

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

The Fund for American Exceptionalism

ADDRESS (number and street) 1801 N Shutt Hill Road

Check if different than previously reported. (ACC) Huntington IN 46750-9101

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C C00512855

3. IS THIS REPORT NEW OR AMENDED (N) (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 MM/DD/YYYY in the State of

5. Covering Period 04/01/2018 through 06/30/2018

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

Type or Print Name of Treasurer

Signature of Treasurer Erler, Michael, J, Mr., Sr. [Electronically Filed] Date 07/10/2018

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

The Fund for American Exceptionalism

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"/>		60338.39
(b) Cash on Hand at Beginning of Reporting Period.....	59118.91	
(c) Total Receipts (from Line 19)	8505.00	30105.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	67623.91	90443.39
7. Total Disbursements (from Line 31).....	12176.88	34996.36
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	55447.03	55447.03
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

The Fund for American Exceptionalism

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	6500.00	21600.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	6500.00	21600.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	2000.00	8500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	8500.00	30100.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	5.00	5.00
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)).....▶	8505.00	30105.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	8505.00	30105.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	7736.88	15556.36
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	7736.88	15556.36
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	5000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	4440.00	14440.00
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)) ..	12176.88	34996.36
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12176.88	34996.36

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	8500.00	30100.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	8500.00	30100.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	7736.88	15556.36
37. Offsets to Operating Expenditures (from Line 15, page 3).....	5.00	5.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	7731.88	15551.36

**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 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
The Fund for American Exceptionalism

A. Avgerinos, Debora, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4968 Kingsbury Drive
 City Pittsboro State IN Zip Code 46167-9577
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Flapjacks Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 04 / 2018
Transaction ID : A8729B215A3A44DEA907
 Amount of Each Receipt this Period 2500.00
 Memo Item

B. Raschke, Dean, , Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 911 N. 3rd Avenue
 City Saint Charles State IL Zip Code 60174-1217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Roadside Protect Occupation (for Individual) Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 12 / 2018
Transaction ID : A5DC85A7FD0B942F499A
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Rayes, Patrick, Odell, Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 195429
 City Dallas State TX Zip Code 75219-8607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Investor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 04 / 03 / 2018
Transaction ID : A896F36FA632F45089D8
 Amount of Each Receipt this Period 2500.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
The Fund for American Exceptionalism

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Redmond, Michael, , Mr.,

Mailing Address 1321 E. Forest Avenue

City Wheaton	State IL	Zip Code 60187-4467
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Third Coast Media LLC	Occupation (for Individual) Marketing
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 01 / 2018

Transaction ID : A53CC144E53FB419C96F

Amount of Each Receipt this Period
500.00

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 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 Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	6500.00

**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 8 OF 20
<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)
The Fund for American Exceptionalism

A. United Parcel Service Inc. PAC

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

Mailing Address 55 Glenlake Pkwy
Mark Alagna

City Atlanta State GA Zip Code 30328-3474

FEC ID number of contributing federal political committee. **C** C00064766

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 03 / 2018

Transaction ID : A5E5390EC9FFF4BE1802

Amount of Each Receipt this Period
2000.00

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 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 Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	2000.00
TOTAL This Period (last page this line number only).....	2000.00

**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)
The Fund for American Exceptionalism

Full Name (Last, First, Middle Initial) A. Aristotle International Inc		Date of Disbursement MM / DD / YYYY 04 / 08 / 2018	
Mailing Address 205 Pennsylvania Avenue SE			
City Washington	State DC	Zip Code 20003-1164	
Purpose of Disbursement Compliance software		<input type="checkbox"/> Category/Type	
Candidate Name		FEC Identification Number C Transaction ID : B92FE9F4BA Amount of Each Disbursement this Period 600.00	
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:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. Aristotle International Inc		Date of Disbursement MM / DD / YYYY 05 / 25 / 2018	
Mailing Address 205 Pennsylvania Avenue SE			
City Washington	State DC	Zip Code 20003-1164	
Purpose of Disbursement Compliance software		<input type="checkbox"/> Category/Type	
Candidate Name		FEC Identification Number C Transaction ID : BC71DEA1C6 Amount of Each Disbursement this Period 600.00	
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:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. Gula Graham		Date of Disbursement MM / DD / YYYY 06 / 10 / 2018	
Mailing Address 499 S Capital St SW Suite 420			
City Washington	State DC	Zip Code 20003-4027	
Purpose of Disbursement Fundraising consulting		<input type="checkbox"/> Category/Type	
Candidate Name		FEC Identification Number C Transaction ID : B2E0AE0E17 Amount of Each Disbursement this Period 650.00	
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:	<input type="checkbox"/> Memo Item		

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

1850.00

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)
The Fund for American Exceptionalism

Full Name (Last, First, Middle Initial)

A. Holtzman Vogel Josefiak PLLC

Mailing Address 45 N Hill Drive
Suite 100

City Warrenton State VA Zip Code 20186-2678

Purpose of Disbursement
Legal fees

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 Y
04 / 22 / 2018

FEC Identification Number

C
Transaction ID : BA1E708036
Amount of Each Disbursement this Period
225.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Holtzman Vogel Josefiak PLLC

Mailing Address 45 N Hill Drive
Suite 100

City Warrenton State VA Zip Code 20186-2678

Purpose of Disbursement
Legal fees

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 Y
05 / 25 / 2018

FEC Identification Number

C
Transaction ID : BBBD99F4C#
Amount of Each Disbursement this Period
168.75

Memo Item

Full Name (Last, First, Middle Initial)

C. Paycor

Mailing Address 644 Linn St
Ste 200

City Cincinnati State OH Zip Code 45203-1720

Purpose of Disbursement
Payroll tax

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 Y
04 / 03 / 2018

FEC Identification Number

C
Transaction ID : B5D856B8D/
Amount of Each Disbursement this Period
133.35

Memo Item

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

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

527.10

**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)
The Fund for American Exceptionalism

Full Name (Last, First, Middle Initial)

A. Paycor

Mailing Address 644 Linn St
Ste 200

City Cincinnati State OH Zip Code 45203-1720

Purpose of Disbursement
Payroll processing fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : BCE5B2B88A
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Paycor

Mailing Address 644 Linn St
Ste 200

City Cincinnati State OH Zip Code 45203-1720

Purpose of Disbursement
Payroll taxes

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : BC3845E42F!
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Paycor

Mailing Address 644 Linn St
Ste 200

City Cincinnati State OH Zip Code 45203-1720

Purpose of Disbursement
Payroll processing fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : B48B8282FA
Amount of Each Disbursement this Period

Memo Item

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

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)
The Fund for American Exceptionalism

Full Name (Last, First, Middle Initial)

A. Paycor

Mailing Address 644 Linn St
Ste 200

City Cincinnati State OH Zip Code 45203-1720

Purpose of Disbursement
Payroll taxes

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 27 / 2018

FEC Identification Number

C
Transaction ID : B80B87D5CE
Amount of Each Disbursement this Period
282.86

Memo Item

Full Name (Last, First, Middle Initial)

B. Paycor

Mailing Address 644 Linn St
Ste 200

City Cincinnati State OH Zip Code 45203-1720

Purpose of Disbursement
Payroll processing fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 11 / 2018

FEC Identification Number

C
Transaction ID : B1EB48E27B
Amount of Each Disbursement this Period
50.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Paycor

Mailing Address 644 Linn St
Ste 200

City Cincinnati State OH Zip Code 45203-1720

Purpose of Disbursement
Payroll taxes

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 11 / 2018

FEC Identification Number

C
Transaction ID : B93A6635F8
Amount of Each Disbursement this Period
62.86

Memo Item

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

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

395.72

**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)
The Fund for American Exceptionalism

Full Name (Last, First, Middle Initial)

A. Paycor

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		2	5		2	0	1	8		

Mailing Address 644 Linn St
Ste 200

City Cincinnati State OH Zip Code 45203-1720

Purpose of Disbursement
Payroll taxes

FEC Identification Number

C []
Transaction ID : B9AD045A9A
Amount of Each Disbursement this Period
[] 19.11 []

Candidate Name

Category/
Type

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

Memo Item

Full Name (Last, First, Middle Initial)

B. Paycor

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		2	5		2	0	1	8		

Mailing Address 644 Linn St
Ste 200

City Cincinnati State OH Zip Code 45203-1720

Purpose of Disbursement
Payroll processing fee

FEC Identification Number

C []
Transaction ID : BB6A98BD62
Amount of Each Disbursement this Period
[] 50.00 []

Candidate Name

Category/
Type

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

Memo Item

Full Name (Last, First, Middle Initial)

C. Salin Bank

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4		0	9		2	0	1	8		

Mailing Address 8455 Keystone Crossing
Suite 100

City Indianapolis State IN Zip Code 46240-4303

Purpose of Disbursement
Stop payment fee

FEC Identification Number

C []
Transaction ID : B1E8E44488
Amount of Each Disbursement this Period
[] 35.00 []

Candidate Name

Category/
Type

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

Memo Item

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

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

[] 104.11 []

**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)
The Fund for American Exceptionalism

Full Name (Last, First, Middle Initial)

A. Salin Bank

Mailing Address 8455 Keystone Crossing
Suite 100

City Indianapolis State IN Zip Code 46240-4303

Purpose of Disbursement
Credit card payment

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 10 / 2018

FEC Identification Number

C
Transaction ID : B17E2D74A8
Amount of Each Disbursement this Period
508.21

Memo Item

Full Name (Last, First, Middle Initial)

B. Mckinneys Flowers

Mailing Address 1700 N 17th St

City Lafayette State IN Zip Code 47904-1403

Purpose of Disbursement
Gifts to volunteers

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 10 / 2018

FEC Identification Number

C
Transaction ID : BAF410818D
Amount of Each Disbursement this Period
414.09

Memo Item

Full Name (Last, First, Middle Initial)

C. Salin Bank

Mailing Address 8455 Keystone Crossing
Suite 100

City Indianapolis State IN Zip Code 46240-4303

Purpose of Disbursement
Credit card payment

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 14 / 2018

FEC Identification Number

C
Transaction ID : B3B52F6F14
Amount of Each Disbursement this Period
367.65

Memo Item

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

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

875.86

**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)
The Fund for American Exceptionalism

Full Name (Last, First, Middle Initial)

A. Walmart

Mailing Address 702 S.W. Eighth St.

City Bentonville State AR Zip Code 72716-6209

Purpose of Disbursement
Office supplies

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 14 / 2018

FEC Identification Number

C
Transaction ID : B76547CE4D
Amount of Each Disbursement this Period
37.36

Memo Item

Full Name (Last, First, Middle Initial)

B. Salin Bank

Mailing Address 8455 Keystone Crossing Suite 100

City Indianapolis State IN Zip Code 46240-4303

Purpose of Disbursement
Credit card payment

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 12 / 2018

FEC Identification Number

C
Transaction ID : B1E8F47D43I
Amount of Each Disbursement this Period
635.14

Memo Item

Full Name (Last, First, Middle Initial)

C. Indiana Flight Center

Mailing Address 2128 Airport Rd

City Elkhart State IN Zip Code 46514-5600

Purpose of Disbursement
Air travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 12 / 2018

FEC Identification Number

C
Transaction ID : BDA97C9D7
Amount of Each Disbursement this Period
294.06

Memo Item

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

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

635.14

**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)
The Fund for American Exceptionalism

A. Spencer County Republican Central Comm

Full Name (Last, First, Middle Initial)

Mailing Address 4584 Silverdale Rd

City Rockport State IN Zip Code 47635-9220

Purpose of Disbursement Event fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 22 / 2018

FEC Identification Number: C

Transaction ID : B6EEEE7A32

Amount of Each Disbursement this Period: 500.00

Memo Item

B. Weber, Jamie, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 111 E Cherry Street

City Watseka State IL Zip Code 60970-1669

Purpose of Disbursement Payroll

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 03 / 2018

FEC Identification Number: C

Transaction ID : B4CE33F2B4

Amount of Each Disbursement this Period: 420.40

Memo Item

C. Weber, Jamie, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 111 E Cherry Street

City Watseka State IL Zip Code 60970-1669

Purpose of Disbursement Payroll

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 13 / 2018

FEC Identification Number: C

Transaction ID : B3CEE21451

Amount of Each Disbursement this Period: 420.40

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1340.80

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)
The Fund for American Exceptionalism

A. Weber, Jamie, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 111 E Cherry Street

City Watseka State IL Zip Code 60970-1669

Purpose of Disbursement Payroll

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
04 / 27 / 2018

FEC Identification Number: C

Transaction ID : B0444C0FC4

Amount of Each Disbursement this Period: 749.32

Memo Item

B. Weber, Jamie, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 111 E Cherry Street

City Watseka State IL Zip Code 60970-1669

Purpose of Disbursement Payroll

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
05 / 11 / 2018

FEC Identification Number: C

Transaction ID : BBCA74B471

Amount of Each Disbursement this Period: 241.71

Memo Item

C. Weber, Jamie, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 111 E Cherry Street

City Watseka State IL Zip Code 60970-1669

Purpose of Disbursement Payroll

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
05 / 25 / 2018

FEC Identification Number: C

Transaction ID : B2614F6C09

Amount of Each Disbursement this Period: 80.57

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1071.60

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)
The Fund for American Exceptionalism

Full Name (Last, First, Middle Initial)

A. White County GOP

Mailing Address 128 S. Illinois St.
Suite A

City Monticello State IN Zip Code 47960-2269

Purpose of Disbursement
Event fee

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : BFE243CE7F
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

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

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)
The Fund for American Exceptionalism

Full Name (Last, First, Middle Initial) A. Doug Lamalfa Committee		Date of Disbursement MM / DD / YYYY 06 / 04 / 2018
Mailing Address 1127 11th St Ste 548		FEC Identification Number C [REDACTED] Transaction ID : BDDF50D56C Amount of Each Disbursement this Period 700.00
City Sacramento	State CA	Zip Code 95814-3810
Purpose of Disbursement Political contribution		011 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Emmer For Congress		Date of Disbursement MM / DD / YYYY 06 / 04 / 2018
Mailing Address PO Box 998		FEC Identification Number C [REDACTED] Transaction ID : B9A5222E1B! Amount of Each Disbursement this Period 1000.00
City Anoka	State MN	Zip Code 55303-0998
Purpose of Disbursement Political contribution		011 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Friends Of Mia Love		Date of Disbursement MM / DD / YYYY 06 / 20 / 2018
Mailing Address PO Box 255		FEC Identification Number C [REDACTED] Transaction ID : BA80B489F5 Amount of Each Disbursement this Period 2500.00
City Riverton	State UT	Zip Code 84065-0255
Purpose of Disbursement Political contribution		011 Category/ Type
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	4200.00
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)
The Fund for American Exceptionalism

Full Name (Last, First, Middle Initial)

A. Shelby County Republican Central Committee

Mailing Address PO Box 557

City
Shelbyville

State
IN

Zip Code
46176-0557

Purpose of Disbursement
Advertising

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4		2	2		2	0	1	8		

FEC Identification Number

C

Transaction ID : BE022F7515I

Amount of Each Disbursement this Period

240.00

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:

Category/
Type

Date of Disbursement

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

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:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

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

240.00

4440.00