

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**
ESOP PAC

ADDRESS (number and street) **1200 18th Street, N.W.**
Suite 1125
 Check if different than previously reported. (ACC) **Washington DC 20036**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00196089 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / 2018 through / / 2018

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

Signature of Treasurer *Keeling, J. Michael, , Esq.* [Electronically Filed] Date / / 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.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

ESOP 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"/>	<input type="text" value="345.12"/>	<input type="text" value="345.12"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="9832.51"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="32631.25"/>	<input type="text" value="69253.25"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="42463.76"/>	<input type="text" value="69598.37"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="32259.03"/>	<input type="text" value="59393.64"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="10204.73"/>	<input type="text" value="10204.73"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

ESOP PAC

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).....	13900.00	34900.00
(ii) Unitemized	16731.25	27353.25
(iii) TOTAL (add Lines 11(a)(i) and (ii).....▶	30631.25	62253.25
(b) Political Party Committees	0.00	5000.00
(c) Other Political Committees (such as PACs).....	500.00	500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	31131.25	67753.25
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.....	1500.00	1500.00
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))	32631.25	69253.25
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	32631.25	69253.25

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	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	31750.00	58750.00
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).....	509.03	643.64
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)) ..	32259.03	59393.64
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	32259.03	59393.64

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)	31131.25	67753.25
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	31131.25	67753.25
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 31
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)
ESOP PAC

A. Armstrong, Bruce, , Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 Harvard Road
 City San Mateo State CA Zip Code 94402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Menke & Associates Occupation (for Individual) Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt **05 / 02 / 2018**
Transaction ID : SA11AI.9575
 Amount of Each Receipt this Period 400.00
 Memo Item

B. Bachman, Chuck, , Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 255 California Street
 City San Francisco State CA Zip Code 94111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Menke & Associates, Inc. Occupation (for Individual) attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **04 / 19 / 2018**
Transaction ID : SA11AI.9582
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Bado, James, , Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12710 CR 216
 City Findlay State OH Zip Code 45840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Workplace Development Incorporated Occupation (for Individual) consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **05 / 15 / 2018**
Transaction ID : SA11AI.9560
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1400.00
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 31
	<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)
ESOP PAC

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

Mailing Address 77 West Wacker Drive
Fifth Floor

City Chicago	State IL	Zip Code 60601
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Morgan Lewis & Bokius LLP	Occupation (for Individual) attorney
--	---

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
05		08		2018

Transaction ID : SA11AI.9563

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 311 South Wacker Drive

City Chicago	State IL	Zip Code 60606
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Duff & Phelps	Occupation (for Individual) consultant
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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
06		04		2018

Transaction ID : SA11AI.9555

Amount of Each Receipt this Period
500.00

Memo Item

C. Fournier, Mark, R., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8180 Greensboro Drive
Suite 600

City McLean	State VA	Zip Code 22102
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Stout Risius Ross, Inc.	Occupation (for Individual) attorney
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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
05		02		2018

Transaction ID : SA11AI.9572

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1500.00
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 8 OF 31
	<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)
ESOP PAC

A. Gilbert, Ronald J., , Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7581 Albevanna Spring Road
 City Scottsville State VA Zip Code 24592
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ESOP Services, Inc. Occupation (for Individual) consultant
 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
 05 / 15 / 2018
Transaction ID : SA11AI.9559
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. Gilbert, Ronald J., , Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7581 Albevanna Spring Road
 City Scottsville State VA Zip Code 24592
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ESOP Services, Inc. Occupation (for Individual) 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
 06 / 04 / 2018
Transaction ID : SA11AI.9549
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. Gustafson, Davin R., , Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address S & S Business Services, Inc.
 4040 Embassy Parkway
 City Akron State OH Zip Code 44333
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) S & S Business Services, Inc. Occupation (for Individual) Director of Valuations
 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
 05 / 15 / 2018
Transaction ID : SA11AI.9561
 Amount of Each Receipt this Period
 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
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 9 OF 31
	<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)
ESOP PAC

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

Mailing Address 9405 Mercer Drive

City Dallas	State TX	Zip Code 75228
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Strategic Investment Counsel Corporati	Occupation (for Individual) Investment counselor
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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
05		04		2018

Transaction ID : SA11AI.9570

Amount of Each Receipt this Period
500.00

Memo Item

B. Josephs, Mary Sullivan, , Mrs.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1308 East Campbell Street

City Arlington	State IL	Zip Code 60004
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LaSalle National Bank	Occupation (for Individual) banker
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		02		2018

Transaction ID : SA11AI.9574

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address One United Plaza
4041 Essen

City Baton Rouge	State LA	Zip Code 70809
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Long Law Firm	Occupation (for Individual) attorney
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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
06		04		2018

Transaction ID : SA11AI.9553

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	2000.00
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 10 OF 31
<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)
ESOP PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Kornfeld, Judith, , Ms.,			Date of Receipt MM / DD / YYYY 06 / 04 / 2018
Mailing Address 2221 Delancey Place			Transaction ID : SA11AI.9550
City Philadelphia	State PA	Zip Code 19103	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) ESOP Economics		Occupation (for Individual) attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Locke, Dennis, , Mr.,			Date of Receipt MM / DD / YYYY 05 / 08 / 2018
Mailing Address 999 Third Avenue Suite 2800			Transaction ID : SA11AI.9564
City Seattle	State WA	Zip Code 98104	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Moss Adams LLP		Occupation (for Individual) principal	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Lomele, Mark, , Mr.,			Date of Receipt MM / DD / YYYY 06 / 04 / 2018
Mailing Address 160 Pacific Avenue Suite 200			Transaction ID : SA11AI.9556
City San Francisco	State CA	Zip Code 94111	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Noracl Waste Systems, Inc.		Occupation (for Individual) CFO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....	1500.00
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 11 OF 31
	<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)
ESOP PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Lu, Linshuang, , Ms.,

Mailing Address 9 A/B West Highland Avenue

City Philadelphia	State PA	Zip Code 19118
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Praxis Consulting Group, Inc.	Occupation (for Individual) 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
06		04		2018

Transaction ID : SA11AI.9557

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 6 South Street

City Morristown	State NJ	Zip Code 07960
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SES Advisors	Occupation (for Individual) consultant
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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
06		25		2018

Transaction ID : SA11AI.9547

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 10 South Riverside Plaza

City Chicago	State IL	Zip Code 60137
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Valuometrics, Inc.	Occupation (for Individual) financial advisor
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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
06		04		2018

Transaction ID : SA11AI.9548

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1500.00
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 12 OF 31
<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)
ESOP PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Miscione, John L., , Mr.,		Date of Receipt MM / DD / YYYY 06 / 04 / 2018 Transaction ID : SA11AI.9554
Mailing Address 150 East 52nd Street 16th Floor		Amount of Each Receipt this Period 500.00
City New York	State NY	Zip Code 10022
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Valuometrics	Occupation (for Individual) Managing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Moss, Alexander P., , Mr.,		Date of Receipt MM / DD / YYYY 04 / 23 / 2018 Transaction ID : SA11AI.9581
Mailing Address 8506 Germantown		Amount of Each Receipt this Period 500.00
City Philadelphia	State PA	Zip Code 19119
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Praxis Consulting	Occupation (for Individual) Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Olson, Van, , Mr.,		Date of Receipt MM / DD / YYYY 05 / 03 / 2018 Transaction ID : SA11AI.9571
Mailing Address 1811 Cornerbrook Court		Amount of Each Receipt this Period 500.00
City Indianapolis	State IN	Zip Code 46240
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Olson Mills Law Firm, LLC	Occupation (for Individual) attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....	1500.00
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 13 OF 31
	<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)
ESOP PAC

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

Mailing Address 3465 Courtyard Circle

City Farmers Branch	State TX	Zip Code 75234
------------------------	-------------	-------------------

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

Name of Employer (for Individual) The Management Team	Occupation (for Individual) consultant
--	---

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
05		04		2018

Transaction ID : SA11AI.9569

Amount of Each Receipt this Period
250.00

Memo Item

B. Piquet, Marcus, R., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5995 Brockton Avenue
2nd Floor

City Riverside	State CA	Zip Code 92506
-------------------	-------------	-------------------

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

Name of Employer (for Individual) American ESOP Advisors LLC	Occupation (for Individual) CPA
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2018

Transaction ID : SA11AI.9568

Amount of Each Receipt this Period
1000.00

Memo Item

C. Reser, Daniel, M., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 369-B Third Street
No. 543

City San Rafael	State CA	Zip Code 94901
--------------------	-------------	-------------------

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

Name of Employer (for Individual) Fiduciary Services, Inc.	Occupation (for Individual) Independent Fiduciary
---	--

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
04		27		2018

Transaction ID : SA11AI.9576

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1750.00
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 14 OF 31
	<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)
ESOP PAC

A. Roback, Thomas, , Mr., Jr.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 North Beaumont Avenue

City Baltimore	State MD	Zip Code 21228-4403
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Blue Ridge ESOP Associates	Occupation (for Individual) 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
05		02		2018

Transaction ID : SA11AI.9573

Amount of Each Receipt this Period
500.00

Memo Item

B. Torres, Joe, L., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5000 East University Suite 3

City Odessa	State TX	Zip Code 79762
----------------	-------------	-------------------

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

Name of Employer (for Individual) Joe L. Torres, P.C.	Occupation (for Individual) CPA
--	------------------------------------

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
05		08		2018

Transaction ID : SA11AI.9566

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 8506 Germantown Avenue

City Philadelphia	State PA	Zip Code 19119
----------------------	-------------	-------------------

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

Name of Employer (for Individual) Praxis Consulting Group, Inc.	Occupation (for Individual) 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
05		10		2018

Transaction ID : SA11AI.9562

Amount of Each Receipt this Period
500.00

Memo Item

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

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

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

FOR LINE NUMBER: PAGE 15 OF 31
(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)
ESOP PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Ward, Andrew, S., Mr.,

Mailing Address 1 South Wacker Drive
Lbby 38

City Chicago State IL Zip Code 60606-4615

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

Name of Employer (for Individual) Stout Risius Ross, Inc. Occupation (for Individual) financial advisor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 17 / 2018

Transaction ID : SA11AI.9558

Amount of Each Receipt this Period
250.00

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).....▶	250.00
TOTAL This Period (last page this line number only).....▶	13900.00

**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 16 OF 31
<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)
ESOP PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
GRAY, PLANT, MOOTY, MOOTY & BENNETT PUBLIC AFFAIRS COMMITTEE

Mailing Address 3400 CITY CENTER

City MINNEAPOLIS	State MN	Zip Code 55402
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00099473

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		08		2018

Transaction ID : SA11C.9641

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
-----	---	-----	---	---------

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

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

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 17 OF 31
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
ESOP PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BEN CARDIN FOR SENATE

Mailing Address P.O. BOX 21093

City CATONSVILLE State MD Zip Code 21228

FEC ID number of contributing federal political committee. **C** C00411587

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

Receipt For: 2018
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 08 / 2018

Transaction ID : SA16.9638

Amount of Each Receipt this Period
1500.00

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).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	1500.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA16

Transaction ID : SA16.9638

Refund of Contribution

Form/Schedule:

Transaction ID:

**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)
ESOP PAC

Full Name (Last, First, Middle Initial) A. ADRIAN SMITH FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 04 / 2018
Mailing Address 3321 AVENUE I SUITE 6		FEC Identification Number C 000412890 Transaction ID : SB23.9616 Amount of Each Disbursement this Period 500.00
City SCOTTSBLUFF	State NE	Zip Code 69361
Purpose of Disbursement	Category/Type	
Candidate Name SMITH, ADRIAN, , ,	Office Sought: <input checked="" 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: NE	District: 03	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. BEN CARDIN FOR SENATE		Date of Disbursement MM / DD / YYYY 05 / 08 / 2018
Mailing Address P.O. BOX 21093		FEC Identification Number C 000411587 Transaction ID : SB23.9606 Amount of Each Disbursement this Period 2500.00
City CATONSVILLE	State MD	Zip Code 21228
Purpose of Disbursement	Category/Type	
Candidate Name CARDIN, BENJAMIN L, , ,	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) ▼
State: MD	District: 03	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. BIG SKY OPPORTUNITY PAC		Date of Disbursement MM / DD / YYYY 04 / 23 / 2018
Mailing Address PO BOX 1618		FEC Identification Number C 000542027 Transaction ID : SB23.9644 Amount of Each Disbursement this Period 500.00
City HELENA	State MT	Zip Code 59624
Purpose of Disbursement	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:	<input type="checkbox"/> Memo Item

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

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

3500.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : SB23.9606

\$1,500 excessive contribution to be refunded

Form/Schedule:

Transaction ID:

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)

ESOP PAC

Full Name (Last, First, Middle Initial)

A. BOB CASEY FOR SENATE INC

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	4		2	0	1	8

Mailing Address PO BOX 58746

FEC Identification Number

C	C00431056
---	-----------

Transaction ID : SB23.9608

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Memo Item

City PHILADELPHIA State PA Zip Code 19102

Purpose of Disbursement

Category/Type

Candidate Name
CASEY, ROBERT P JR, , ,

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

State: PA District: 00

Full Name (Last, First, Middle Initial)

B. CMR POLITICAL ACTION COMMITTEE

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	4		2	0	1	8

Mailing Address PO BOX 2485

FEC Identification Number

C	C00469429
---	-----------

Transaction ID : SB23.9614

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Memo Item

City SPRINGFIELD State VA Zip Code 22152

Purpose of Disbursement

Category/Type

Candidate Name

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

State: District:

Full Name (Last, First, Middle Initial)

C. DAVIS FOR CONGRESS/FRIENDS OF DAVIS

Date of Disbursement

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

Mailing Address 5956 W. RACE AVENUE

FEC Identification Number

C	C00172619
---	-----------

Transaction ID : SB23.9607

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
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Memo Item

City CHICAGO State IL Zip Code 60644

Purpose of Disbursement

Category/Type

Candidate Name
DAVIS, RODNEY L, , ,

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

State: IL District: 13

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

2	5	0	0	0	0	0	0	0	0
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TOTAL This Period (last page this line number only)..... ▶

2	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

**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)
ESOP PAC

A. FRIENDS OF ERIK PAULSEN

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address P.O. BOX 44369
250 PRAIRIE CENTER DRIVE

M M M	/	D D D	/	Y Y Y Y Y
04		06		2018

City EDEN PRAIRIE State MN Zip Code 55344

FEC Identification Number

Purpose of Disbursement

C C00439661

Candidate Name
PAULSEN, ERIK MR., , ,

Category/
Type

Transaction ID : SB23.9585

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: MN District: 03

1000.00

Memo Item

B. FRIENDS OF ERIK PAULSEN

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address P.O. BOX 44369
250 PRAIRIE CENTER DRIVE

M M M	/	D D D	/	Y Y Y Y Y
05		07		2018

City EDEN PRAIRIE State MN Zip Code 55344

FEC Identification Number

Purpose of Disbursement

C C00439661

Candidate Name
PAULSEN, ERIK MR., , ,

Category/
Type

Transaction ID : SB23.9603

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: MN District: 03

1000.00

Memo Item

C. FRIENDS OF ERIK PAULSEN

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address P.O. BOX 44369
250 PRAIRIE CENTER DRIVE

M M M	/	D D D	/	Y Y Y Y Y
05		14		2018

City EDEN PRAIRIE State MN Zip Code 55344

FEC Identification Number

Purpose of Disbursement
NOTE: Contribution to be REFUNDED

C C00439661

Candidate Name
PAULSEN, ERIK MR., , ,

Category/
Type

Transaction ID : SB23.9610

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: MN District: 03

1000.00

Memo Item

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

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

3000.00

**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 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)
ESOP PAC

Full Name (Last, First, Middle Initial) A. FRIENDS OF ERIK PAULSEN		Date of Disbursement MM / DD / YYYY 06 / 04 / 2018
Mailing Address P.O. BOX 44369 250 PRAIRIE CENTER DRIVE		FEC Identification Number C C00439661 Transaction ID : SB23.9615 Amount of Each Disbursement this Period 1500.00
City EDEN PRAIRIE	State MN	Zip Code 55344
Purpose of Disbursement NOTE: Contribution to be REFUNDED		Category/ Type
Candidate Name PAULSEN, ERIK MR., , ,		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" 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: MN	District: 03	

Full Name (Last, First, Middle Initial) B. FRIENDS OF ERIK PAULSEN		Date of Disbursement MM / DD / YYYY 06 / 18 / 2018
Mailing Address P.O. BOX 44369 250 PRAIRIE CENTER DRIVE		FEC Identification Number C C00439661 Transaction ID : SB23.9630 Amount of Each Disbursement this Period 1000.00
City EDEN PRAIRIE	State MN	Zip Code 55344
Purpose of Disbursement		Category/ Type
Candidate Name PAULSEN, ERIK MR., , ,		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" 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: MN	District: 03	

Full Name (Last, First, Middle Initial) C. HEARTLAND VALUES PAC		Date of Disbursement MM / DD / YYYY 05 / 07 / 2018
Mailing Address PO BOX 505		FEC Identification Number C C00409003 Transaction ID : SB23.9602 Amount of Each Disbursement this Period 1000.00
City SIOUX FALLS	State SD	Zip Code 57101
Purpose of Disbursement		Category/ Type
Candidate Name THUNE, JOHN, , ,		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: SD	District: 00	

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

3500.00

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 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)
ESOP PAC

A. KIND FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address 3061 EDGEWATER LN

City LA CROSSE State WI Zip Code 54603

Purpose of Disbursement

Candidate Name
KIND, RONALD JAMES, , ,

Office Sought: House Senate President
State: WI District: 03

Disbursement For: 2018
 Primary General
 Other (specify) ▼

Category/Type

Date of Disbursement: 06 / 18 / 2018

FEC Identification Number: **C00312017**
Transaction ID : SB23.9632
Amount of Each Disbursement this Period: 1000.00

Memo Item

B. KING FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 398
202 W 2ND ST

City WALL LAKE State IA Zip Code 51466

Purpose of Disbursement

Candidate Name
KING, STEVE MR., , ,

Office Sought: House Senate President
State: IA District: 04

Disbursement For: 2018
 Primary General
 Other (specify) ▼

Category/Type

Date of Disbursement: 04 / 17 / 2018

FEC Identification Number: **C00373563**
Transaction ID : SB23.9594
Amount of Each Disbursement this Period: 500.00

Memo Item

C. LEGPAC

Full Name (Last, First, Middle Initial)
Mailing Address 38 Ivy St. SE

City Washington State DC Zip Code 20003

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2018
 Primary General
 Other (specify) ▼

Category/Type

Date of Disbursement: 06 / 11 / 2018

FEC Identification Number: **C00385534**
Transaction ID : SB23.9618
Amount of Each Disbursement this Period: 1000.00

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 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)
ESOP PAC

A. LOEBSACK FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 3013

City IOWA CITY State IA Zip Code 52244

Purpose of Disbursement

Candidate Name
LOEBSACK, DAVID WAYNE, , ,

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

State: IA District: 02

Date of Disbursement: 06 / 18 / 2018

FEC Identification Number: **C00414318**
Transaction ID : SB23.9631
Amount of Each Disbursement this Period: 500.00

Memo Item

B. MADISON PAC; THE

Full Name (Last, First, Middle Initial)
Mailing Address 235 STATE STREET #206

City SPRINGFIELD State MA Zip Code 01103

Purpose of Disbursement

Candidate Name

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

State: District:

Date of Disbursement: 06 / 18 / 2018

FEC Identification Number: **C00426809**
Transaction ID : SB23.9628
Amount of Each Disbursement this Period: 1000.00

Memo Item

C. MARTHA ROBY FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 195

City MONTGOMERY State AL Zip Code 36101

Purpose of Disbursement

Candidate Name
ROBY, MARTHA, , ,

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

State: AL District: 02 Runoff

Date of Disbursement: 06 / 11 / 2018

FEC Identification Number: **C00462143**
Transaction ID : SB23.9624
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)

<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)
ESOP PAC

A. MIKE THOMPSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address 5429 MADISON AVENUE

City SACRAMENTO State CA Zip Code 95841

Purpose of Disbursement

Candidate Name
THOMPSON, MIKE MR., , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: CA District: 05

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 14 / 2018

FEC Identification Number

C C00326363

Transaction ID : SB23.9609

Amount of Each Disbursement this Period

1500.00

Memo Item

B. PAT ROBERTS FOR US SENATE INC

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 433

City GREAT BEND State KS Zip Code 67530

Purpose of Disbursement

Candidate Name
ROBERTS, PAT, , ,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: KS District: 00

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 18 / 2018

FEC Identification Number

C C00128876

Transaction ID : SB23.9626

Amount of Each Disbursement this Period

1000.00

Memo Item

C. PROMOTING OUR REPUBLICAN TEAM PAC

Full Name (Last, First, Middle Initial)

Mailing Address 8331 LITTLE HARBOR DRIVE

City CINCINNATI State OH Zip Code 45244

Purpose of Disbursement

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 18 / 2018

FEC Identification Number

C C00440032

Transaction ID : SB23.9625

Amount of Each Disbursement this Period

1500.00

Memo Item

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

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

4000.00

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

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<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)
ESOP PAC

Full Name (Last, First, Middle Initial) A. RODNEY DAVIS VICTORY FUND		Date of Disbursement MM / DD / YYYY 04 / 18 / 2018
Mailing Address 499 SOUTH CAPITOL STREET SW #407		FEC Identification Number C 000581116 Transaction ID : SB23.9597 Amount of Each Disbursement this Period 500.00
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. ROSKAM FOR CONGRESS COMMITTEE		Date of Disbursement MM / DD / YYYY 04 / 17 / 2018
Mailing Address P. O. Box 713		FEC Identification Number C 000410969 Transaction ID : SB23.9587 Amount of Each Disbursement this Period 1000.00
City Wheaton	State IL	Zip Code 60187
Purpose of Disbursement	Candidate Name ROSKAM, PETER, , ,	Category/Type
Office Sought: <input checked="" 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)	<input type="checkbox"/> Memo Item
State: IL District: 06		

Full Name (Last, First, Middle Initial) C. ROSKAM FOR CONGRESS COMMITTEE		Date of Disbursement MM / DD / YYYY 06 / 18 / 2018
Mailing Address P. O. Box 713		FEC Identification Number C 000410969 Transaction ID : SB23.9627 Amount of Each Disbursement this Period 1000.00
City Wheaton	State IL	Zip Code 60187
Purpose of Disbursement	Candidate Name ROSKAM, PETER, , ,	Category/Type
Office Sought: <input checked="" 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) ▼	<input type="checkbox"/> Memo Item
State: IL District: 06		

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

2500.00

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

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

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FOR LINE NUMBER:
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<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)
ESOP PAC

A. SHERMAN FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address 555 SOUTH FLOWER STREET SUITE 4510

City LOS ANGELES State CA Zip Code 90071

Purpose of Disbursement

Candidate Name
SHERMAN, BRAD, , ,

Office Sought: House Senate President
State: CA District: 30

Disbursement For: 2018
 Primary General Other (specify) ▼

Date of Disbursement: 05 / 17 / 2018

FEC Identification Number: **C00308742**
Transaction ID : **SB23.9613**
Amount of Each Disbursement this Period: 500.00

Memo Item

B. SINEMA FOR ARIZONA

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 7586

City PHOENIX State AZ Zip Code 85011

Purpose of Disbursement

Candidate Name
SINEMA, KYRSTEN, , ,

Office Sought: House Senate President
State: AZ District: 09

Disbursement For: 2018
 Primary General Other (specify)

Date of Disbursement: 05 / 07 / 2018

FEC Identification Number: **C00508804**
Transaction ID : **SB23.9604**
Amount of Each Disbursement this Period: 500.00

Memo Item

C. TAMMY BALDWIN FOR SENATE

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 696

City MADISON State WI Zip Code 53701

Purpose of Disbursement

Candidate Name
BALDWIN, TAMMY, , ,

Office Sought: House Senate President
State: WI District: 00

Disbursement For: 2018
 Primary General Other (specify) ▼

Date of Disbursement: 04 / 20 / 2018

FEC Identification Number: **C00326801**
Transaction ID : **SB23.9599**
Amount of Each Disbursement this Period: 1000.00

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**

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FOR LINE NUMBER:
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<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)
ESOP PAC

Full Name (Last, First, Middle Initial) A. TEAM RYAN		Date of Disbursement MM / DD / YYYY 04 / 17 / 2018
Mailing Address 320 1ST ST SE		FEC Identification Number C 000545947 Transaction ID : SB23.9586 Amount of Each Disbursement this Period 2500.00
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement Contribution exercising no direction or control		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 type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State:	District:	

Full Name (Last, First, Middle Initial) B. THOM TILLIS COMMITTEE		Date of Disbursement MM / DD / YYYY 06 / 11 / 2018
Mailing Address PO BOX 97396		FEC Identification Number C 000545772 Transaction ID : SB23.9621 Amount of Each Disbursement this Period 1000.00
City RALEIGH	State NC	Zip Code 27624
Purpose of Disbursement		Category/Type
Candidate Name TILLIS, THOM R, , ,		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item
State: NC	District: 00	

Full Name (Last, First, Middle Initial) C. TOM GARRETT FOR CONGRESS		Date of Disbursement MM / DD / YYYY 05 / 15 / 2018
Mailing Address P.O. BOX 209		FEC Identification Number C 000607101 Transaction ID : SB23.9611 Amount of Each Disbursement this Period 250.00
City RUCKERSVILLE	State VA	Zip Code 22968
Purpose of Disbursement		Category/Type
Candidate Name TOM GARRETT FOR CONGRESS		
Office Sought: <input checked="" 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) ▼	<input type="checkbox"/> Memo Item
State: VA	District: 05	

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

3750.00

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

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

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<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)
ESOP PAC

Full Name (Last, First, Middle Initial) A. TOMORROW IS MEANINGFUL PAC		Date of Disbursement MM / DD / YYYY 04 / 17 / 2018
Mailing Address 1409 ASHLEY RIVER RD		FEC Identification Number C00495887 Transaction ID : SB23.9592 Amount of Each Disbursement this Period 500.00
City CHARLESTON	State SC	Zip Code 29407
Purpose of Disbursement	Candidate Name	Category/Type
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) ▼	<input type="checkbox"/> Memo Item
State:	District:	

Full Name (Last, First, Middle Initial) B. VIRGINIA FOXX FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 11 / 2018
Mailing Address PO BOX 2676		FEC Identification Number C00386748 Transaction ID : SB23.9620 Amount of Each Disbursement this Period 1000.00
City BOONE	State NC	Zip Code 28607
Purpose of Disbursement	Candidate Name FOXX, VIRGINIA ANN, , ,	Category/Type
Office Sought: <input checked="" 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)	<input type="checkbox"/> Memo Item
State: NC	District: 05	

Full Name (Last, First, Middle Initial) C. WYDEN FOR OREGON		Date of Disbursement MM / DD / YYYY 04 / 20 / 2018
Mailing Address 2911 NE HANCOCK STREET		FEC Identification Number C00436998 Transaction ID : SB23.9598 Amount of Each Disbursement this Period 1000.00
City PORTLAND	State OR	Zip Code 97212
Purpose of Disbursement	Candidate Name WYDEN, RONALD LEE, , ,	Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: OR	District: 00	

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

2500.00

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

31750.00

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)
ESOP PAC

Full Name (Last, First, Middle Initial)

A. Bank Charges

Mailing Address P.O. Box 96758
1800 M Street, N.W.

City Washington State DC Zip Code 20090

Purpose of Disbursement
Disbursement covers bank service fees

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	Y	Y
0	6		3	0		2	0	1	8		

FEC Identification Number

C

Transaction ID : SB29.9545
Amount of Each Disbursement this Period

509.03

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify)

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

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)..... ▶

509.03

509.03