

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

America's Future First

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="0.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="93000.00"/>	<input type="text" value="93000.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="93000.00"/>	<input type="text" value="93000.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="66555.84"/>	<input type="text" value="66555.84"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="26444.16"/>	<input type="text" value="26444.16"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

America's Future First

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	93000.00	93000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	93000.00	93000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	93000.00	93000.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	93000.00	93000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	93000.00	93000.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	4180.00	4180.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	4180.00	4180.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	54821.84	54821.84
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	7554.00	7554.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	66555.84	66555.84
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	66555.84	66555.84

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	93000.00	93000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	93000.00	93000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	4180.00	4180.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	4180.00	4180.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 18
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
America's Future First

A. Antonelli Kantor, PC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1000 Stuyvesant Ave

City Union	State NJ	Zip Code 07083
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2020

Transaction ID : SA11AI.4117

Amount of Each Receipt this Period
2500.00

Memo Item

B. Fairview Insurance Agency Associates, Inc.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25 Fairview Ave

City Verona	State NJ	Zip Code 07044
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
9500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		17		2020

Transaction ID : SA11AI.4113

Amount of Each Receipt this Period
9500.00

Memo Item

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

Mailing Address 180 W State St

City Trenton	State NJ	Zip Code 08607
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
80000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		05		2020

Transaction ID : SA11AI.4142

Amount of Each Receipt this Period
80000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	92000.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 7 OF 18
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
America's Future First

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Wielkotz & Company, LLC

Mailing Address 401 Wanaque Ave

City Pompton Lakes	State NJ	Zip Code 07442
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		17		2020

Transaction ID : SA11A1.4115

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address

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

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

Aggregate Year-to-Date ▼

Date of Receipt

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

Memo Item

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

Mailing Address

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

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

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	93000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
America's Future First

Full Name (Last, First, Middle Initial) A. Genova Burns, LLC		Date of Disbursement MM / DD / YYYY 06 / 23 / 2020	
Mailing Address 494 Broad St		FEC Identification Number C [] Transaction ID : SB21B.4102 Amount of Each Disbursement this Period [] 2135.00	
City Newark	State NJ	Zip Code 07102	Category/Type []
Purpose of Disbursement Legal Fees		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. Next Level Partners, LLC		Date of Disbursement MM / DD / YYYY 06 / 24 / 2020	
Mailing Address PO Box 15320		FEC Identification Number C [] Transaction ID : SB21B.4109 Amount of Each Disbursement this Period [] 1995.00	
City Washington	State DC	Zip Code 20003	Category/Type []
Purpose of Disbursement Consultant - Compliance		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

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

SUBTOTAL of Disbursements This Page (optional).....▶	4130.00
TOTAL This Period (last page this line number only).....▶	4130.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
America's Future First

A. Roland Offset Service, RP

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 1000

City West New York State NJ Zip Code 07093

Purpose of Disbursement
Direct Mail - Support Marty Small for Mayor of Atlantic City, NJ

Candidate Name
Small, Marty, , ,

Office Sought: House Senate President
State: District:

Disbursement For: 2020
 Primary General
 Other (specify) ▼

Category/Type

Date of Disbursement
MM / DD / YYYY
06 / 11 / 2020

FEC Identification Number
C

Transaction ID : **SB29.4139**

Amount of Each Disbursement this Period
7554.00

Memo Item

B.

Full Name (Last, First, Middle Initial)
Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Category/Type

Date of Disbursement
MM / DD / YYYY

FEC Identification Number
C

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)
Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/Type

Date of Disbursement
MM / DD / YYYY

FEC Identification Number
C

Amount of Each Disbursement this Period

Memo Item

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

7554.00

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

7554.00

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) America's Future First	FEC IDENTIFICATION NUMBER ▼ C C00748061
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item Roland Offset Service, RP	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address PO Box 1000	Amount <input type="text"/> 30802.00 Transaction ID : SE.4118 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City West New York State NJ Zip Code 07093	
Purpose of Expenditure Direct Mail Category/Type <input type="text"/>	
Name of Federal Candidate: Kennedy, Amy, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 02 State: NJ
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 30802.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item Roland Offset Service, RP	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address PO Box 1000	Amount <input type="text"/> 1501.24 Transaction ID : SE.4119 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City West New York State NJ Zip Code 07093	
Purpose of Expenditure Online Advertisements Category/Type <input type="text"/>	
Name of Federal Candidate: Kennedy, Amy, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 02 State: NJ
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 32303.24	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 32303.24
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

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

May, Jennifer, , ,

[Electronically Filed]

Date / /

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) America's Future First	FEC IDENTIFICATION NUMBER ▼ C C00748061
--	--

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

Full Name of Payee <input type="checkbox"/> Memo Item Roland Offset Service, RP	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address PO Box 1000	Amount <input type="text"/> 1501.24 Transaction ID : SE.4120 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City West New York State NJ Zip Code 07093	
Purpose of Expenditure Online Advertisements Category/Type <input type="text"/>	
Name of Federal Candidate: Kennedy, Amy, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 02 State: NJ
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 33804.48	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item Roland Offset Service, RP	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address PO Box 1000	Amount <input type="text"/> 1501.24 Transaction ID : SE.4121 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City West New York State NJ Zip Code 07093	
Purpose of Expenditure Online Advertisements Category/Type <input type="text"/>	
Name of Federal Candidate: Kennedy, Amy, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 02 State: NJ
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 35305.72	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 3002.48
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

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

May, Jennifer, , ,

[Electronically Filed]

Date

/ /

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
America's Future First
FEC IDENTIFICATION NUMBER
C C00748061

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

Full Name of Payee: Roland Offset Service, RP
Mailing Address: PO Box 1000
City: West New York, State: NJ, Zip Code: 07093
Purpose of Expenditure: Online Advertisements
Date of Public Distribution/Dissemination: 06/18/2020
Amount: 1501.24
Transaction ID: SE.4122
Date of Disbursement or Obligation: 06/18/2020
Name of Federal Candidate: Kennedy, Amy, Support
Office Sought: House, District: 02, State: NJ
Disbursement For: Primary

Full Name of Payee: Roland Offset Service, RP
Mailing Address: PO Box 1000
City: West New York, State: NJ, Zip Code: 07093
Purpose of Expenditure: Online Advertisements
Date of Public Distribution/Dissemination: 06/19/2020
Amount: 1501.24
Transaction ID: SE.4123
Date of Disbursement or Obligation: 06/19/2020
Name of Federal Candidate: Kennedy, Amy, Support
Office Sought: House, District: 02, State: NJ
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 3002.48
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

May, Jennifer, , ,

[Electronically Filed]

Date 07/14/2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
America's Future First
FEC IDENTIFICATION NUMBER
C C00748061

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

Full Name of Payee: Roland Offset Service, RP
Mailing Address: PO Box 1000
City: West New York, State: NJ, Zip Code: 07093
Purpose of Expenditure: Online Advertisements
Date of Public Distribution/Dissemination: 06/20/2020
Amount: 1501.24
Transaction ID: SE.4124
Date of Disbursement or Obligation: 06/20/2020
Name of Federal Candidate: Kennedy, Amy, Support
Office Sought: House, District: 02, State: NJ
Disbursement For: Primary

Full Name of Payee: Roland Offset Service, RP
Mailing Address: PO Box 1000
City: West New York, State: NJ, Zip Code: 07093
Purpose of Expenditure: Online Advertisements
Date of Public Distribution/Dissemination: 06/21/2020
Amount: 1501.24
Transaction ID: SE.4125
Date of Disbursement or Obligation: 06/21/2020
Name of Federal Candidate: Kennedy, Amy, Support
Office Sought: House, District: 02, State: NJ
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 3002.48
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

Signature: May, Jennifer, , , [Electronically Filed] Date: 07/14/2020

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) America's Future First	FEC IDENTIFICATION NUMBER ▼ C C00748061
--	--

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

Full Name of Payee <input type="checkbox"/> Memo Item Roland Offset Service, RP	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address PO Box 1000	Amount <input type="text"/> 1501.24 Transaction ID : SE.4126 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City West New York State NJ Zip Code 07093	
Purpose of Expenditure Online Advertisements Category/Type <input type="text"/>	
Name of Federal Candidate: Kennedy, Amy, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 02 State: NJ
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 42811.92	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item Roland Offset Service, RP	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address PO Box 1000	Amount <input type="text"/> 1501.24 Transaction ID : SE.4127 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City West New York State NJ Zip Code 07093	
Purpose of Expenditure Online Advertisements Category/Type <input type="text"/>	
Name of Federal Candidate: Kennedy, Amy, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 02 State: NJ
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 44313.16	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 3002.48
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

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

May, Jennifer, , ,

[Electronically Filed]

Date / /

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) America's Future First
FEC IDENTIFICATION NUMBER C C00748061

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

Full Name of Payee Roland Offset Service, RP
Mailing Address PO Box 1000
City West New York State NJ Zip Code 07093
Purpose of Expenditure Online Advertisements
Date of Public Distribution/Dissemination 06/24/2020
Amount 1501.24
Transaction ID: SE.4128
Date of Disbursement or Obligation 06/24/2020

Name of Federal Candidate: Kennedy, Amy, , ,
Support Oppose
Office Sought: House District: 02
President Senate State: NJ
Calendar Year-To-Date Per Election for Office Sought 45814.40
Disbursement For: Primary General 2020
Other (specify)

Full Name of Payee Roland Offset Service, RP
Mailing Address PO Box 1000
City West New York State NJ Zip Code 07093
Purpose of Expenditure Online Advertisements
Date of Public Distribution/Dissemination 06/25/2020
Amount 1501.24
Transaction ID: SE.4129
Date of Disbursement or Obligation 06/25/2020

Name of Federal Candidate: Kennedy, Amy, , ,
Support Oppose
Office Sought: House District: 02
President Senate State: NJ
Calendar Year-To-Date Per Election for Office Sought 47315.64
Disbursement For: Primary General 2020
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 3002.48
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Signature May, Jennifer, , , [Electronically Filed] Date 07/14/2020

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) America's Future First	FEC IDENTIFICATION NUMBER ▼ C C00748061
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item Roland Offset Service, RP		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address PO Box 1000		Amount <input type="text"/>	
City West New York	State NJ	Zip Code 07093	Transaction ID : SE.4130
Purpose of Expenditure Online Advertisements		Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Kennedy, Amy, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NJ
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item Roland Offset Service, RP		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address PO Box 1000		Amount <input type="text"/>	
City West New York	State NJ	Zip Code 07093	Transaction ID : SE.4131
Purpose of Expenditure Online Advertisements		Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Kennedy, Amy, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NJ
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

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May, Jennifer, , ,

[Electronically Filed]

Date / /

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) America's Future First	FEC IDENTIFICATION NUMBER ▼ C C00748061
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item Roland Offset Service, RP	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address PO Box 1000	Amount <input type="text"/> 1501.24 Transaction ID : SE.4132 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City West New York State NJ Zip Code 07093	
Purpose of Expenditure Online Advertisements Category/Type <input type="text"/>	
Name of Federal Candidate: Kennedy, Amy, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 02 State: NJ
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 51819.36	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item Roland Offset Service, RP	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address PO Box 1000	Amount <input type="text"/> 1501.24 Transaction ID : SE.4133 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City West New York State NJ Zip Code 07093	
Purpose of Expenditure Online Advertisements Category/Type <input type="text"/>	
Name of Federal Candidate: Kennedy, Amy, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 02 State: NJ
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 53320.60	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 3002.48
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

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May, Jennifer, , ,

[Electronically Filed]

Date / /

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) America's Future First	FEC IDENTIFICATION NUMBER ▼ C C00748061
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item Roland Offset Service, RP	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address PO Box 1000	Amount <input type="text"/> 1501.24 Transaction ID : SE.4134 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City West New York State NJ Zip Code 07093	
Purpose of Expenditure Online Advertisements Category/Type <input type="text"/>	
Name of Federal Candidate: Kennedy, Amy, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 02 State: NJ
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 54821.84	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address	Amount <input type="text"/>
City State Zip Code	
Purpose of Expenditure Category/Type <input type="text"/>	
Name of Federal Candidate: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: State:
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 1501.24
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/> 54821.84

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May, Jennifer, , , [Electronically Filed] Date / /

Signature