

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
RELY ON YOUR BELIEFS FUND

ADDRESS (number and street) ONE CONSTITUTION AVE NE STE 300
Check if different than previously reported. (ACC) WASHINGTON DC 20002

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE
C C00344648
3. IS THIS REPORT NEW OR AMENDED (A)
[x] (N)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report
(b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31
(c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special
(d) 30-Day POST-Election Report for the: General, Runoff, Special
Election on [MM/DD/YYYY] in the State of []

5. Covering Period 03/01/2022 through 03/31/2022

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

Signature of Treasurer KILGORE, PAUL, , , [Electronically Filed] Date 04/19/2022

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

RELY ON YOUR BELIEFS FUND

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="2022"/>		315824.08
(b) Cash on Hand at Beginning of Reporting Period.....	322075.19	
(c) Total Receipts (from Line 19)	62075.00	84575.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	384150.19	400399.08
7. Total Disbursements (from Line 31).....	68374.89	84623.78
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	315775.30	315775.30
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

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

RELY ON YOUR BELIEFS FUND

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
03 / 01 / 2022 To: M M / D D / Y Y Y Y Y Y
03 / 31 / 2022

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).....	14500.00	32000.00
(ii) Unitemized	75.00	75.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	14575.00	32075.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	47500.00	52500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	62075.00	84575.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	62075.00	84575.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	62075.00	84575.00

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	42374.89	58623.78
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	42374.89	58623.78
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	26000.00	26000.00
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).....	0.00	0.00
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)) ..	68374.89	84623.78
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	68374.89	84623.78

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)	62075.00	84575.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	62075.00	84575.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	42374.89	58623.78
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	42374.89	58623.78

**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 22
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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)
RELY ON YOUR BELIEFS FUND

A. CLARKE, CARLISLE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 118 10TH ST SE
 City WASHINGTON State DC Zip Code 20003-3909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VAN SCOYOC ASSOCIATES Occupation (for Individual) LOBBYIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 03 / 17 / 2022
Transaction ID : A928EBE5EC03A4746AE4
 Amount of Each Receipt this Period 1500.00
 Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

B. WINRED
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9891
 City ARLINGTON State VA Zip Code 22219-1891
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: 2022 Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 22000.00

Date of Receipt 03 / 17 / 2022
Transaction ID : A88B8639ABED84312B1D
 Amount of Each Receipt this Period 1500.00
 Memo Item
CONDUIT MEMO TOTAL
EARMARK NON-DIRECTED

C. DIFFELL, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7283 HIGHLAND ESTATES PL
 City FALLS CHURCH State VA Zip Code 22043-3008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WASHINGTON TAX & PUBLIC POLICY GROUP Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 03 / 22 / 2022
Transaction ID : A40A797661A804526AEB
 Amount of Each Receipt this Period 2500.00
 Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

SUBTOTAL of Receipts This Page (optional).....	4000.00
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 22
	<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	

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)
RELY ON YOUR BELIEFS FUND

A. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219-1891
-------------------	-------------	------------------------

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

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

Receipt For: 2022
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
22000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		22		2022

Transaction ID : AAACAF9C509494F1AA2D

Amount of Each Receipt this Period
2500.00

Memo Item
CONDUIT MEMO TOTAL
EARMARK NON-DIRECTED

B. GILBERT, LESLEE, K., MRS.,

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

Mailing Address 11C PULITZER TRL

City SANTA FE	State NM	Zip Code 87506-6913
------------------	-------------	------------------------

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

Name of Employer (for Individual) VAN SCOYOC ASSOCIATES	Occupation (for Individual) VICE PRESIDENT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2022

Transaction ID : AED35A2E877C94380BD3

Amount of Each Receipt this Period
2500.00

Memo Item

C. GLENN, HARRY, J., MR.,

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

Mailing Address 1540 GULF BLVD #404

City CLEARWATER BEACH	State FL	Zip Code 33767-2960
--------------------------	-------------	------------------------

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

Name of Employer (for Individual) VAN SCOYOC	Occupation (for Individual) VICE PRESIDENT
---	---

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
03		31		2022

Transaction ID : AC2A37C38B6B04F99909

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	3000.00
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 8 OF 22
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
RELY ON YOUR BELIEFS FUND

A. LATOURETTE, JENNIFER, L., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1910 CORLISS CT
 City MC LEAN State VA Zip Code 22101-5504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VAN SCOYOC ASSOCIATES Occupation (for Individual) PRESIDENT & COO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 31 / 2022
Transaction ID : AD61B219C7E6A419F8DF
 Amount of Each Receipt this Period 500.00
 Memo Item

B. SABIN, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 PANTIGO PL
 City EAST HAMPTON State NY Zip Code 11937-2684
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SABIN METAL Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 31 / 2022
Transaction ID : A7102694E7B474BF2A59
 Amount of Each Receipt this Period 5000.00
 Memo Item

C. SCHULKEN, CHAD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3902 LARCHWOOD RD
 City FALLS CHURCH State VA Zip Code 22041-1108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VAN SCOYOC ASSOCIATES Occupation (for Individual) LOBBYIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 17 / 2022
Transaction ID : A7BFF3C9FBEB648B4BA5
 Amount of Each Receipt this Period 500.00
 Memo Item
EARMARKED (NON-DIRECTED) THROUGH WINRED

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:	PAGE 9 OF 22
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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)
RELY ON YOUR BELIEFS FUND

A. WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219-1891
-------------------	-------------	------------------------

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

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

Receipt For: 2022
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
22000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	17	/	2022

Transaction ID : A22B8EC74577E4A07B14

Amount of Each Receipt this Period
500.00

Memo Item
CONDUIT MEMO TOTAL
EARMARK NON-DIRECTED

B. VAN SCOYOC, H. STEWART, , MR.,

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

Mailing Address 131 YARNICK RD

City GREAT FALLS	State VA	Zip Code 22066-3525
---------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2022

Transaction ID : A63EA7FA842ED4FE4AC2

Amount of Each Receipt this Period
1500.00

Memo Item

C.

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	14500.00

**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 10 OF 22
<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

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)
RELY ON YOUR BELIEFS FUND

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BUILD POLITICAL ACTION COMMITTEE OF THE NATIONAL ASSOCIATION OF HOME BUILDERS (BUILDPAAC)

Mailing Address 1201 15TH STREET, NW

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00000901

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2022

Transaction ID : ABA1970BF4629461DB68

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
COMCAST CORPORATION & NBCUNIVERSAL POLITICAL ACTION COMMITTEE - FEDERAL

Mailing Address 1701 JFK BLVD, 49TH FLOOR

City PHILADELPHIA	State PA	Zip Code 19103
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00248716

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	14	/	2022

Transaction ID : AA2E61D2C3B7044FCAF7

Amount of Each Receipt this Period
5000.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC

Mailing Address 2980 FAIRVIEW PARK DR

City FALLS CHURCH	State VA	Zip Code 22042-4511
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00088591

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2022

Transaction ID : AFA83D8CCA878484AA34

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	15000.00
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 22
<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

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)
RELY ON YOUR BELIEFS FUND

A. FRIENDS OF MEDICAL RESEARCH POLITICAL ACTION COMMITTEE

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

Mailing Address 300 NEW JERSEY AVE, NW
STE 900

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00566042

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
03 / 14 / 2022
Transaction ID : AF758C83EB3514A62B44

Amount of Each Receipt this Period
5000.00

Memo Item

B. LOCKTON INC POLITICAL ACTION COMMITTEE

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

Mailing Address 444 W 47TH ST
STE 900

City KANSAS CITY State MO Zip Code 64112-1906

FEC ID number of contributing federal political committee. **C** C00652529

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
03 / 31 / 2022
Transaction ID : AC84FADD39C604A9BA2E

Amount of Each Receipt this Period
5000.00

Memo Item

C. NATIONAL MULTIFAMILY HOUSING COUNCIL POLITICAL ACTION COMMITTEE

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

Mailing Address 1850 M STREET, NW
SUITE 540

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00130773

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
03 / 14 / 2022
Transaction ID : AFED53CE85AF64EE5AA3

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	15000.00
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 22
<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

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)
RELY ON YOUR BELIEFS FUND

A. NORFOLK SOUTHERN CORPORATION GOOD GOVERNMENT FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address ONE CONSTITUTION AVE NE

City WASHINGTON	State DC	Zip Code 20002
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00009282

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		14		2022

Transaction ID : AD35276727843427396C

Amount of Each Receipt this Period
5000.00

Memo Item

B. SOUTHWEST AIRLINES CO. FREEDOM FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P O BOX 36611, HDQ 4GA

City DALLAS	State TX	Zip Code 75235
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00341602

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		14		2022

Transaction ID : A14F5B435FEF746AA98D

Amount of Each Receipt this Period
5000.00

Memo Item

C. TRACTOR SUPPLY COMPANY PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5401 VIRGINIA WAY

City BRENTWOOD	State TN	Zip Code 37027-7536
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00763664

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2022

Transaction ID : AB349983D66AE4856A15

Amount of Each Receipt this Period
2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	12500.00
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 22
<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

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)
RELY ON YOUR BELIEFS FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. U.S. TRAVEL ASSOCIATION PAC			Date of Receipt
Mailing Address 1100 NEW YORK AVENUE SUITE 450W			<input type="text" value="03"/> / <input type="text" value="14"/> / <input type="text" value="2022"/>
City WASHINGTON	State DC	Zip Code 20005	Transaction ID : A4BA56710AD124B549AE
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00457754"/>			Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Name of Employer (for Individual)		Occupation (for Individual)	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B.			Date of Receipt
Mailing Address			<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text"/>			<input type="text"/>
Name of Employer (for Individual)		Occupation (for Individual)	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C.			Date of Receipt
Mailing Address			<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text"/>			<input type="text"/>
Name of Employer (for Individual)		Occupation (for Individual)	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="5000.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value="47500.00"/>

**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

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)
RELY ON YOUR BELIEFS FUND

A. JOE'S SEAFOOD, PRIME STEAK & STONE CRAB

Full Name (Last, First, Middle Initial)

Mailing Address 750 15TH ST NW

City WASHINGTON State DC Zip Code 20005-1018

Purpose of Disbursement PAC EVENT CATERING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 15 / 2022

FEC Identification Number: C

Transaction ID : B5135FA6497

Amount of Each Disbursement this Period: 4057.00

Memo Item

B. 4IMPRINT

Full Name (Last, First, Middle Initial)

Mailing Address 101 COMMERCE ST

City OSHKOSH State WI Zip Code 54901-4864

Purpose of Disbursement PAC PRINTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 15 / 2022

FEC Identification Number: C

Transaction ID : B2536792E65

Amount of Each Disbursement this Period: 1127.45

Memo Item

C. PROFESSIONAL DATA SERVICES, INC.

Full Name (Last, First, Middle Initial)

Mailing Address 824 S MILLEDGE AVE STE 101

City ATHENS State GA Zip Code 30605-1332

Purpose of Disbursement PAC COMPLIANCE SERVICES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 30 / 2022

FEC Identification Number: C

Transaction ID : B62B7EA99E

Amount of Each Disbursement this Period: 1527.65

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	1527.65
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

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)
RELY ON YOUR BELIEFS FUND

A. RESTAURANT ASSOCIATES

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 91337

City CHICAGO State IL Zip Code 60693-1337

Purpose of Disbursement PAC MEETING EXPENSE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 08 / 2022

FEC Identification Number: C

Transaction ID : B9C6D58FC5

Amount of Each Disbursement this Period: 180.60

Memo Item

B. THOMPSON COMMUNICATIONS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 5

City MARSHFIELD State MO Zip Code 65706-0005

Purpose of Disbursement FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 08 / 2022

FEC Identification Number: C

Transaction ID : B75B31B2A5

Amount of Each Disbursement this Period: 7500.00

Memo Item

C. THOMPSON COMMUNICATIONS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 5

City MARSHFIELD State MO Zip Code 65706-0005

Purpose of Disbursement FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 31 / 2022

FEC Identification Number: C

Transaction ID : BB023A9A4C

Amount of Each Disbursement this Period: 7500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 15180.60

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

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)
RELY ON YOUR BELIEFS FUND

Full Name (Last, First, Middle Initial)

A. VISA

Mailing Address PO BOX 4512

City
CAROL STREAM

State
IL

Zip Code
60197-4512

Purpose of Disbursement
SEE MEMO

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	8			2	0	2	2		

FEC Identification Number

C [REDACTED]

Transaction ID : B9581614E11

Amount of Each Disbursement this Period

[REDACTED] 3535.24

Memo Item

Full Name (Last, First, Middle Initial)

B. DESTINATION MCO

Mailing Address 10311 ORANGEWOOD BLVD STE B

City
ORLANDO

State
FL

Zip Code
32821-8219

Purpose of Disbursement
PAC TRAVEL EXPENSES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	8			2	0	2	2		

FEC Identification Number

C [REDACTED]

Transaction ID : B03E031C452

Amount of Each Disbursement this Period

[REDACTED] 964.60

Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN AIRLINES

Mailing Address PO BOX 619616

City
DALLAS

State
TX

Zip Code
75261-9616

Purpose of Disbursement
PAC AIRFARE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	8			2	0	2	2		

FEC Identification Number

C [REDACTED]

Transaction ID : BEE9AD1BE

Amount of Each Disbursement this Period

[REDACTED] 1508.80

Memo Item

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

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

[REDACTED] 3535.24

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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)
RELY ON YOUR BELIEFS FUND

Full Name (Last, First, Middle Initial) A. JETBLUE		Date of Disbursement MM / DD / YYYY 03 / 08 / 2022
Mailing Address 2701 QUEENS PLZ N		FEC Identification Number C [REDACTED] Transaction ID : B6711E6587C Amount of Each Disbursement this Period [REDACTED] 810.24
City LONG ISLAND CITY	State NY	Zip Code 11101-4020
Purpose of Disbursement PAC AIRFARE	Category/Type 001	
Candidate Name	Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. VISA		Date of Disbursement MM / DD / YYYY 03 / 24 / 2022
Mailing Address PO BOX 4512		FEC Identification Number C [REDACTED] Transaction ID : BE4A0797424 Amount of Each Disbursement this Period [REDACTED] 947.60
City CAROL STREAM	State IL	Zip Code 60197-4512
Purpose of Disbursement SEE MEMO	Category/Type 001	
Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. CARROLL TRAVEL		Date of Disbursement MM / DD / YYYY 03 / 24 / 2022
Mailing Address 201 MASSACHUSETTS AVE NE		FEC Identification Number C [REDACTED] Transaction ID : B7D438F341: Amount of Each Disbursement this Period [REDACTED] 40.00
City WASHINGTON	State DC	Zip Code 20002-4957
Purpose of Disbursement PAC TRAVEL EXPENSE	Category/Type 001	
Candidate Name	Memo Item <input checked="" type="checkbox"/>	
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:		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 947.60
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

<input 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

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)
RELY ON YOUR BELIEFS FUND

Full Name (Last, First, Middle Initial)

A. VISA

Mailing Address PO BOX 4512

City
CAROL STREAM

State
IL

Zip Code
60197-4512

Purpose of Disbursement
PAC CC SERVICE FEES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	4		2	0	2	2

FEC Identification Number

C [REDACTED]

Transaction ID : B3E9B2551D

Amount of Each Disbursement this Period

2	9	9	0	0
---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN AIRLINES

Mailing Address PO BOX 619616

City
DALLAS

State
TX

Zip Code
75261-9616

Purpose of Disbursement
PAC TRAVEL EXPENSE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	4		2	0	2	2

FEC Identification Number

C [REDACTED]

Transaction ID : BE7AF10251E

Amount of Each Disbursement this Period

7	9	8	6	0
---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

C. JETBLUE

Mailing Address 2701 QUEENS PLZ N

City
LONG ISLAND CITY

State
NY

Zip Code
11101-4020

Purpose of Disbursement
PAC TRAVEL EXPENSE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	4		2	0	2	2

FEC Identification Number

C [REDACTED]

Transaction ID : BAC435822C

Amount of Each Disbursement this Period

8	0	0	0	0
---	---	---	---	---

Memo Item

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

0	0	0	0	0
---	---	---	---	---

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

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 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

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)
RELY ON YOUR BELIEFS FUND

Full Name (Last, First, Middle Initial)

A. VISA

Mailing Address PO BOX 4512

City
CAROL STREAM

State
IL

Zip Code
60197-4512

Purpose of Disbursement
SEE MEMO

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	0		2	0	2	2

FEC Identification Number

C [REDACTED]

Transaction ID : B66D7F882F!

Amount of Each Disbursement this Period

2	4	8	.	0	7
---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

B. LOEWS HOTELS

Mailing Address 5601 UNIVERSAL BLVD

City
ORLANDO

State
FL

Zip Code
32819-7880

Purpose of Disbursement
PAC TRAVEL EXPENSE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	0		2	0	2	2

FEC Identification Number

C [REDACTED]

Transaction ID : BEFED47F95!

Amount of Each Disbursement this Period

2	4	8	.	0	7
---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES LLC

Mailing Address 1776 WILSON BOULEVARD, SUITE 530

City
ARLINGTON

State
VA

Zip Code
22209-2517

Purpose of Disbursement
PAC CC TRANSACTION FEE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	2		2	0	2	2

FEC Identification Number

C [REDACTED]

Transaction ID : BDCB4AA54

Amount of Each Disbursement this Period

9	8	.	5	0
---	---	---	---	---

Memo Item

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

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

3	4	6	.	5	7
---	---	---	---	---	---

4	2	1	8	4	.	0	8
---	---	---	---	---	---	---	---

**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

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)
RELY ON YOUR BELIEFS FUND

Full Name (Last, First, Middle Initial) A. BLAINE FOR CONGRESS		Date of Disbursement MM / DD / YYYY 03 / 15 / 2022
Mailing Address PO BOX 1025		FEC Identification Number C 000458679 Transaction ID : BA60FDB3Df
City JEFFERSON CITY	State MO	Zip Code 65102
Purpose of Disbursement CONTRIBUTION		011 Category/ Type
Candidate Name LUETKEMEYER, W, BLAINE, ,		Amount of Each Disbursement this Period 5000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: MO	District: 09	

Full Name (Last, First, Middle Initial) B. JASON SMITH FOR CONGRESS		Date of Disbursement MM / DD / YYYY 03 / 30 / 2022
Mailing Address PO BOX 1324		FEC Identification Number C 000541862 Transaction ID : BA7BD9EEAa
City CAPE GIRARDEAU	State MO	Zip Code 63702
Purpose of Disbursement CONTRIBUTION		011 Category/ Type
Candidate Name SMITH, JASON, , ,		Amount of Each Disbursement this Period 5000.00
Office Sought: <input checked="" type="checkbox"/> House <input 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: MO	District: 08	

Full Name (Last, First, Middle Initial) C. NRSC		Date of Disbursement MM / DD / YYYY 03 / 30 / 2022
Mailing Address 425 2ND STREET NE		FEC Identification Number C 00027466 Transaction ID : BB31DE87Aa
City WASHINGTON	State DC	Zip Code 20002-4914
Purpose of Disbursement CONTRIBUTION		011 Category/ Type
Candidate Name NRSC		Amount of Each Disbursement this Period 15000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ ANNUAL	<input type="checkbox"/> Memo Item
State:	District:	

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

25000.00

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

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)
RELY ON YOUR BELIEFS FUND

A. REAGAN DUNN FOR CONGRESS

Full Name (Last, First, Middle Initial)
REAGAN DUNN FOR CONGRESS

Date of Disbursement: 03 / 30 / 2022

Mailing Address: PO BOX 1390

City: ISSAQUAH State: WA Zip Code: 98027-0057

Purpose of Disbursement: CONTRIBUTION

Candidate Name: DUNN, REAGAN, B, ,

Office Sought: House Senate President

Disbursement For: 2022 Primary General Other (specify) ▼

State: WA District: 08

FEC Identification Number: C00795757
Transaction ID: B5CB088B7E

Amount of Each Disbursement this Period: 1000.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	26000.00