

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

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

Win Back Your State PAC

ADDRESS (number and street) PO Box 51284

Check if different than previously reported. (ACC) Washington DC 20091

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C C00525220

3. IS THIS REPORT NEW OR AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
July 15 Quarterly Report (Q2)
October 15 Quarterly Report (Q3)
January 31 Year-End Report (YE)
July 31 Mid-Year Report (Non-election Year Only) (MY)
Termination Report (TER)

- (b) Monthly Report Due On: Feb 20 (M2), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11), Dec 20 (M12), Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S)

Election on MM/DD/YYYY in the State of

- (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

Election on 11/06/2018 in the State of

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

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Cadogan, Martin, , ,

Type or Print Name of Treasurer

Signature of Treasurer Cadogan, Martin, , , [Electronically Filed] Date 01/22/2019

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

Table with 7 columns and 1 row for Office Use Only.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**Win Back Your State PAC**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>		58551.30
(b) Cash on Hand at Beginning of Reporting Period.....	8478.36	
(c) Total Receipts (from Line 19) .....	25422.00	201884.22
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	33900.36	260435.52
7. Total Disbursements (from Line 31).....	26017.97	252553.13
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	7882.39	7882.39
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	2229.32	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

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 3X (Rev. 05/2016)

Write or Type Committee Name

**Win Back Your State PAC**

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 01 / 2018 To: M M / D D / Y Y Y Y 11 / 26 / 2018

<b>I. Receipts</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	18975.00	178195.00
(ii) Unitemized .....	1447.00	17689.22
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	20422.00	195884.22
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	5000.00	6000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	25422.00	201884.22
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)).....▶	25422.00	201884.22
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	25422.00	201884.22

**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 .....	16417.97	200755.13
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	16417.97	200755.13
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	- 1000.00	12250.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	100.00	7400.00
(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)).....	100.00	7400.00
29. Other Disbursements (Including Non-Federal Donations).....	10500.00	32148.00
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)) ..	26017.97	252553.13
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	26017.97	252553.13

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	25422.00	201884.22
34. Total Contribution Refunds (from Line 28(d)) .....	100.00	7400.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	25322.00	194484.22
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	16417.97	200755.13
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	16417.97	200755.13

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 46
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Win Back Your State PAC**

**A. Dillahunty, Dale, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6 Westwind Dr  
 City Sand Springs State OK Zip Code 74063-7658  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) American Airlines Occupation (for Individual) A&P Mechanic  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 01 / 2018  
**Transaction ID : VQCFK9M5KD1**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Fitzgerald, Veronica, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8 Kestner Ln  
 City Troy State NY Zip Code 12180-6517  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Omega Institute Occupation (for Individual) Fundraiser  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 01 / 2018  
**Transaction ID : VQCFK9M5KH3**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Larson, Patricia, Suzanne, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10 Granby Ct  
 City Derwood State MD Zip Code 20855-1406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Baltimore City Community College Occupation (for Individual) Instructor  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 01 / 2018  
**Transaction ID : VQCFK9M5KE9**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	75.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 46
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Win Back Your State PAC**

**A. Brown, Boyd, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4323 Kilbourne Rd  
 City Columbia State SC Zip Code 29206-4567  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Tompkins, Thompson & Brown Government Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 05 / 2018  
**Transaction ID : VQCFK9M5KN5**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. Walto, Dennis, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 186 Bellvale Lakes Rd Ste 220  
 City Warwick State NY Zip Code 10990-3454  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Children's Health Fund Occupation (for Individual) Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 06 / 2018  
**Transaction ID : VQCFK9M5KR8**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Gonzalez, Francisco, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 4494  
 City Greenwich State CT Zip Code 06831-0409  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) LSN Global Occupation (for Individual) Banker  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 07 / 2018  
**Transaction ID : VQCFK9M5KS6**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1150.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 46
	<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)  
**Win Back Your State PAC**

**A. Martin, Richard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6 W 53rd Ter  
 City Kansas City State MO Zip Code 64112-2805  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) JE Dunn Occupation (for Individual) Director of Government Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 12 / 2018  
**Transaction ID : VQCFK9M5M41**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Riordan, Kevin, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 332 Bay Colony Dr  
 City Virginia Beach State VA Zip Code 23451-3818  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Anthem Occupation (for Individual) lawyer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 12 / 2018  
**Transaction ID : VQCFK9M5M59**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Mendelson, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 909 Hyde St Ste 210  
 City San Francisco State CA Zip Code 94109-4845  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Physician  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 16 / 2018  
**Transaction ID : VQCFK9M5MB6**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	550.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 46
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Win Back Your State PAC**

**A. Woodbury, Roger, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2102 Avenue H  
 City Fort Madison State IA Zip Code 52627-4144  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) retired Occupation (for Individual) social work supervisor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 150.00

Date of Receipt 10 / 17 / 2018  
**Transaction ID : VQCFK9M5MD2**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. Bragdon, James, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1508 Stack St  
 City Baltimore State MD Zip Code 21230-4761  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Gallagher Evelius & Jones LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 10 / 18 / 2018  
**Transaction ID : VQCFK9M5ME0**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Dolbow, Edward, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10362 Buglenote Way  
 City Columbia State MD Zip Code 21044-3816  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Westat Occupation (for Individual) Systems Analyst  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 22 / 2018  
**Transaction ID : VQCFK9M5MM8**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	150.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 46
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Win Back Your State PAC**

**A. Gramlich, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9207 Kirkdale Rd  
 City Bethesda State MD Zip Code 20817-3303  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Grid Strategies LLC Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 10 / 23 / 2018  
**Transaction ID : VQCFK9M5MP3**  
 Amount of Each Receipt this Period 2000.00  
 Memo Item

**B. Walters, Kathryn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2515 Westchester Ave  
 City Ellicott City State MD Zip Code 21043-4743  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) UN Foundation Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 25 / 2018  
**Transaction ID : VQCFK9M5MV3**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Dolbow, Edward, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10362 Buglenote Way  
 City Columbia State MD Zip Code 21044-3816  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Westat Occupation (for Individual) Systems Analyst  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 28 / 2018  
**Transaction ID : VQCFK9M5N28**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2300.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 46
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Win Back Your State PAC**

**A. Peterson, Adam, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 896  
 19 South Greatwater Avenue  
 City Beverly Shores State IN Zip Code 46301-0896  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Camargo Investments, LLC Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 28 / 2018  
**Transaction ID : VQCFK9M5N52**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**B. Campbell-mckennis, Judith, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1109 Washingtonville Dr  
 City Baltimore State MD Zip Code 21210-1051  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) none Occupation (for Individual) retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 29 / 2018  
**Transaction ID : VQCFK9M5NB9**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. Cryor, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 22 Roland Grn  
 The Village of Cross Keys  
 City Baltimore State MD Zip Code 21210-2506  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The Cryor Group, LLC Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1605.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 29 / 2018  
**Transaction ID : VQCFK9M5QC1**  
 Amount of Each Receipt this Period  
 1500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1775.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 46
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Win Back Your State PAC**

**A. Rosen, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 23777 Mulholland Hwy  
 Spc 18  
 City Calabasas State CA Zip Code 91302-3782  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) self employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 29 / 2018  
**Transaction ID : VQCFK9M5QB3**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**B. Woodbury, Roger, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2102 Avenue H  
 City Fort Madison State IA Zip Code 52627-4144  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) retired Occupation (for Individual) social work supervisor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 29 / 2018  
**Transaction ID : VQCFK9M5NE3**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**C. Murren, James, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10300 W Charleston Blvd  
 City Las Vegas State NV Zip Code 89135-1037  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MGM Resorts International Inc. Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 30 / 2018  
**Transaction ID : VQCFK9M5NJ5**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5600.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 13 OF 46
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Win Back Your State PAC**

**A. Erikson Jr, Chris, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 16106 Jewel Ave  
 Apt 6J  
 City Flushing State NY Zip Code 11365-4347  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Local 3 IBEW Occupation (for Individual) Union Representative  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2018  
**Transaction ID : VQCFK9M5NP6**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Dillahunty, Dale, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6 Westwind Dr  
 City Sand Springs State OK Zip Code 74063-7658  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) American Airlines Occupation (for Individual) A&P Mechanic  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 01 / 2018  
**Transaction ID : VQCFK9M5NQ4**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**C. Fitzgerald, Veronica, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8 Kestner Ln  
 City Troy State NY Zip Code 12180-6517  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Omega Institute Occupation (for Individual) Fundraiser  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 01 / 2018  
**Transaction ID : VQCFK9M5NV6**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	300.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 46
	<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)  
**Win Back Your State PAC**

**A. Larson, Patricia, Suzanne, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10 Granby Ct  
 City Derwood State MD Zip Code 20855-1406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Baltimore City Community College Occupation (for Individual) Instructor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 01 / 2018  
**Transaction ID : VQCFK9M5NR2**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**B. Keith, Dennis, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 14 Barrier Reef Dr  
 City Corona Del Mar State CA Zip Code 92625-1410  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) retired Occupation (for Individual) retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 04 / 2018  
**Transaction ID : VQCFK9M5P05**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**C. Brown, Boyd, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4323 Kilbourne Rd  
 City Columbia State SC Zip Code 29206-4567  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Tompkins, Thompson & Brown Government Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 05 / 2018  
**Transaction ID : VQCFK9M5P21**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	175.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 46
	<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)  
**Win Back Your State PAC**

**A. Etzion, Jon, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 304 E 20th St  
 Apt LD  
 City New York State NY Zip Code 10003-1828  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RXR Realty Occupation (for Individual) Real Estate  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 05 / 2018  
**Transaction ID : VQCFK9M5P13**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Walto, Dennis, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 186 Bellvale Lakes Rd  
 Ste 220  
 City Warwick State NY Zip Code 10990-3454  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Children's Health Fund Occupation (for Individual) Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 11 / 06 / 2018  
**Transaction ID : VQCFK9M5P47**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Martin, Richard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6 W 53rd Ter  
 City Kansas City State MO Zip Code 64112-2805  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) JE Dunn Occupation (for Individual) Director of Government Affairs  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 12 / 2018  
**Transaction ID : VQCFK9M5PE6**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	325.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 46
	<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)  
**Win Back Your State PAC**

**A. O'Malley, Martin, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City Baltimore	State MD	Zip Code 21201
-------------------	-------------	-------------------

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

Name of Employer (for Individual) State of Maryland	Occupation (for Individual) Former Governor
--	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	13	/	2018

**Transaction ID : VQCFK9M5QA5**

Amount of Each Receipt this Period  
5000.00

Memo Item

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

Mailing Address 93 Nayatt Rd

City Barrington	State RI	Zip Code 02806-3310
--------------------	-------------	------------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	14	/	2018

**Transaction ID : VQCFK9M5Q71**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 32 Seafield Ln

City Bay Shore	State NY	Zip Code 11706-7815
-------------------	-------------	------------------------

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

Name of Employer (for Individual) UCOMM Communications	Occupation (for Individual) Media Consultant
---	---

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	14	/	2018

**Transaction ID : VQCFK9M5Q89**

Amount of Each Receipt this Period  
500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6000.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 46
	<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)  
**Win Back Your State PAC**

**A. McDonald, Tom, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1050 Connecticut Ave NW  
 Ste 1100  
 City Washington State DC Zip Code 20036-5318  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vory's Legal Counsel Occupation (for Individual) Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 14 / 2018  
**Transaction ID : VQCFK9M5Q97**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Mendelson, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 909 Hyde St  
 Ste 210  
 City San Francisco State CA Zip Code 94109-4845  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Physician  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 16 / 2018  
**Transaction ID : VQCFK9M5PJ7**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Bragdon, James, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1508 Stack St  
 City Baltimore State MD Zip Code 21230-4761  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Gallagher Evelius & Jones LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 18 / 2018  
**Transaction ID : VQCFK9M5PP9**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	550.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 18 OF 46  
(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)  
**Win Back Your State PAC**

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

Mailing Address 10362 Buglenote Way

City Columbia	State MD	Zip Code 21044-3816
------------------	-------------	------------------------

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

Name of Employer (for Individual) Westat	Occupation (for Individual) Systems Analyst
---	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
775.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		22		2018

**Transaction ID : VQCFK9M5PS3**

Amount of Each Receipt this Period  
25.00

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	25.00
<b>TOTAL</b> This Period (last page this line number only).....	18975.00

**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 19 OF 46
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Win Back Your State PAC**

**A. O'MALLEY FOR PRESIDENT**

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

Mailing Address 1501 Saint Paul St  
Ste 114

City Baltimore State MD Zip Code 21202-2808

FEC ID number of contributing federal political committee. **C** C00578658

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 12 / 2018

**Transaction ID : VQCFK9M5MJ2**

Amount of Each Receipt this Period  
5000.00

Memo Item

Contribution

**B.**

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

Mailing Address

City State Zip Code

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

**C.**

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

Mailing Address

City State Zip Code

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

**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)  
**Win Back Your State PAC**

Full Name (Last, First, Middle Initial)

**A. Direct Connect**

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 01 / 2018

Mailing Address 3901 Centerview Dr  
Ste W

FEC Identification Number

C
---

**Transaction ID : VQBGB9HQT**  
Amount of Each Disbursement this Period

499.61
--------

City Chantilly State VA Zip Code 20151-3229

Purpose of Disbursement  
Credit Card Processing Fees

Category/Type
---------------

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  
 Primary  General  Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

**B. Cybersource**

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 02 / 2018

Mailing Address 1295 Charleston Rd

FEC Identification Number

C
---

**Transaction ID : VQBGB9HQS**  
Amount of Each Disbursement this Period

44.95
-------

City Mountain View State CA Zip Code 94043-1307

Purpose of Disbursement  
Credit Card Processing Fees

Category/Type
---------------

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  
 Primary  General  Other (specify)

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

**C. Visa**

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 05 / 2018

Mailing Address PO Box 30131

FEC Identification Number

C
---

**Transaction ID : VQBGB9HQI**  
Amount of Each Disbursement this Period

4165.38
---------

City Tampa State FL Zip Code 33630-3131

Purpose of Disbursement  
Credit Card Payment

Category/Type
---------------

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  
 Primary  General  Other (specify) ▼

Memo Item

State: District:

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

4709.94
---------

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

--

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Win Back Your State PAC**

Full Name (Last, First, Middle Initial)

**A. American Airlines**

Mailing Address 4333 Amon Center Blvd

City Ft Worth State TX Zip Code 76115

Purpose of Disbursement  
Travel

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
10 / 05 / 2018

FEC Identification Number

C  
Transaction ID : VQBGB9HQ\$  
Amount of Each Disbursement this Period  
336.80

Memo Item

Full Name (Last, First, Middle Initial)

**B. American Airlines**

Mailing Address 4333 Amon Center Blvd

City Ft Worth State TX Zip Code 76115

Purpose of Disbursement  
Travel

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
10 / 05 / 2018

FEC Identification Number

C  
Transaction ID : VQBGB9HQ\$  
Amount of Each Disbursement this Period  
336.80

Memo Item

Full Name (Last, First, Middle Initial)

**C. American Airlines**

Mailing Address 4333 Amon Center Blvd

City Ft Worth State TX Zip Code 76115

Purpose of Disbursement  
Travel

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
10 / 05 / 2018

FEC Identification Number

C  
Transaction ID : VQBGB9HQ\$  
Amount of Each Disbursement this Period  
146.20

Memo Item

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

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

0.00

**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)  
**Win Back Your State PAC**

Full Name (Last, First, Middle Initial)

**A. Delta Airlines**

Mailing Address 1030 Delta Blvd

City  
Atlanta

State  
GA

Zip Code  
30354-1989

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			05			2018			

FEC Identification Number

**C** [ ]  
**Transaction ID : VQBGB9HQS**  
Amount of Each Disbursement this Period  
[ ] 344.20 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**B. Delta Airlines**

Mailing Address 1030 Delta Blvd

City  
Atlanta

State  
GA

Zip Code  
30354-1989

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			05			2018			

FEC Identification Number

**C** [ ]  
**Transaction ID : VQBGB9HQS**  
Amount of Each Disbursement this Period  
[ ] 344.20 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**C. Delta Airlines**

Mailing Address 1030 Delta Blvd

City  
Atlanta

State  
GA

Zip Code  
30354-1989

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			05			2018			

FEC Identification Number

**C** [ ]  
**Transaction ID : VQBGB9HQS**  
Amount of Each Disbursement this Period  
[ ] 141.20 [ ]

Memo Item

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

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

[ ] 0.00 [ ]
[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]

**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)  
**Win Back Your State PAC**

Full Name (Last, First, Middle Initial)

**A. Delta Airlines**

Mailing Address 1030 Delta Blvd

City Atlanta State GA Zip Code 30354-1989

Purpose of Disbursement  
Travel

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 05 / 2018

FEC Identification Number

C  
Transaction ID : VQBGB9HQ\$  
Amount of Each Disbursement this Period  
141.20

Memo Item

Full Name (Last, First, Middle Initial)

**B. Dropbox**

Mailing Address 76 Market Street

City San Francisco State CA Zip Code 94111-4801

Purpose of Disbursement  
Subscription

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 05 / 2018

FEC Identification Number

C  
Transaction ID : VQBGB9HQ\$  
Amount of Each Disbursement this Period  
750.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Southwest Airlines**

Mailing Address PO Box 36647

City Dallas State TX Zip Code 75235-1647

Purpose of Disbursement  
Travel

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 05 / 2018

FEC Identification Number

C  
Transaction ID : VQBGB9HQ\$  
Amount of Each Disbursement this Period  
293.98

Memo Item

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

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

0.00

**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)  
**Win Back Your State PAC**

Full Name (Last, First, Middle Initial)

**A. Southwest Airlines**

Mailing Address PO Box 36647

City  
Dallas

State  
TX

Zip Code  
75235-1647

Purpose of Disbursement  
Travel

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			05			2018			

FEC Identification Number

C [ ]

Transaction ID : VQBGB9HQS  
Amount of Each Disbursement this Period

[ ] 293.98

Memo Item

Full Name (Last, First, Middle Initial)

**B. Southwest Airlines**

Mailing Address PO Box 36647

City  
Dallas

State  
TX

Zip Code  
75235-1647

Purpose of Disbursement  
Travel

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			05			2018			

FEC Identification Number

C [ ]

Transaction ID : VQBGB9HQS  
Amount of Each Disbursement this Period

[ ] 156.98

Memo Item

Full Name (Last, First, Middle Initial)

**C. Southwest Airlines**

Mailing Address PO Box 36647

City  
Dallas

State  
TX

Zip Code  
75235-1647

Purpose of Disbursement  
Travel

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			05			2018			

FEC Identification Number

C [ ]

Transaction ID : VQBGB9HQS  
Amount of Each Disbursement this Period

[ ] 156.98

Memo Item

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

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

[ ] 0.00

[ ]



**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)  
**Win Back Your State PAC**

**A. Southwest Airlines**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 36647

City Dallas State TX Zip Code 75235-1647

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 05 / 2018

FEC Identification Number: C

Transaction ID : VQBGB9HQ\$

Amount of Each Disbursement this Period: 196.98

Memo Item

**B. Southwest Airlines**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 36647

City Dallas State TX Zip Code 75235-1647

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 05 / 2018

FEC Identification Number: C

Transaction ID : VQBGB9HQ\$

Amount of Each Disbursement this Period: 152.98

Memo Item

**C. united Airlines**

Full Name (Last, First, Middle Initial)

Mailing Address 233 S Wacker Dr Ste 430

City Chicago State IL Zip Code 60606-6435

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 05 / 2018

FEC Identification Number: C

Transaction ID : VQBGB9HQ\$

Amount of Each Disbursement this Period: 129.20

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Win Back Your State PAC**

Full Name (Last, First, Middle Initial)

**A. united Airlines**

Mailing Address 233 S Wacker Dr  
Ste 430

City Chicago State IL Zip Code 60606-6435

Purpose of Disbursement  
Travel

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 05 / 2018

FEC Identification Number

C  
Transaction ID : VQBGB9HQ5  
Amount of Each Disbursement this Period  
110.20

Memo Item

Full Name (Last, First, Middle Initial)

**B. Google**

Mailing Address 1600 Amphitheatre Pkwy

City Mountain View State CA Zip Code 94043-1351

Purpose of Disbursement  
Email Service

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 09 / 2018

FEC Identification Number

C  
Transaction ID : VQBGB9HQ5  
Amount of Each Disbursement this Period  
399.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Revolution Messaging, LLC**

Mailing Address 1730 Rhode Island Ave NW  
Ste 310

City Washington State DC Zip Code 20036-3101

Purpose of Disbursement  
Digital Services

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 31 / 2018

FEC Identification Number

C  
Transaction ID : VQBGB9HQ5  
Amount of Each Disbursement this Period  
642.43

Memo Item

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

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

1041.43

**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)  
**Win Back Your State PAC**

Full Name (Last, First, Middle Initial)

**A. Direct Connect**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		0	1		2	0	1	8		

Mailing Address 3901 Centerview Dr  
Ste W

City Chantilly State VA Zip Code 20151-3229

Purpose of Disbursement  
Credit Card Processing Fees

FEC Identification Number

**C** [ ]  
**Transaction ID : VQBGB9HQ1**  
Amount of Each Disbursement this Period  
[ ] 642.97

Candidate Name

Category/  
Type

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

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

**B. NGP VAN, Inc.**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		0	1		2	0	1	8		

Mailing Address 1101 15th St NW  
Ste 500

City Washington State DC Zip Code 20005-5006

Purpose of Disbursement  
Database

FEC Identification Number

**C** [ ]  
**Transaction ID : VQBGB9HQ1**  
Amount of Each Disbursement this Period  
[ ] 600.00

Candidate Name

Category/  
Type

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

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

**C. Google**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		0	6		2	0	1	8		

Mailing Address 1600 Amphitheatre Pkwy

City Mountain View State CA Zip Code 94043-1351

Purpose of Disbursement  
Email Service

FEC Identification Number

**C** [ ]  
**Transaction ID : VQBGB9HQ1**  
Amount of Each Disbursement this Period  
[ ] 399.00

Candidate Name

Category/  
Type

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

Memo Item

State: District:

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

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

[ ] 1641.97

[ ]

**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)  
**Win Back Your State PAC**

Full Name (Last, First, Middle Initial)

**A. Cybersource**

Mailing Address 1295 Charleston Rd

City Mountain View State CA Zip Code 94043-1307

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 09 / 2018

FEC Identification Number

C  
Transaction ID : VQBGB9HQ1  
Amount of Each Disbursement this Period  
44.95

Memo Item

Full Name (Last, First, Middle Initial)

**B. O'Malley, Martin, , ,**

Mailing Address

City Baltimore State MD Zip Code 21201

Purpose of Disbursement  
Reimbursement, See Below if Itemized

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 09 / 2018

FEC Identification Number

C  
Transaction ID : VQBGB9HQ1  
Amount of Each Disbursement this Period  
377.96

Memo Item

Full Name (Last, First, Middle Initial)

**C. Holiday Inn**

Mailing Address 3 Ravinia Dr  
Ste 100

City Atlanta State GA Zip Code 30346-2121

Purpose of Disbursement  
Travel

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 09 / 2018

FEC Identification Number

C  
Transaction ID : VQBGB9HQ1  
Amount of Each Disbursement this Period  
122.23

Memo Item

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

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

422.91

**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)  
**Win Back Your State PAC**

Full Name (Last, First, Middle Initial)

**A. Holiday Inn**

Mailing Address 3 Ravinia Dr  
Ste 100

City Atlanta State GA Zip Code 30346-2121

Purpose of Disbursement  
Travel

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 09 / 2018

FEC Identification Number

C  
Transaction ID : VQBGB9HQT  
Amount of Each Disbursement this Period  
180.73

Memo Item

Full Name (Last, First, Middle Initial)

**B. Public Policy Polling**

Mailing Address 2912 Highwoods Blvd  
Ste 201

City Raleigh State NC Zip Code 27604-1095

Purpose of Disbursement  
Polling Services

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 19 / 2018

FEC Identification Number

C  
Transaction ID : VQBGB9HQT  
Amount of Each Disbursement this Period  
4500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Visa**

Mailing Address PO Box 30131

City Tampa State FL Zip Code 33630-3131

Purpose of Disbursement  
Credit Card Payment, See Below if Itemized

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 21 / 2018

FEC Identification Number

C  
Transaction ID : VQBGB9HQT  
Amount of Each Disbursement this Period  
4074.94

Memo Item

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

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

8574.94

**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)  
**Win Back Your State PAC**

**A. Agoda Company Pte. Ltd.**

Full Name (Last, First, Middle Initial)

Mailing Address 30 Cecil Street

City Prudential Tower #19-08 State Zip Code 049712

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 11 / 21 / 2018

FEC Identification Number: C

Transaction ID : VQBGB9HQV

Amount of Each Disbursement this Period: 102.97

Memo Item

**B. Agoda Company Pte. Ltd.**

Full Name (Last, First, Middle Initial)

Mailing Address 30 Cecil Street

City Prudential Tower #19-08 State Zip Code 049712

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 11 / 21 / 2018

FEC Identification Number: C

Transaction ID : VQBGB9HQV

Amount of Each Disbursement this Period: 102.97

Memo Item

**C. Amtrak**

Full Name (Last, First, Middle Initial)

Mailing Address 1500 N Charles St

City Baltimore State MD Zip Code 21201-5815

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 11 / 21 / 2018

FEC Identification Number: C

Transaction ID : VQBGB9HQV

Amount of Each Disbursement this Period: 77.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Win Back Your State PAC**

Full Name (Last, First, Middle Initial)  
**A. Amtrak**

Date of Disbursement: MM / DD / YYYY  
11 / 21 / 2018

Mailing Address 1500 N Charles St

City Baltimore State MD Zip Code 21201-5815

Purpose of Disbursement: Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

FEC Identification Number: C  
Transaction ID : VQBGB9HQV  
Amount of Each Disbursement this Period: 77.00  
 Memo Item

Full Name (Last, First, Middle Initial)  
**B. Delta Airlines**

Date of Disbursement: MM / DD / YYYY  
11 / 21 / 2018

Mailing Address 1030 Delta Blvd

City Atlanta State GA Zip Code 30354-1989

Purpose of Disbursement: Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

FEC Identification Number: C  
Transaction ID : VQBGB9HQV  
Amount of Each Disbursement this Period: 276.00  
 Memo Item

Full Name (Last, First, Middle Initial)  
**C. Delta Airlines**

Date of Disbursement: MM / DD / YYYY  
11 / 21 / 2018

Mailing Address 1030 Delta Blvd

City Atlanta State GA Zip Code 30354-1989

Purpose of Disbursement: Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

FEC Identification Number: C  
Transaction ID : VQBGB9HQV  
Amount of Each Disbursement this Period: 276.00  
 Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Win Back Your State PAC**

Full Name (Last, First, Middle Initial)

**A. Delta Airlines**

Mailing Address 1030 Delta Blvd

City Atlanta State GA Zip Code 30354-1989

Purpose of Disbursement  
Travel

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		2	1		2	0	1	8		

FEC Identification Number

C [REDACTED]  
**Transaction ID : VQBGB9HQV**  
Amount of Each Disbursement this Period  
[REDACTED] 264.80

Memo Item

Full Name (Last, First, Middle Initial)

**B. Delta Airlines**

Mailing Address 1030 Delta Blvd

City Atlanta State GA Zip Code 30354-1989

Purpose of Disbursement  
Travel

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		2	1		2	0	1	8		

FEC Identification Number

C [REDACTED]  
**Transaction ID : VQBGB9HQV**  
Amount of Each Disbursement this Period  
[REDACTED] 264.80

Memo Item

Full Name (Last, First, Middle Initial)

**C. Delta Airlines**

Mailing Address 1030 Delta Blvd

City Atlanta State GA Zip Code 30354-1989

Purpose of Disbursement  
Travel

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		2	1		2	0	1	8		

FEC Identification Number

C [REDACTED]  
**Transaction ID : VQBGB9HQV**  
Amount of Each Disbursement this Period  
[REDACTED] 258.20

Memo Item

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

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

[REDACTED]	0.00
------------	------

[REDACTED]	
------------	--



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Win Back Your State PAC**

Full Name (Last, First, Middle Initial)

**A. Delta Airlines**

Mailing Address 1030 Delta Blvd

City Atlanta State GA Zip Code 30354-1989

Purpose of Disbursement  
Travel

Candidate Name

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		21		2018

FEC Identification Number

**C** [Redacted]  
**Transaction ID : VQBGB9HQV**  
Amount of Each Disbursement this Period  
[Redacted] 258.20

Memo Item

Full Name (Last, First, Middle Initial)

**B. Extra Space Storage**

Mailing Address 7722 Fenton St

City Silver Spring State MD Zip Code 20910-4942

Purpose of Disbursement  
Storage

Candidate Name

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		21		2018

FEC Identification Number

**C** [Redacted]  
**Transaction ID : VQBGB9HQV**  
Amount of Each Disbursement this Period  
[Redacted] 280.24

Memo Item

Full Name (Last, First, Middle Initial)

**C. EZ Storage**

Mailing Address 4301 Rhode Island Ave

City Brentwood State MD Zip Code 20722-1443

Purpose of Disbursement  
Storage

Candidate Name

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		21		2018

FEC Identification Number

**C** [Redacted]  
**Transaction ID : VQBGB9HQV**  
Amount of Each Disbursement this Period  
[Redacted] 96.00

Memo Item

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

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

[Redacted]	0.00
[Redacted]	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Win Back Your State PAC**

Full Name (Last, First, Middle Initial)

**A. Google**

Mailing Address 1600 Amphitheatre Pkwy

City Mountain View State CA Zip Code 94043-1351

Purpose of Disbursement  
Email Services

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 21 / 2018

FEC Identification Number

C  
Transaction ID : VQBGB9HQV  
Amount of Each Disbursement this Period  
21.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Hotels.com**

Mailing Address 5400 Lbj Fwy Ste 500

City Dallas State TX Zip Code 75240-1019

Purpose of Disbursement  
Travel

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 21 / 2018

FEC Identification Number

C  
Transaction ID : VQBGB9HQV  
Amount of Each Disbursement this Period  
140.11

Memo Item

Full Name (Last, First, Middle Initial)

**C. Spirit Airlines**

Mailing Address Atlantic City International Airpor

City Egg Harbor State NJ Zip Code 18215

Purpose of Disbursement  
Travel

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 21 / 2018

FEC Identification Number

C  
Transaction ID : VQBGB9HQV  
Amount of Each Disbursement this Period  
147.19

Memo Item

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

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

0.00

**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)  
**Win Back Your State PAC**

Full Name (Last, First, Middle Initial)

**A. Spirit Airlines**

Mailing Address Atlantic City International Airpor

City Egg Harbor State NJ Zip Code 18215

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			21			2018			

FEC Identification Number

C [REDACTED]  
**Transaction ID : VQBGB9HQV**  
Amount of Each Disbursement this Period  
[REDACTED] 144.19

Memo Item

Full Name (Last, First, Middle Initial)

**B. The Draftsman Hotel**

Mailing Address 1106 W Main St

City Charlottesville State VA Zip Code 22903-2856

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			21			2018			

FEC Identification Number

C [REDACTED]  
**Transaction ID : VQBGB9HQV**  
Amount of Each Disbursement this Period  
[REDACTED] 231.97

Memo Item

Full Name (Last, First, Middle Initial)

**C. United Airlines**

Mailing Address 1001 Aviation Blvd

City Linthicum Heights State MD Zip Code 21090

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			21			2018			

FEC Identification Number

C [REDACTED]  
**Transaction ID : VQBGB9HQV**  
Amount of Each Disbursement this Period  
[REDACTED] 10.99

Memo Item

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

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

[REDACTED]	0.00
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[REDACTED]	
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Win Back Your State PAC**

Full Name (Last, First, Middle Initial)

**A. United Airlines**

Mailing Address 1001 Aviation Blvd

City Linthicum Heights State MD Zip Code 21090

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 21 / 2018

FEC Identification Number

C  
Transaction ID : VQBGB9HQV  
Amount of Each Disbursement this Period  
210.80

Memo Item

Full Name (Last, First, Middle Initial)

**B. United Airlines**

Mailing Address 1001 Aviation Blvd

City Linthicum Heights State MD Zip Code 21090

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 21 / 2018

FEC Identification Number

C  
Transaction ID : VQBGB9HQV  
Amount of Each Disbursement this Period  
13.99

Memo Item

Full Name (Last, First, Middle Initial)

**C. United Airlines**

Mailing Address 1001 Aviation Blvd

City Linthicum Heights State MD Zip Code 21090

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 21 / 2018

FEC Identification Number

C  
Transaction ID : VQBGB9HQV  
Amount of Each Disbursement this Period  
210.80

Memo Item

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

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

0.00

**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)  
**Win Back Your State PAC**

Full Name (Last, First, Middle Initial)

**A. United Airlines**

Mailing Address 1001 Aviation Blvd

City Linthicum Heights State MD Zip Code 21090

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			21			2018			

FEC Identification Number

**C** [Redacted]  
Transaction ID : VQBGB9HQV  
Amount of Each Disbursement this Period  
[Redacted] 164.80

Memo Item

Full Name (Last, First, Middle Initial)

**B. United Airlines**

Mailing Address 1001 Aviation Blvd

City Linthicum Heights State MD Zip Code 21090

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			21			2018			

FEC Identification Number

**C** [Redacted]  
Transaction ID : VQBGB9HQV  
Amount of Each Disbursement this Period  
[Redacted] 164.80

Memo Item

Full Name (Last, First, Middle Initial)

**C. WPEngine.com**

Mailing Address 504 Lavaca St Ste 1000

City Austin State TX Zip Code 78701-2857

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			21			2018			

FEC Identification Number

**C** [Redacted]  
Transaction ID : VQBGB9HQV  
Amount of Each Disbursement this Period  
[Redacted] 115.00

Memo Item

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

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

0.00
16391.19

**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 checked="" 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)  
**Win Back Your State PAC**

Full Name (Last, First, Middle Initial) <b>A. HAGAN FOR US SENATE INC</b>		Date of Disbursement M M / D D / Y Y Y Y Y Y 11 / 26 / 2018	
Mailing Address PO Box 29103			
City Greensboro State NC Zip Code 27429-9103		FEC Identification Number <b>C</b> S8NC00239 <b>Transaction ID : VQGB9HQV</b> Amount of Each Disbursement this Period - 1000.00	
Purpose of Disbursement Check void		Category/Type	
Candidate Name <b>HAGAN, KAY R, , ,</b>			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item	
State: NC District: 00			

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y Y Y	
Mailing Address			
City State Zip Code		FEC Identification Number <b>C</b>	
Purpose of Disbursement		Amount of Each Disbursement this Period	
Candidate Name		<input type="checkbox"/> Memo Item	
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:			

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y Y Y	
Mailing Address			
City State Zip Code		FEC Identification Number <b>C</b>	
Purpose of Disbursement		Amount of Each Disbursement this Period	
Candidate Name		<input type="checkbox"/> Memo Item	
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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	- 1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	- 1000.00

**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 checked="" 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)  
**Win Back Your State PAC**

**A. Brown, Boyd, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 4323 Kilbourne Rd

City Columbia State SC Zip Code 29206-4567

Purpose of Disbursement Refund of Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 01 / 2018

FEC Identification Number: C

Transaction ID : VQGB9HQT

Amount of Each Disbursement this Period: 100.00

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	100.00

**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)  
**Win Back Your State PAC**

**A. Friends of Steuart Pittman**

Full Name (Last, First, Middle Initial)

Mailing Address 1215 E Fort Ave  
Ste 303

City Baltimore State MD Zip Code 21230-5281

Purpose of Disbursement Non-federal In-kind contribution of email list

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 10 / 13 / 2018

FEC Identification Number C

Transaction ID : VQBGB9HQV

Amount of Each Disbursement this Period 379.36

Memo Item

**B. Laura Kelly for Governor**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 2098

City Topeka State KS Zip Code 66601-2098

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 10 / 17 / 2018

FEC Identification Number C

Transaction ID : VQBGB9HQS

Amount of Each Disbursement this Period 1000.00

Memo Item

**C. Committee to Elect Jackie Anderson-Smith**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 171

City Birmingham State AL Zip Code 35201-0171

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 10 / 20 / 2018

FEC Identification Number C

Transaction ID : VQBGB9HQ1

Amount of Each Disbursement this Period 500.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1500.00

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



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

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
**Win Back Your State PAC**

Full Name (Last, First, Middle Initial) <b>A. Friends of Steuart Pittman</b>		Date of Disbursement MM / DD / YYYY 10 / 20 / 2018
Mailing Address 1215 E Fort Ave Ste 303		FEC Identification Number C [REDACTED] <b>Transaction ID : VQBGB9HQT</b> Amount of Each Disbursement this Period 500.00
City Baltimore	State MD	Zip Code 21230-5281
Purpose of Disbursement Nonfederal Contribution		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. James Smith for South Carolina</b>		Date of Disbursement MM / DD / YYYY 10 / 20 / 2018
Mailing Address PO Box 694		FEC Identification Number C [REDACTED] <b>Transaction ID : VQBGB9HQT</b> Amount of Each Disbursement this Period 1000.00
City Columbia	State SC	Zip Code 29202-0694
Purpose of Disbursement Nonfederal Contribution		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Friends of Ben Jealous</b>		Date of Disbursement MM / DD / YYYY 10 / 23 / 2018
Mailing Address PO Box 8715		FEC Identification Number C [REDACTED] <b>Transaction ID : VQBGB9HQT</b> Amount of Each Disbursement this Period 751.38
City Silver Spring	State MD	Zip Code 20907-8715
Purpose of Disbursement Non-federal In-kind contribution of email list		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

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

1500.00

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

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
**Win Back Your State PAC**

Full Name (Last, First, Middle Initial) <b>A. Friends of Ben Jealous</b>		Date of Disbursement MM / DD / YYYY 10 / 25 / 2018
Mailing Address PO Box 8715		FEC Identification Number C [REDACTED] <b>Transaction ID : VQBGB9HQT</b> Amount of Each Disbursement this Period [REDACTED] 2500.00
City Silver Spring	State MD	Zip Code 20907-8715
Purpose of Disbursement Nonfederal Contribution		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Friends of Vedat Gashi</b>		Date of Disbursement MM / DD / YYYY 10 / 25 / 2018
Mailing Address 345 Kear St Ste 104		FEC Identification Number C [REDACTED] <b>Transaction ID : VQBGB9HQT</b> Amount of Each Disbursement this Period [REDACTED] 196.00
City Yorktown Heights	State NY	Zip Code 10598-4440
Purpose of Disbursement Non-federal In-kind contribution of email list		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Calvin Ball for Howard County Executive</b>		Date of Disbursement MM / DD / YYYY 11 / 02 / 2018
Mailing Address 3430 Court House Dr		FEC Identification Number C [REDACTED] <b>Transaction ID : VQBGB9HQT</b> Amount of Each Disbursement this Period [REDACTED] 1000.00
City Ellicott City	State MD	Zip Code 21043-4300
Purpose of Disbursement Nonfederal Contribution		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 3500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

<input 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

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)  
**Win Back Your State PAC**

Full Name (Last, First, Middle Initial)  
**A. Friends of John Olszewski, Jr**

Date of Disbursement: MM / DD / YYYY  
11 / 02 / 2018

Mailing Address PO Box 35202

City Dundalk State MD Zip Code 21222-7202

Purpose of Disbursement Nonfederal Contribution

Candidate Name

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

State: District:

FEC Identification Number: C  
Transaction ID : VQBGB9HQV  
Amount of Each Disbursement this Period: 1000.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Cordray for OH**

Date of Disbursement: MM / DD / YYYY  
11 / 04 / 2018

Mailing Address PO Box 7910

City Columbus State OH Zip Code 43207-0910

Purpose of Disbursement Nonfederal Contribution

Candidate Name

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

State: District:

FEC Identification Number: C  
Transaction ID : VQBGB9HQV  
Amount of Each Disbursement this Period: 1000.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Dave Van Compernelle for IA**

Date of Disbursement: MM / DD / YYYY  
11 / 04 / 2018

Mailing Address 4802 Barnes City Rd

City Montezuma State IA Zip Code 50171

Purpose of Disbursement Nonfederal Contribution

Candidate Name

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

State: District:

FEC Identification Number: C  
Transaction ID : VQBGB9HQV  
Amount of Each Disbursement this Period: 500.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
**Win Back Your State PAC**

**A. Drew Edmonson for OK Governor**

Full Name (Last, First, Middle Initial)

Mailing Address 4901 Richmond Sq  
Ste 102

City Oklahoma City State OK Zip Code 73118-2000

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 04 / 2018

FEC Identification Number: C

Transaction ID : VQBGB9HQV

Amount of Each Disbursement this Period: 1000.00

Memo Item

**B. Michael Donnelly for Ohio Supreme Court**

Full Name (Last, First, Middle Initial)

Mailing Address 545 E Town St

City Columbus State OH Zip Code 43215-4801

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 04 / 2018

FEC Identification Number: C

Transaction ID : VQBGB9HQV

Amount of Each Disbursement this Period: 500.00

Memo Item

**C. Rogers Kirk for IA Board**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 4073

City Davenport State IA Zip Code 52808-4073

Purpose of Disbursement Nonfederal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 04 / 2018

FEC Identification Number: C

Transaction ID : VQBGB9HQV

Amount of Each Disbursement this Period: 500.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2000.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 46
	<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)  
**Win Back Your State PAC**

**A. Nate Boulton for Iowa Senate**

Full Name (Last, First, Middle Initial)  
Mailing Address 2607 Wisconsin Ave

City Des Moines   State IA   Zip Code 50317-3049

Purpose of Disbursement:  Check void    Category/Type

Candidate Name

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

State:   District:

Date of Disbursement: MM / DD / YYYY  
11 / 26 / 2018

FEC Identification Number:  C

Transaction ID : VQGB9HQV

Amount of Each Disbursement this Period:  - 500.00

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City   State   Zip Code

Purpose of Disbursement:  Check void    Category/Type

Candidate Name

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

State:   District:

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:  Check void    Category/Type

Candidate Name

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

State:   District:

Date of Disbursement: MM / DD / YYYY

FEC Identification Number:  C

Amount of Each Disbursement this Period:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	<input type="text"/> - 500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/> 10500.00

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 46 OF 46
	FOR LINE NUMBER: (check only one)
	<input checked="" type="checkbox"/> 9
	<input type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Win Back Your State PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>PAT MURPHY FOR IOWA</b>			Nature of Debt (Purpose): Refund of Excessive Contribution
Mailing Address PO Box 692			
City Dubuque	State IA	Zip Code 52004-0692	

Outstanding Balance Beginning This Period		Transaction ID : <b>VQ9HV9H5M04</b>	
2229.32			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	2229.32	

B. 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			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

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			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	2229.32
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	2229.32
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	2229.32