ID : SA11A1.12340

Amount of Each Receipt this Period: 100.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11385]

SUBTOTAL of Receipts This Page (optional) ▶ 1700.00

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

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

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

FOR LINE NUMBER: (check only one)		PAGE 50 OF 103	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SPEARS, JAMES, B, ,

Mailing Address 441 BATH CLUB BOULEVARD NORTH

City NORTH REDINGTON BEACH	State FL	Zip Code 33708
-------------------------------	-------------	-------------------

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

Name of Employer PENINSULAR MECHANICAL	Occupation ENGINEER
---	------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 21 / 2020

Transaction ID : SA11A1.13134

Amount of Each Receipt this Period
50.00

Memo Item

B. Full Name (Last, First, Middle Initial)
SULLIVAN, KATARIINA, , ,

Mailing Address 1362 RICHMOND ROAD

City WINTER PARK	State FL	Zip Code 32789
---------------------	-------------	-------------------

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

Name of Employer SELF-EMPLOYED	Occupation WEB DESIGNER
-----------------------------------	----------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 27 / 2020

Transaction ID : SA11A1.13658

Amount of Each Receipt this Period
2800.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11395]

C. Full Name (Last, First, Middle Initial)
SUMPTER-LAPINSKI, MARY, , ,

Mailing Address 1210 R ST NW APT 304

City WASHINGTON	State DC	Zip Code 20009
--------------------	-------------	-------------------

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

Name of Employer GREENWICH BIOSCIENCES	Occupation GOVERNMENT AFFAIRS
---	----------------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 23 / 2020

Transaction ID : SA11A1.13356

Amount of Each Receipt this Period
550.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11393]

SUBTOTAL of Receipts This Page (optional).....▶	3400.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 51 OF 103
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
THOMPSON, ANDREW, J, ,
 Mailing Address 814 EAST 15TH STREET
 City INDIANAPOLIS State IN Zip Code 46202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LANDMARK ADVISORS Occupation CEO
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 275.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 17 / 2020
Transaction ID : SA11A1.12878
 Amount of Each Receipt this Period
 25.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11389]

B. Full Name (Last, First, Middle Initial)
TOM, GORDON, , ,
 Mailing Address 1815 W KEATING AVE
 City MESA State AZ Zip Code 85202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 28 / 2020
Transaction ID : SA11A1.13850
 Amount of Each Receipt this Period
 100.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11396]

C. Full Name (Last, First, Middle Initial)
VARNES, ANDREW, , ,
 Mailing Address 713 LEVY AVE
 City CHARLOTTESVILLE State VA Zip Code 22902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INVESTURE LLC Occupation CHIEF ACCOUNTING OFFICER
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 08 / 2020
Transaction ID : SA11A1.11909
 Amount of Each Receipt this Period
 500.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11357]

SUBTOTAL of Receipts This Page (optional)..... ▶ 625.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 52 OF 103
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WARGOTZ, CHERYLANN, , ,
 Mailing Address PO BOX 369
 City GRASONVILLE State MD Zip Code 21638
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 5600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2020
Transaction ID : SA11A1.14093
 Amount of Each Receipt this Period
 5600.00
 Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11397]:
 SEE REDESIGNATION

B. Full Name (Last, First, Middle Initial)
WARGOTZ, CHERYLANN, , ,
 Mailing Address PO BOX 369
 City GRASONVILLE State MD Zip Code 21638
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 2800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2020
Transaction ID : SA11A1.14094
 Amount of Each Receipt this Period
 - 2800.00
 Memo Item
 REDESIGNATION TO GENERAL

C. Full Name (Last, First, Middle Initial)
WARGOTZ, CHERYLANN, , ,
 Mailing Address PO BOX 369
 City GRASONVILLE State MD Zip Code 21638
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 5600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2020
Transaction ID : SA11A1.14095
 Amount of Each Receipt this Period
 2800.00
 Memo Item
 REDESIGNATION FROM PRIMARY

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

5600.00

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

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

FOR LINE NUMBER: PAGE 53 OF 103
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WARGOTZ, ERIC, , ,
Mailing Address PO BOX 369

City GRASONVILLE State MD Zip Code 21638

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2020

Transaction ID : SA11A1.14097

Amount of Each Receipt this Period
5600.00

Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11397]:
 SEE REDESIGNATION

B. Full Name (Last, First, Middle Initial)
WARGOTZ, ERIC, , ,
Mailing Address PO BOX 369

City GRASONVILLE State MD Zip Code 21638

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2020

Transaction ID : SA11A1.14098

Amount of Each Receipt this Period
- 2800.00

Memo Item
 REDESIGNATION TO GENERAL

C. Full Name (Last, First, Middle Initial)
WARGOTZ, ERIC, , ,
Mailing Address PO BOX 369

City GRASONVILLE State MD Zip Code 21638

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2020

Transaction ID : SA11A1.14099

Amount of Each Receipt this Period
2800.00

Memo Item
 REDESIGNATION FROM PRIMARY

SUBTOTAL of Receipts This Page (optional)..... ▶ 5600.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 54 OF 103
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WHITE, DEE ANN, , ,

Mailing Address 19 BRADFORD STREET
APT 301

City CHARLESTON State WV Zip Code 25301

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
205.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 16 / 2020

Transaction ID : SA11A1.12789

Amount of Each Receipt this Period
50.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11387]

B. Full Name (Last, First, Middle Initial)
WHITE, DEE ANN, , ,

Mailing Address 19 BRADFORD STREET
APT 301

City CHARLESTON State WV Zip Code 25301

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
230.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 22 / 2020

Transaction ID : SA11A1.13294

Amount of Each Receipt this Period
25.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11393]

C. Full Name (Last, First, Middle Initial)
WHITE, DEE ANN, , ,

Mailing Address 19 BRADFORD STREET
APT 301

City CHARLESTON State WV Zip Code 25301

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
255.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 28 / 2020

Transaction ID : SA11A1.13842

Amount of Each Receipt this Period
25.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11396]

SUBTOTAL of Receipts This Page (optional) ▶ 100.00

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

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

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

FOR LINE NUMBER: PAGE 55 OF 103
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WHITEAKER, JAMES, , ,

Mailing Address 2383 TERENCE CT

City CLEARWATER State FL Zip Code 33759

FEC ID number of contributing federal political committee. C

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 16 / 2020

Transaction ID : SA11A1.12772

Amount of Each Receipt this Period
50.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11387]

B. Full Name (Last, First, Middle Initial)
WILSON, RANSOM, , ,

Mailing Address 1050 PARK AVENUE

City NEW YORK State NY Zip Code 10028

FEC ID number of contributing federal political committee. C

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 14 / 2020

Transaction ID : SA11A1.12389

Amount of Each Receipt this Period
500.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11386]

C. Full Name (Last, First, Middle Initial)
WINCHESTER, DENNIS, , ,

Mailing Address 124 BLACKLAND ROAD NORTHWEST

City ATLANTA State GA Zip Code 30342

FEC ID number of contributing federal political committee. C

Name of Employer QUIKRETE Occupation DIRECTOR

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 27 / 2020

Transaction ID : SA11A1.13743

Amount of Each Receipt this Period
1000.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11396]

SUBTOTAL of Receipts This Page (optional)..... ▶ 1550.00

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

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

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

FOR LINE NUMBER: PAGE 56 OF 103
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
273691.06

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 06 / 2020

Transaction ID : SA11AI.6686

Amount of Each Receipt this Period
4122.76

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

B. Full Name (Last, First, Middle Initial)
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
274700.28

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 07 / 2020

Transaction ID : SA11AI.6689

Amount of Each Receipt this Period
1009.22

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

C. Full Name (Last, First, Middle Initial)
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
275115.28

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 08 / 2020

Transaction ID : SA11AI.6690

Amount of Each Receipt this Period
415.00

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 57 OF 103
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
279529.36

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 13 / 2020

Transaction ID : SA11AI.11357

Amount of Each Receipt this Period
4414.08

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

B. Full Name (Last, First, Middle Initial)
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
282483.97

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 14 / 2020

Transaction ID : SA11AI.11358

Amount of Each Receipt this Period
2954.61

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

C. Full Name (Last, First, Middle Initial)
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
284089.24

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 15 / 2020

Transaction ID : SA11AI.11359

Amount of Each Receipt this Period
1605.27

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER: PAGE 58 OF 103
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
288315.11

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 16 / 2020

Transaction ID : SA11AI.11384

Amount of Each Receipt this Period
4225.87

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

B. Full Name (Last, First, Middle Initial)
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
297270.11

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 17 / 2020

Transaction ID : SA11AI.11385

Amount of Each Receipt this Period
8955.00

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

C. Full Name (Last, First, Middle Initial)
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
302276.22

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 20 / 2020

Transaction ID : SA11AI.11386

Amount of Each Receipt this Period
5006.11

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER: PAGE 59 OF 103
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
307126.51

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 21 / 2020

Transaction ID : SA11AI.11387

Amount of Each Receipt this Period
4850.29

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

B. Full Name (Last, First, Middle Initial)
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
309906.79

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 22 / 2020

Transaction ID : SA11AI.11389

Amount of Each Receipt this Period
2780.28

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

C. Full Name (Last, First, Middle Initial)
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
312529.41

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 23 / 2020

Transaction ID : SA11AI.11390

Amount of Each Receipt this Period
2622.62

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER: PAGE 60 OF 103
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
313984.88

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 24 / 2020

Transaction ID : SA11AI.11391

Amount of Each Receipt this Period
1455.47

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

B. Full Name (Last, First, Middle Initial)
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
317448.88

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 27 / 2020

Transaction ID : SA11AI.11392

Amount of Each Receipt this Period
3464.00

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

C. Full Name (Last, First, Middle Initial)
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
320758.60

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 28 / 2020

Transaction ID : SA11AI.11393

Amount of Each Receipt this Period
3309.72

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER: PAGE 61 OF 103
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
324824.10

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 29 / 2020

Transaction ID : SA11AI.11394

Amount of Each Receipt this Period
4065.50

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

B. Full Name (Last, First, Middle Initial)
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
330018.85

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 30 / 2020

Transaction ID : SA11AI.11395

Amount of Each Receipt this Period
5194.75

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

C. Full Name (Last, First, Middle Initial)
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
335590.45

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 31 / 2020

Transaction ID : SA11AI.11396

Amount of Each Receipt this Period
5571.60

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 62 OF 103
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
375833.56

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 03 / 2020

Transaction ID : SA11AI.11397

Amount of Each Receipt this Period
40243.11

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

B. Full Name (Last, First, Middle Initial)
WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
384384.67

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 04 / 2020

Transaction ID : SA11AI.11403

Amount of Each Receipt this Period
8551.11

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

C. Full Name (Last, First, Middle Initial)
WINSLOW, HAROLD, , ,

Mailing Address 1217 MAGELLAN DR

City SARASOTA State FL Zip Code 34243

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
275.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 01 / 2020

Transaction ID : SA11AI.11505

Amount of Each Receipt this Period
50.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.6686]

SUBTOTAL of Receipts This Page (optional)..... ▶ 50.00

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

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

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

FOR LINE NUMBER: PAGE 63 OF 103
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WINSLOW, HAROLD, , ,

Mailing Address 1217 MAGELLAN DR

City SARASOTA State FL Zip Code 34243

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 , , , 375.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 07 / 2020

Transaction ID : SA11A1.11761

Amount of Each Receipt this Period
 , , , 100.00

Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11357]

B. Full Name (Last, First, Middle Initial)
WINSLOW, HAROLD, , ,

Mailing Address 1217 MAGELLAN DR

City SARASOTA State FL Zip Code 34243

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 , , , 380.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 13 / 2020

Transaction ID : SA11A1.12193

Amount of Each Receipt this Period
 , , , 5.00

Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11384]

C. Full Name (Last, First, Middle Initial)
WINSLOW, HAROLD, , ,

Mailing Address 1217 MAGELLAN DR

City SARASOTA State FL Zip Code 34243

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 , , , 405.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 13 / 2020

Transaction ID : SA11A1.12194

Amount of Each Receipt this Period
 , , , 25.00

Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11384]

SUBTOTAL of Receipts This Page (optional)..... ▶ **130.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 64 OF 103
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WINSLOW, HAROLD, , ,

Mailing Address 1217 MAGELLAN DR

City SARASOTA State FL Zip Code 34243

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
430.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 24 / 2020

Transaction ID : SA11A1.13505

Amount of Each Receipt this Period
25.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11394]

B. Full Name (Last, First, Middle Initial)
WINSLOW, HAROLD, , ,

Mailing Address 1217 MAGELLAN DR

City SARASOTA State FL Zip Code 34243

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
455.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 28 / 2020

Transaction ID : SA11A1.14025

Amount of Each Receipt this Period
25.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11397]

C. Full Name (Last, First, Middle Initial)
WOLF, ALFRED, , ,

Mailing Address 492 LAKEVIEW DR
#36

City PALM HARBOR State FL Zip Code 34683

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

Name of Employer FS FRAME TRIM Occupation MANAGER

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 21 / 2020

Transaction ID : SA11A1.13169

Amount of Each Receipt this Period
250.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11391]

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00

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

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

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

FOR LINE NUMBER: PAGE 65 OF 103
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WRIGHT, MICHAEL, , ,

Mailing Address 1600 PINE BLUFF AVE

City ORLANDO State FL Zip Code 32806

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

Name of Employer MMI DEV Occupation REAL ESTATE

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1050.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 11 / 2020

Transaction ID : SA11A1.12127

Amount of Each Receipt this Period
 25.00

Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11384]

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	25.00
TOTAL This Period (last page this line number only).....▶	89786.35

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 66 OF 103	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BOOTS POLITICAL ACTION COMMITTEE

Mailing Address 228 S. WASHINGTON ST
STE. 115

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00567545

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 23 / 2020

Transaction ID : SA11C.13310

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
FOREVER YOUTH ORGANIZATION UTILIZING A NEW GENERATION PAC (FOREVER Y.O.U.N.G. PAC)

Mailing Address 9460 TENGER ROAD

City HILMAR State CA Zip Code 95324

FEC ID number of contributing federal political committee. **C** C00683508

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 21 / 2020

Transaction ID : SA11C.13140

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
INDEPENDENT ELECTRICAL CONTRACTORS INC PAC (IEC PRIDE PAC)

Mailing Address 2900 SOUTH QUINCY STREET
SUITE 720

City ARLINGTON State VA Zip Code 22206

FEC ID number of contributing federal political committee. **C** C00332031

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 29 / 2020

Transaction ID : SA11C.14239

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	4500.00
TOTAL This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 67 OF 103
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
RIGHTNOW WOMEN PAC

Mailing Address PO BOX 30844

City: BETHESDA State: MD Zip Code: 20824

FEC ID number of contributing federal political committee: **C** C00551366

Name of Employer: Occupation:

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt: 07 / 29 / 2020

Transaction ID : SA11C.14235

Amount of Each Receipt this Period: 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
VICKY PAC

Mailing Address PO BOX 172

City: HARRISONVILLE State: MO Zip Code: 64701

FEC ID number of contributing federal political committee: **C** C00499798

Name of Employer: Occupation:

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt: 07 / 21 / 2020

Transaction ID : SA11C.13138

Amount of Each Receipt this Period: 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)

Mailing Address

City: State: Zip Code:

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

Name of Employer: Occupation:

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt:

Amount of Each Receipt this Period:

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	2000.00
TOTAL This Period (last page this line number only)..... ▶	6500.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 68 OF 103
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BASE ENGAGER

Mailing Address 122 N VALE STREET
SUITE A

City JEFFERSON State TX Zip Code 75657

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 13 / 2020

Transaction ID : SA14.12143

Amount of Each Receipt this Period
2800.00

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11357]
REFUNDED AGENCY FEES

B. Full Name (Last, First, Middle Initial)
BASE ENGAGER

Mailing Address 122 N VALE STREET
SUITE A

City JEFFERSON State TX Zip Code 75657

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2812.50

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 14 / 2020

Transaction ID : SA14.12303

Amount of Each Receipt this Period
12.50

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11358]
REFUNDED AGENCY FEES

C. Full Name (Last, First, Middle Initial)
BASE ENGAGER

Mailing Address 122 N VALE STREET
SUITE A

City JEFFERSON State TX Zip Code 75657

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2825.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 20 / 2020

Transaction ID : SA14.13041

Amount of Each Receipt this Period
12.50

Memo Item
EARMARKED THROUGH WINRED [SA11A1.11389]
REFUNDED AGENCY FEES

SUBTOTAL of Receipts This Page (optional) ▶ 2825.00

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

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

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

FOR LINE NUMBER: PAGE 69 OF 103
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BASE ENGAGER

Mailing Address 122 N VALE STREET
SUITE A

City State Zip Code
JEFFERSON TX 75657

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3325.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 24 2020

Transaction ID : SA14.13530

Amount of Each Receipt this Period
500.00

Memo Item
 EARMARKED THROUGH WINRED [SA11A1.11394]
 REFUNDED AGENCY FEES

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	3325.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 103			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ADP, INC.			Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2020		
Mailing Address ONE ADP BOULEVARD			FEC Identification Number C		
City ROSELAND	State NJ	Zip Code 07068	Amount of Each Disbursement this Period 929.27		
Purpose of Disbursement PAYROLL SERVICES/ TAXES		Category/Type	Transaction ID : SB17.14297		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. ADP, INC.			Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2020		
Mailing Address ONE ADP BOULEVARD			FEC Identification Number C		
City ROSELAND	State NJ	Zip Code 07068	Amount of Each Disbursement this Period 58.58		
Purpose of Disbursement PAYROLL SERVICES/ TAXES		Category/Type	Transaction ID : SB17.14298		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. ADP, INC.			Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2020		
Mailing Address ONE ADP BOULEVARD			FEC Identification Number C		
City ROSELAND	State NJ	Zip Code 07068	Amount of Each Disbursement this Period 929.26		
Purpose of Disbursement PAYROLL SERVICES/ TAXES		Category/Type	Transaction ID : SB17.14299		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	1917.11
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 71 OF 103	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ALLIANCE STRATEGIES GROUP, LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2020
Mailing Address 6615 W BOYNTON BEACH BLVD SUITE 331		FEC Identification Number C
City BOYNTON BEACH	State FL	Zip Code 33437-3526
Purpose of Disbursement FUNDRAISING FEES	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 509.60	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.14300
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. ALLIANCE STRATEGIES GROUP, LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2020
Mailing Address 6615 W BOYNTON BEACH BLVD SUITE 331		FEC Identification Number C
City BOYNTON BEACH	State FL	Zip Code 33437-3526
Purpose of Disbursement FUNDRAISING FEES	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 242.40	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.14301
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. ALLIANCE STRATEGIES GROUP, LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2020
Mailing Address 6615 W BOYNTON BEACH BLVD SUITE 331		FEC Identification Number C
City BOYNTON BEACH	State FL	Zip Code 33437-3526
Purpose of Disbursement FUNDRAISING FEES	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 20.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.14302
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	772.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 72 OF 103	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ALLIANCE STRATEGIES GROUP, LLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2020	
Mailing Address 6615 W BOYNTON BEACH BLVD SUITE 331			FEC Identification Number C	
City BOYNTON BEACH	State FL	Zip Code 33437-3526	Amount of Each Disbursement this Period 1061.60	
Purpose of Disbursement FUNDRAISING FEES		Category/ Type	Transaction ID : SB17.14303	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. ALLIANCE STRATEGIES GROUP, LLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2020	
Mailing Address 6615 W BOYNTON BEACH BLVD SUITE 331			FEC Identification Number C	
City BOYNTON BEACH	State FL	Zip Code 33437-3526	Amount of Each Disbursement this Period 60.89	
Purpose of Disbursement FUNDRAISING FEES		Category/ Type	Transaction ID : SB17.14304	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. ANEDOT			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2020	
Mailing Address 1340 POYDRAS STREET SUITE 1770			FEC Identification Number C	
City NEW ORLEANS	State LA	Zip Code 70112	Amount of Each Disbursement this Period 29.68	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.14305	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	1152.17
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 73 OF 103	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT			Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2020	
Mailing Address 1340 POYDRAS STREET SUITE 1770			FEC Identification Number C	
City NEW ORLEANS	State LA	Zip Code 70112	Amount of Each Disbursement this Period 14.52	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.14306	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. ANEDOT			Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2020	
Mailing Address 1340 POYDRAS STREET SUITE 1770			FEC Identification Number C	
City NEW ORLEANS	State LA	Zip Code 70112	Amount of Each Disbursement this Period 1.30	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.14307	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. ANEDOT			Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2020	
Mailing Address 1340 POYDRAS STREET SUITE 1770			FEC Identification Number C	
City NEW ORLEANS	State LA	Zip Code 70112	Amount of Each Disbursement this Period 66.28	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.14308	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	82.10
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 103			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT			Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2020		
Mailing Address 1340 POYDRAS STREET SUITE 1770			FEC Identification Number C		
City NEW ORLEANS	State LA	Zip Code 70112	Amount of Each Disbursement this Period 4.54		
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.14309		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. BASE ENGAGER			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2020		
Mailing Address 122 N VALE STREET SUITE A			FEC Identification Number C		
City JEFFERSON	State TX	Zip Code 75657	Amount of Each Disbursement this Period 468.80		
Purpose of Disbursement FUNDRAISING FEES		Category/ Type	Transaction ID : SB17.14310		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. BASE ENGAGER			Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2020		
Mailing Address 122 N VALE STREET SUITE A			FEC Identification Number C		
City JEFFERSON	State TX	Zip Code 75657	Amount of Each Disbursement this Period 1107.86		
Purpose of Disbursement FUNDRAISING FEES		Category/ Type	Transaction ID : SB17.14311		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	1581.20
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 103			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)
AMANDA MAKKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BASE ENGAGER			Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2020		
Mailing Address 122 N VALE STREET SUITE A			FEC Identification Number C		
City JEFFERSON	State TX	Zip Code 75657	Amount of Each Disbursement this Period 6237.70		
Purpose of Disbursement FUNDRAISING FEES		Category/ Type	Transaction ID : SB17.14312		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. BASE ENGAGER			Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2020		
Mailing Address 122 N VALE STREET SUITE A			FEC Identification Number C		
City JEFFERSON	State TX	Zip Code 75657	Amount of Each Disbursement this Period 2947.20		
Purpose of Disbursement FUNDRAISING FEES		Category/ Type	Transaction ID : SB17.14313		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. BASE ENGAGER			Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2020		
Mailing Address 122 N VALE STREET SUITE A			FEC Identification Number C		
City JEFFERSON	State TX	Zip Code 75657	Amount of Each Disbursement this Period 323.00		
Purpose of Disbursement FUNDRAISING FEES		Category/ Type	Transaction ID : SB17.14314		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	9507.90
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 103			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BASE ENGAGER			Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2020		
Mailing Address 122 N VALE STREET SUITE A			FEC Identification Number C		
City JEFFERSON	State TX	Zip Code 75657	Amount of Each Disbursement this Period 107.40		
Purpose of Disbursement FUNDRAISING FEES		Category/ Type	Transaction ID : SB17.14315		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. BASE ENGAGER			Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2020		
Mailing Address 122 N VALE STREET SUITE A			FEC Identification Number C		
City JEFFERSON	State TX	Zip Code 75657	Amount of Each Disbursement this Period 2068.48		
Purpose of Disbursement FUNDRAISING FEES		Category/ Type	Transaction ID : SB17.14316		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. BASE ENGAGER			Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2020		
Mailing Address 122 N VALE STREET SUITE A			FEC Identification Number C		
City JEFFERSON	State TX	Zip Code 75657	Amount of Each Disbursement this Period 270.90		
Purpose of Disbursement FUNDRAISING FEES		Category/ Type	Transaction ID : SB17.14317		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	2446.78
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 77 OF 103	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
AMANDA MAKKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BASE ENGAGER			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2020	
Mailing Address 122 N VALE STREET SUITE A			FEC Identification Number C	
City JEFFERSON	State TX	Zip Code 75657	Amount of Each Disbursement this Period 21.60	
Purpose of Disbursement FUNDRAISING FEES		Category/ Type	Transaction ID : SB17.14318	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. BASE ENGAGER			Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2020	
Mailing Address 122 N VALE STREET SUITE A			FEC Identification Number C	
City JEFFERSON	State TX	Zip Code 75657	Amount of Each Disbursement this Period 1249.35	
Purpose of Disbursement FUNDRAISING FEES		Category/ Type	Transaction ID : SB17.14319	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. BASE ENGAGER			Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2020	
Mailing Address 122 N VALE STREET SUITE A			FEC Identification Number C	
City JEFFERSON	State TX	Zip Code 75657	Amount of Each Disbursement this Period 692.60	
Purpose of Disbursement FUNDRAISING FEES		Category/ Type	Transaction ID : SB17.14320	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	1963.55
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 103			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)
AMANDA MAKKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BASE ENGAGER			Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2020		
Mailing Address 122 N VALE STREET SUITE A			FEC Identification Number C		
City JEFFERSON	State TX	Zip Code 75657	Amount of Each Disbursement this Period 1003.80		
Purpose of Disbursement FUNDRAISING FEES		Category/ Type	Transaction ID : SB17.14321		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. BASE ENGAGER			Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2020		
Mailing Address 122 N VALE STREET SUITE A			FEC Identification Number C		
City JEFFERSON	State TX	Zip Code 75657	Amount of Each Disbursement this Period 1569.15		
Purpose of Disbursement FUNDRAISING FEES		Category/ Type	Transaction ID : SB17.14322		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. BASE ENGAGER			Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2020		
Mailing Address 122 N VALE STREET SUITE A			FEC Identification Number C		
City JEFFERSON	State TX	Zip Code 75657	Amount of Each Disbursement this Period 615.90		
Purpose of Disbursement FUNDRAISING FEES		Category/ Type	Transaction ID : SB17.14323		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	3188.85
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 79 OF 103	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
AMANDA MAKKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BASE ENGAGER			Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2020	
Mailing Address 122 N VALE STREET SUITE A			FEC Identification Number C	
City JEFFERSON	State TX	Zip Code 75657	Amount of Each Disbursement this Period 475.05	
Purpose of Disbursement FUNDRAISING FEES		Category/ Type	Transaction ID : SB17.14324	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. BASE ENGAGER			Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2020	
Mailing Address 122 N VALE STREET SUITE A			FEC Identification Number C	
City JEFFERSON	State TX	Zip Code 75657	Amount of Each Disbursement this Period 269.92	
Purpose of Disbursement FUNDRAISING FEES		Category/ Type	Transaction ID : SB17.14325	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. BASE ENGAGER			Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2020	
Mailing Address 122 N VALE STREET SUITE A			FEC Identification Number C	
City JEFFERSON	State TX	Zip Code 75657	Amount of Each Disbursement this Period 1035.40	
Purpose of Disbursement FUNDRAISING FEES		Category/ Type	Transaction ID : SB17.14326	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	1780.37
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 80 OF 103	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BASE ENGAGER		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2020
Mailing Address 122 N VALE STREET SUITE A		FEC Identification Number C
City JEFFERSON	State TX	Zip Code 75657
Purpose of Disbursement FUNDRAISING FEES	Candidate Name	Amount of Each Disbursement this Period 534.85
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.14327
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. BASE ENGAGER		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2020
Mailing Address 122 N VALE STREET SUITE A		FEC Identification Number C
City JEFFERSON	State TX	Zip Code 75657
Purpose of Disbursement FUNDRAISING FEES	Candidate Name	Amount of Each Disbursement this Period 1596.35
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.14328
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. CHAIN BRIDGE BANK, N.A.		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2020
Mailing Address 1445-A LAUGHLIN AVE		FEC Identification Number C
City MCLEAN	State VA	Zip Code 22101
Purpose of Disbursement BANK FEES	Candidate Name	Amount of Each Disbursement this Period 25.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.14336
State: District:		<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	2156.20
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 81 OF 103	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CHAIN BRIDGE BANK, N.A.			Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2020	
Mailing Address 1445-A LAUGHLIN AVE			FEC Identification Number C	
City MCLEAN	State VA	Zip Code 22101	Amount of Each Disbursement this Period 20.00	
Purpose of Disbursement BANK FEES		Category/Type	Transaction ID : SB17.14337	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. CONSENSUS MEDIA, LLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2020	
Mailing Address PO BOX 28298			FEC Identification Number C	
City WINTER PARK	State FL	Zip Code 32790	Amount of Each Disbursement this Period 8372.19	
Purpose of Disbursement VIDEO PRODUCTION SERVICES		Category/Type	Transaction ID : SB17.14386	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. CONSUMER CREDIT INNOVATIONS LLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2020	
Mailing Address 9600 KOGER BLVD N SUITE 203			FEC Identification Number C	
City ST PETERSBURG	State FL	Zip Code 33702	Amount of Each Disbursement this Period 536.40	
Purpose of Disbursement ADMINISTRATIVE CONSULTING		Category/Type	Transaction ID : SB17.14293	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	8928.59
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 103			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CONSUMER CREDIT INNOVATIONS LLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2020		
Mailing Address 9600 KOGER BLVD N SUITE 203			FEC Identification Number C		
City ST PETERSBURG	State FL	Zip Code 33702	Amount of Each Disbursement this Period 464.88		
Purpose of Disbursement ADMINISTRATIVE CONSULTING		Category/ Type	Transaction ID : SB17.14294		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. CONSUMER CREDIT INNOVATIONS LLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2020		
Mailing Address 9600 KOGER BLVD N SUITE 203			FEC Identification Number C		
City ST PETERSBURG	State FL	Zip Code 33702	Amount of Each Disbursement this Period 357.60		
Purpose of Disbursement ADMINISTRATIVE CONSULTING		Category/ Type	Transaction ID : SB17.14338		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. DATA TARGETING, INC.			Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2020		
Mailing Address 6211 NW 132ND STREET			FEC Identification Number C		
City GAINESVILLE	State FL	Zip Code 32653	Amount of Each Disbursement this Period 3300.00		
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type	Transaction ID : SB17.14288		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	4122.48
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 103			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DATA TARGETING, INC.			Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2020		
Mailing Address 6211 NW 132ND STREET			FEC Identification Number C		
City GAINESVILLE	State FL	Zip Code 32653	Amount of Each Disbursement this Period 28891.36		
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type	Transaction ID : SB17.14339		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. DATA TARGETING, INC.			Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2020		
Mailing Address 6211 NW 132ND STREET			FEC Identification Number C		
City GAINESVILLE	State FL	Zip Code 32653	Amount of Each Disbursement this Period 32302.00		
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type	Transaction ID : SB17.14340		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. DATA TARGETING, INC.			Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2020		
Mailing Address 6211 NW 132ND STREET			FEC Identification Number C		
City GAINESVILLE	State FL	Zip Code 32653	Amount of Each Disbursement this Period 47066.51		
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type	Transaction ID : SB17.14341		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	108259.87
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 103			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DATA TARGETING, INC.			Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2020		
Mailing Address 6211 NW 132ND STREET			FEC Identification Number C		
City GAINESVILLE	State FL	Zip Code 32653	Amount of Each Disbursement this Period 150.00		
Purpose of Disbursement FUNDRAISING CONSULTING		Category/Type	Transaction ID : SB17.14342		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. DEEP ROOT ANALYTICS LLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2020		
Mailing Address 1600 WILSON BLVD. SUITE 330			FEC Identification Number C		
City ARLINGTON	State VA	Zip Code 22209	Amount of Each Disbursement this Period 13500.00		
Purpose of Disbursement RESEARCH CONSULTING		Category/Type	Transaction ID : SB17.14344		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. DICKINSON WRIGHT PLLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2020		
Mailing Address 2600 W BIG BEAVER SUITE 300			FEC Identification Number C		
City TROY	State MI	Zip Code 48084	Amount of Each Disbursement this Period 3489.50		
Purpose of Disbursement LEGAL CONSULTING		Category/Type	Transaction ID : SB17.14289		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	17139.50
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 85 OF 103	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ELECTORAL STRATEGIES INC.		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2020
Mailing Address 2621 NE 212TH TER, UNIT 205		FEC Identification Number C
City MIAMI	State FL	Zip Code 33180
Purpose of Disbursement FUNDRAISING CONSULTING		Amount of Each Disbursement this Period 450.00
Candidate Name		Transaction ID : SB17.14290
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. FINTECH CREDIT INNOVATIONS, INC.		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2020
Mailing Address 9600 KOGER BLVD SUITE 203		FEC Identification Number C
City ST. PETERSBURG	State FL	Zip Code 33702
Purpose of Disbursement RENT		Amount of Each Disbursement this Period 850.00
Candidate Name		Transaction ID : SB17.14345
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. FINTECH CREDIT INNOVATIONS, INC.		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2020
Mailing Address 9600 KOGER BLVD SUITE 203		FEC Identification Number C
City ST. PETERSBURG	State FL	Zip Code 33702
Purpose of Disbursement RENT		Amount of Each Disbursement this Period 500.00
Candidate Name		Transaction ID : SB17.14346
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	1800.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 86 OF 103	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. HARRIS MEDIA, LLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2020	
Mailing Address 6500 MANOR DRIVE			FEC Identification Number C	
City AUSTIN	State TX	Zip Code 78723	Amount of Each Disbursement this Period 14838.58	
Purpose of Disbursement DIGITAL CONSULTING		Category/ Type	Transaction ID : SB17.14295	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. HIGH COTTON CONSULTING			Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2020	
Mailing Address 800 W 47TH ST STE 200			FEC Identification Number C	
City KANSAS CITY	State MO	Zip Code 64112	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type	Transaction ID : SB17.14292	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. HIGH COTTON CONSULTING			Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2020	
Mailing Address 800 W 47TH ST STE 200			FEC Identification Number C	
City KANSAS CITY	State MO	Zip Code 64112	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type	Transaction ID : SB17.14347	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	16838.58
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 87 OF 103	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. KING & GRUBE			Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2020	
Mailing Address 1211 10TH STREET SW			FEC Identification Number C	
City LARGO	State FL	Zip Code 33770	Amount of Each Disbursement this Period 1890.58	
Purpose of Disbursement PRINTING & DESIGN SERVICES		Category/Type	Transaction ID : SB17.14351	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. MCLAUGHLIN & ASSOCIATES, INC.			Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2020	
Mailing Address 566 S ROUTE 303			FEC Identification Number C	
City BLAUVELT	State NY	Zip Code 10913	Amount of Each Disbursement this Period 19000.00	
Purpose of Disbursement TELEMARKETING & DATA MANAGEMENT SERVICES		Category/Type	Transaction ID : SB17.14291	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. MENTZER MEDIA SERVICES, INC			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2020	
Mailing Address 210 W. PENNSYLVANIA AVE. ST 250			FEC Identification Number C	
City TOWSON	State MD	Zip Code 21204	Amount of Each Disbursement this Period 16160.00	
Purpose of Disbursement PLACED MEDIA		Category/Type	Transaction ID : SB17.14352	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	37050.58
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 103		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MENTZER MEDIA SERVICES, INC		Date of Disbursement
Mailing Address 210 W. PENNSYLVANIA AVE. ST 250		M M / D D / Y Y Y Y 07 / 13 / 2020
City TOWSON	State MD	Zip Code 21204
Purpose of Disbursement PLACED MEDIA		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period 16685.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.14353
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. MENTZER MEDIA SERVICES, INC		Date of Disbursement
Mailing Address 210 W. PENNSYLVANIA AVE. ST 250		M M / D D / Y Y Y Y 07 / 16 / 2020
City TOWSON	State MD	Zip Code 21204
Purpose of Disbursement PLACED MEDIA		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period 68860.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.14354
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. MENTZER MEDIA SERVICES, INC		Date of Disbursement
Mailing Address 210 W. PENNSYLVANIA AVE. ST 250		M M / D D / Y Y Y Y 07 / 24 / 2020
City TOWSON	State MD	Zip Code 21204
Purpose of Disbursement PLACED MEDIA		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period 89845.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.14355
State: District:		<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	175390.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 103			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. NASET, JIM, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2020		
Mailing Address 5000 94TH ST N			FEC Identification Number C		
City ST. PETE	State FL	Zip Code 33702	Amount of Each Disbursement this Period 417.95		
Purpose of Disbursement IN-KIND: CATERING SERVICES		Category/ Type	Transaction ID : SB17.14269		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. PROSEQUENCE, LLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2020		
Mailing Address PO BOX 10666			FEC Identification Number C		
City TALLAHASSEE	State FL	Zip Code 32302	Amount of Each Disbursement this Period 5150.00		
Purpose of Disbursement RESEARCH CONSULTING		Category/ Type	Transaction ID : SB17.14357		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. RED CURVE SOLUTIONS			Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2020		
Mailing Address 138 CONANT STREET 2ND FLOOR			FEC Identification Number C		
City BEVERLY	State MA	Zip Code 01915	Amount of Each Disbursement this Period 2981.40		
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type	Transaction ID : SB17.14281		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	8549.35
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 103			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. RED CURVE SOLUTIONS			Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2020		
Mailing Address 138 CONANT STREET 2ND FLOOR			FEC Identification Number C		
City BEVERLY	State MA	Zip Code 01915	Amount of Each Disbursement this Period 2911.45		
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type	Transaction ID : SB17.14358		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. RED CURVE SOLUTIONS			Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2020		
Mailing Address 138 CONANT STREET 2ND FLOOR			FEC Identification Number C		
City BEVERLY	State MA	Zip Code 01915	Amount of Each Disbursement this Period 3543.85		
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type	Transaction ID : SB17.14359		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. THE ARCHMANN GROUP			Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2020		
Mailing Address 1400 VILLAGE SQUARE BLVD, STE 3-25			FEC Identification Number C		
City TALLAHASSEE	State FL	Zip Code 32312	Amount of Each Disbursement this Period 21000.00		
Purpose of Disbursement STRATEGY CONSULTING		Category/ Type	Transaction ID : SB17.14366		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	27455.30
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 103			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. TORSTENSON, BETHANY, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2020		
Mailing Address 16 PARADISE LANE #105			FEC Identification Number C		
City TREASURE ISLAND	State FL	Zip Code 33706	Amount of Each Disbursement this Period 1177.36		
Purpose of Disbursement PAYROLL		Category/Type	Transaction ID : SB17.14329		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. TORSTENSON, BETHANY, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2020		
Mailing Address 16 PARADISE LANE #105			FEC Identification Number C		
City TREASURE ISLAND	State FL	Zip Code 33706	Amount of Each Disbursement this Period 1177.38		
Purpose of Disbursement PAYROLL		Category/Type	Transaction ID : SB17.14330		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. TRUDEAU, KATHRYN, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2020		
Mailing Address 8243 101ST COURT N			FEC Identification Number C		
City SEMINOLE	State FL	Zip Code 33777	Amount of Each Disbursement this Period 1890.31		
Purpose of Disbursement PAYROLL		Category/Type	Transaction ID : SB17.14348		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	4245.05
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 103			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. TRUDEAU, KATHRYN, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2020		
Mailing Address 8243 101ST COURT N					
City SEMINOLE	State FL	Zip Code 33777	FEC Identification Number C		
Purpose of Disbursement PAYROLL			Amount of Each Disbursement this Period 799.12		
Candidate Name			Transaction ID : SB17.14349		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State:	District:				

Full Name (Last, First, Middle Initial) B. TRUDEAU, KATHRYN, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2020		
Mailing Address 8243 101ST COURT N					
City SEMINOLE	State FL	Zip Code 33777	FEC Identification Number C		
Purpose of Disbursement PAYROLL			Amount of Each Disbursement this Period 1890.30		
Candidate Name			Transaction ID : SB17.14350		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State:	District:				

Full Name (Last, First, Middle Initial) C. WINRED TECHNICAL SERVICES LLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2020		
Mailing Address 1776 WILSON BLVD SUITE 530					
City ARLINGTON	State VA	Zip Code 22219	FEC Identification Number C		
Purpose of Disbursement MERCHANT FEES			Amount of Each Disbursement this Period 429.94		
Candidate Name			Transaction ID : SB17.14367		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....	3119.36
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 93 OF 103	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WINRED TECHNICAL SERVICES LLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2020	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 1044.91	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.14368	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. WINRED TECHNICAL SERVICES LLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2020	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 2337.19	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.14369	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. WINRED TECHNICAL SERVICES LLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2020	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 827.24	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.14370	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	4209.34
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 94 OF 103	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WINRED TECHNICAL SERVICES LLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2020	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 44.39	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.14371	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. WINRED TECHNICAL SERVICES LLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2020	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 19.40	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.14372	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. WINRED TECHNICAL SERVICES LLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2020	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 325.43	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.14373	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	389.22
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 95 OF 103	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WINRED TECHNICAL SERVICES LLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2020	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 121.85	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.14374	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. WINRED TECHNICAL SERVICES LLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2020	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 67.70	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.14375	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. WINRED TECHNICAL SERVICES LLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2020	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 193.55	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.14376	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	383.10
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 96 OF 103	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WINRED TECHNICAL SERVICES LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2020
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 358.44	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.14377
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. WINRED TECHNICAL SERVICES LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2020
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 219.98	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.14378
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. WINRED TECHNICAL SERVICES LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2020
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 213.52	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.14379
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	791.94
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 97 OF 103	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WINRED TECHNICAL SERVICES LLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2020	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 140.01	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.14380	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. WINRED TECHNICAL SERVICES LLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2020	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 117.89	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.14381	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. WINRED TECHNICAL SERVICES LLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2020	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 65.24	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.14382	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	323.14
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 98 OF 103	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WINRED TECHNICAL SERVICES LLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2020	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 138.61	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.14383	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. WINRED TECHNICAL SERVICES LLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2020	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 147.00	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.14384	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. WINRED TECHNICAL SERVICES LLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2020	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 197.07	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.14385	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	482.68
TOTAL This Period (last page this line number only).....▶	446026.31

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. VALLIER, RUSSELL, , ,		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2020
Mailing Address 20845 HARPER ROAD		FEC Identification Number C C00708263
City CHANUTE	State KS	Zip Code 66720
Purpose of Disbursement REFUND ORIGINALLY ON SCHEDULE A PRIMARY AND GENERAL REFUND		Category/ Type
Candidate Name AMANDA MAKKI FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: FL District: 13	Amount of Each Disbursement this Period 5600.00	
		Transaction ID : SB20A.18888
		<input type="checkbox"/> Memo Item

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

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

SUBTOTAL of Disbursements This Page (optional).....▶	5600.00
TOTAL This Period (last page this line number only).....▶	5600.00

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor CONSENSUS MEDIA, LLC			Nature of Debt (Purpose): VIDEO PRODUCTION SERVICES
Mailing Address PO BOX 28298			
City WINTER PARK	State FL	Zip Code 32790	

Outstanding Balance Beginning This Period 8372.19	Transaction ID : SD10.11375	
Amount Incurred This Period 0.00	Payment This Period 8372.19	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor CONSUMER CREDIT INNOVATIONS LLC			Nature of Debt (Purpose): ADMINISTRATIVE CONSULTING
Mailing Address 9600 KOGER BLVD N SUITE 203			
City ST PETERSBURG	State FL	Zip Code 33702	

Outstanding Balance Beginning This Period 536.40	Transaction ID : SD10.11374	
Amount Incurred This Period 0.00	Payment This Period 536.40	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor CONSUMER CREDIT INNOVATIONS LLC			Nature of Debt (Purpose): ADMINISTRATIVE CONSULTING
Mailing Address 9600 KOGER BLVD N SUITE 203			
City ST PETERSBURG	State FL	Zip Code 33702	

Outstanding Balance Beginning This Period 464.88	Transaction ID : SD10.11372	
Amount Incurred This Period 0.00	Payment This Period 464.88	Outstanding Balance at Close of This Period 0.00

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

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)

AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor DATA TARGETING, INC.			Nature of Debt (Purpose): RESEARCH CONSULTING
Mailing Address 6211 NW 132ND STREET			
City GAINESVILLE	State FL	Zip Code 32653	

Outstanding Balance Beginning This Period 3300.00	Transaction ID : SD10.11363	
Amount Incurred This Period 0.00	Payment This Period 3300.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor DICKINSON WRIGHT PLLC			Nature of Debt (Purpose): LEGAL CONSULTING
Mailing Address 2600 W BIG BEAVER SUITE 300			
City TROY	State MI	Zip Code 48084	

Outstanding Balance Beginning This Period 3489.50	Transaction ID : SD10.11364	
Amount Incurred This Period 0.00	Payment This Period 3489.50	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor DICKINSON WRIGHT PLLC			Nature of Debt (Purpose): LEGAL CONSULTING
Mailing Address 2600 W BIG BEAVER SUITE 300			
City TROY	State MI	Zip Code 48084	

Outstanding Balance Beginning This Period 2204.50	Transaction ID : SD10.11371	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2204.50

1) SUBTOTALS This Period This Page (optional)	▶	2204.50
2) TOTALS This Period (last page this line number only)	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 102 OF 103
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor ELECTORAL STRATEGIES INC.			Nature of Debt (Purpose): FUNDRAISING CONSULTING
Mailing Address 2621 NE 212TH TER, UNIT 205			
City MIAMI	State FL	Zip Code 33180	

Outstanding Balance Beginning This Period 450.00	Transaction ID : SD10.11365	
Amount Incurred This Period 0.00	Payment This Period 450.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor HARRIS MEDIA, LLC			Nature of Debt (Purpose): FUNDRAISING CONSULTING/ONLINE ADVERTISING
Mailing Address 6500 MANOR DRIVE			
City AUSTIN	State TX	Zip Code 78723	

Outstanding Balance Beginning This Period 14838.58	Transaction ID : SD10.11376	
Amount Incurred This Period 0.00	Payment This Period 14838.58	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor HIGH COTTON CONSULTING			Nature of Debt (Purpose): FUNDRAISING CONSULTING
Mailing Address 800 W 47TH ST STE 200			
City KANSAS CITY	State MO	Zip Code 64112	

Outstanding Balance Beginning This Period 1000.00	Transaction ID : SD10.11369	
Amount Incurred This Period 0.00	Payment This Period 1000.00	Outstanding Balance at Close of This Period 0.00

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

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
AMANDA MAKKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor MCLAUGHLIN & ASSOCIATES, INC.			Nature of Debt (Purpose): SURVEYS
Mailing Address 566 S ROUTE 303			
City BLAUVELT	State NY	Zip Code 10913	

Outstanding Balance Beginning This Period 19000.00		Transaction ID : SD10.11366	
Amount Incurred This Period 0.00	Payment This Period 19000.00	Outstanding Balance at Close of This Period 0.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor RED CURVE SOLUTIONS			Nature of Debt (Purpose): COMPLIANCE CONSULTING
Mailing Address 138 CONANT STREET 2ND FLOOR			
City BEVERLY	State MA	Zip Code 01915	

Outstanding Balance Beginning This Period 2981.40		Transaction ID : SD10.11368	
Amount Incurred This Period 0.00	Payment This Period 2981.40	Outstanding Balance at Close of This Period 0.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period		Outstanding Balance at Close of This Period	
Amount Incurred This Period	Payment This Period		

1) SUBTOTALS This Period This Page (optional)	0.00
2) TOTALS This Period (last page this line number only)	2204.50
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	2204.50