

# 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.

BACKPAC

ADDRESS (number and street)

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

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:
- |                                      |                                      |                                       |  |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)  | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)  | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE)                           |

- (c) 12-Day PRE-Election Report for the:
- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) |                                       |

Election on  /  /  in the State of

- (d) 30-Day POST-Election Report for the:
- |  |                                       |  |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on  /  /  in the State of

5. Covering Period  /  /  through  /  /

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

Buchanan, Katherine, M, ,

Type or Print Name of Treasurer

Signature of Treasurer Buchanan, Katherine, M, , [Electronically Filed] Date  /  /

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

Office Use Only									
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**BACKPAC**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>		79420.90
(b) Cash on Hand at Beginning of Reporting Period.....	91925.80	
(c) Total Receipts (from Line 19) .....	15465.00	31015.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	107390.80	110435.90
7. Total Disbursements (from Line 31).....	44765.15	47810.25
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	62625.65	62625.65
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**BACKPAC**

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).....	9900.00	20450.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	9900.00	20450.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	5000.00	10000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	14900.00	30450.00
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).....	565.00	565.00
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)).....▶	15465.00	31015.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	15465.00	31015.00

**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 .....	3765.15	4310.25
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	3765.15	4310.25
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	41000.00	43500.00
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)) ..	44765.15	47810.25
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	44765.15	47810.25

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	14900.00	30450.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	14900.00	30450.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	3765.15	4310.25
37. Offsets to Operating Expenditures (from Line 15, page 3).....	565.00	565.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	3200.15	3745.25

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 20
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**BACKPAC**

**A. Fried, Barbara, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5924 Fried Farm Rd  
 City Crozet State VA Zip Code 22932-1605  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Fried Companies, Inc. Occupation (for Individual) Business Leader  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 23 / 2020  
**Transaction ID : VNJ1ENB4PB4**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item

**B. Logan, George, Willis, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 313 23rd St SW  
 City Roanoke State VA Zip Code 24014-1741  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 20 / 2020  
**Transaction ID : VNJ1EMSH4A4**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**C. Miller, Harris, Nathan, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1309 Summerwood Ct  
 City McLean State VA Zip Code 22102-2217  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 12 / 2020  
**Transaction ID : VNJ1EMS5VY5**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 \* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 7600.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

**A. ACTBLUE**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO Box 382110

City Cambridge	State MA	Zip Code 02238-2110
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)  
Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	12	/	2020

**Transaction ID : VNJ1EMS5VY5E**

Amount of Each Receipt this Period  
100.00

Memo Item

Note: Above Contribution earmarked through this organization.

**B. Miller, Harris, Nathan, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1309 Summerwood Ct

City McLean	State VA	Zip Code 22102-2217
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)  
N/A Not Employed

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	17	/	2020

**Transaction ID : VNJ1EMYVQA3**

Amount of Each Receipt this Period  
100.00

Memo Item

\* Earmarked Contribution: See Below

**C. ACTBLUE**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO Box 382110

City Cambridge	State MA	Zip Code 02238-2110
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)  
Conduit total listed in Agg. field

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	17	/	2020

**Transaction ID : VNJ1EMYVQA3E**

Amount of Each Receipt this Period  
100.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**BACKPAC**

**A. Miller, Harris, Nathan, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1309 Summerwood Ct  
 City McLean State VA Zip Code 22102-2217  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 14 / 2020  
**Transaction ID : VNJ1EN3WQW2**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 \* Earmarked Contribution: See Below

**B. ACTBLUE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 382110  
 City Cambridge State MA Zip Code 02238-2110  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2400.00

Date of Receipt 06 / 14 / 2020  
**Transaction ID : VNJ1EN3WQW2E**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Note: Above Contribution earmarked through this organization.

**C. Nostrand, Peter, F., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11719 River Dr  
 City Lorton State VA Zip Code 22079-4104  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SunTrust Occupation (for Individual) Chairman Emeritus  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2100.00

Date of Receipt 05 / 05 / 2020  
**Transaction ID : VNJ1EMX5296**  
 Amount of Each Receipt this Period 2100.00  
 Memo Item  
 \* Earmarked Contribution: See Below

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**BACKPAC**

**A. ACTBLUE**

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

Mailing Address PO Box 382110

City Cambridge	State MA	Zip Code 02238-2110
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 10 / 2020

**Transaction ID : VNJ1EMX5296E**

Amount of Each Receipt this Period  
2100.00

Memo Item

Note: Above Contribution earmarked through this organization.

**B.**

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

Mailing Address

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

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

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y 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
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	9900.00

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

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NAME OF COMMITTEE (In Full)  
**BACKPAC**

**A. NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE**

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

Mailing Address 430 N Michigan Ave

City Chicago	State IL	Zip Code 60611-4011
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FEC ID number of contributing federal political committee. **C** C00030718

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	/	D D	/	Y Y Y Y
05	/	22	/	2020

**Transaction ID : VNJ1EN13678**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B.**

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

Mailing Address

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

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

Aggregate Year-to-Date ▼

Date of Receipt  

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

Memo Item

**C.**

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

Mailing Address

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

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

Memo Item

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

**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 11 OF 20
<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 checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**BACKPAC**

**A. WIN THE ERA PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO Box 1226

City South Bend	State IN	Zip Code 46624-1226
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FEC ID number of contributing federal political committee. **C** C00697441

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
565.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 13 / 2020

**Transaction ID : VNJ1EMS5VT3**

Amount of Each Receipt this Period  
565.00

Memo Item

Airfare Reimbursement, America Airlines 12/04/2019

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

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

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	565.00
<b>TOTAL</b> This Period (last page this line number only).....▶	565.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**BACKPAC**

Full Name (Last, First, Middle Initial) <b>A. ACTBLUE</b>		Date of Disbursement MM / DD / YYYY 04 / 12 / 2020
Mailing Address PO Box 382110		FEC Identification Number C <b>Transaction ID : VNH26AF770</b> Amount of Each Disbursement this Period 3.95
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement Processing Fee	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
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>B. ACTBLUE</b>		Date of Disbursement MM / DD / YYYY 05 / 10 / 2020
Mailing Address PO Box 382110		FEC Identification Number C <b>Transaction ID : VNH26AF91C</b> Amount of Each Disbursement this Period 82.95
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement Processing Fee	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ACTBLUE</b>		Date of Disbursement MM / DD / YYYY 05 / 17 / 2020
Mailing Address PO Box 382110		FEC Identification Number C <b>Transaction ID : VNH26AF9K1</b> Amount of Each Disbursement this Period 3.95
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement Processing Fee	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
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)..... ▶

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

90.85

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**BACKPAC**

Full Name (Last, First, Middle Initial) <b>A. ACTBLUE</b>		Date of Disbursement MM / DD / YYYY 06 / 14 / 2020
Mailing Address PO Box 382110		FEC Identification Number C [REDACTED] <b>Transaction ID : VNH26AFBD</b> Amount of Each Disbursement this Period [REDACTED] 3.95
City Cambridge	State MA	Zip Code 02238-2110
Purpose of Disbursement Processing Fee		Category/ Type [REDACTED]
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	

Full Name (Last, First, Middle Initial) <b>B. American Express</b>		Date of Disbursement MM / DD / YYYY 04 / 20 / 2020
Mailing Address PO Box 1270		FEC Identification Number C [REDACTED] <b>Transaction ID : VNH26AF7SQ</b> Amount of Each Disbursement this Period [REDACTED] 2974.00
City Newark	State NJ	Zip Code 07101-1270
Purpose of Disbursement Credit Card Payment		Category/ Type [REDACTED]
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	

Full Name (Last, First, Middle Initial) <b>C. NGP VAN, Inc.</b>		Date of Disbursement MM / DD / YYYY 04 / 20 / 2020
Mailing Address 1101 15th St NW Ste 500		FEC Identification Number C [REDACTED] <b>Transaction ID : VNH26AF7S</b> Amount of Each Disbursement this Period [REDACTED] 300.00
City Washington	State DC	Zip Code 20005-5006
Purpose of Disbursement Database Support		Category/ Type [REDACTED]
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 checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 2977.95
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**BACKPAC**

Full Name (Last, First, Middle Initial) <b>A. Salamander Resort</b>		Date of Disbursement MM / DD / YYYY 04 / 20 / 2020
Mailing Address 500 N Pendleton St		FEC Identification Number C [REDACTED] <b>Transaction ID : VNH26AF7SF</b> Amount of Each Disbursement this Period 2648.00
City Middleburg	State VA	Zip Code 20117-2683
Purpose of Disbursement Catering/Events		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 checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. American Express</b>		Date of Disbursement MM / DD / YYYY 05 / 21 / 2020
Mailing Address PO Box 1270		FEC Identification Number C [REDACTED] <b>Transaction ID : VNH26AFA32</b> Amount of Each Disbursement this Period 251.00
City Newark	State NJ	Zip Code 07101-1270
Purpose of Disbursement Credit Card Payment		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	

Full Name (Last, First, Middle Initial) <b>C. NGP VAN, Inc.</b>		Date of Disbursement MM / DD / YYYY 05 / 21 / 2020
Mailing Address 1101 15th St NW Ste 500		FEC Identification Number C [REDACTED] <b>Transaction ID : VNH26AFA3:</b> Amount of Each Disbursement this Period 225.00
City Washington	State DC	Zip Code 20005-5006
Purpose of Disbursement Database Support		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 checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	251.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**BACKPAC**

Full Name (Last, First, Middle Initial) <b>A. American Express</b>			Date of Disbursement MM / DD / YYYY 06 / 22 / 2020	
Mailing Address PO Box 1270			FEC Identification Number C [REDACTED]	
City Newark	State NJ	Zip Code 07101-1270	Transaction ID : <b>VNH26AFBT2</b>	
Purpose of Disbursement Credit Card Payment			Amount of Each Disbursement this Period [REDACTED] 326.00	
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) <b>B. NGP VAN, Inc.</b>			Date of Disbursement MM / DD / YYYY 06 / 22 / 2020	
Mailing Address 1101 15th St NW Ste 500			FEC Identification Number C [REDACTED]	
City Washington	State DC	Zip Code 20005-5006	Transaction ID : <b>VNH26AFBT3</b>	
Purpose of Disbursement Database Support			Amount of Each Disbursement this Period [REDACTED] 300.00	
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>C. American Express</b>			Date of Disbursement MM / DD / YYYY 06 / 30 / 2020	
Mailing Address PO Box 1270			FEC Identification Number C [REDACTED]	
City Newark	State NJ	Zip Code 07101-1270	Transaction ID : <b>VNH26AFDR</b>	
Purpose of Disbursement Credit Card Payment			Amount of Each Disbursement this Period [REDACTED] 53.74	
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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 379.74
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED] 3699.54

**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)  
**BACKPAC**

**A. ANDY KIM FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 211

City Marlton State NJ Zip Code 08053-0211

Purpose of Disbursement Contribution

Candidate Name

**KIM, ANDY, , ,**

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

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 21 / 2020

FEC Identification Number

**C** C00648220

**Transaction ID : VNH26AFA36**

Amount of Each Disbursement this Period

2500.00

Memo Item

**B. DEBBIE FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 566442

City Miami State FL Zip Code 33256-6442

Purpose of Disbursement Contribution

Candidate Name

**MUCARSEL-POWELL, DEBBIE, , ,**

Office Sought:  House  Senate  President  
State: FL District: 26

Disbursement For: 2020  
 Primary  General  
 Other (specify)

Date of Disbursement

MM / DD / YYYY  
05 / 21 / 2020

FEC Identification Number

**C** C00652065

**Transaction ID : VNH26AFA37**

Amount of Each Disbursement this Period

2500.00

Memo Item

**C. DR KIM SCHRIER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address 3020 Issaquah Pine Lake Rd SE # 331

City Sammamish State WA Zip Code 98075-7253

Purpose of Disbursement Contribution

Candidate Name

**SCHRIER, KIM DR., , ,**

Office Sought:  House  Senate  President  
State: WA District: 08

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 21 / 2020

FEC Identification Number

**C** C00652628

**Transaction ID : VNH26AFA3,**

Amount of Each Disbursement this Period

2500.00

Memo Item

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

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

7500.00



**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)  
**BACKPAC**

**A. DR. CAMERON WEBB FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 679

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

City Charlottesville State VA Zip Code 22902-0679

FEC Identification Number

Purpose of Disbursement Contribution

C	C00714964
---	-----------

Candidate Name **WEBB, BRYANT CAMERON, , ,**

Category/Type

Transaction ID : **VNH26AFDRI**

Amount of Each Disbursement this Period

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

5000.00
---------

State: VA District: 05

Memo Item

**B. ELAINE FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 66191

M M M	/	D D D	/	Y Y Y Y Y
05		21		2020

City Virginia Beach State VA Zip Code 23466-6191

FEC Identification Number

Purpose of Disbursement Contribution

C	C00664375
---	-----------

Candidate Name **LURIA, ELAINE, , ,**

Category/Type

Transaction ID : **VNH26AFA38**

Amount of Each Disbursement this Period

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

5000.00
---------

State: VA District: 02

Memo Item

**C. ELIZABETH PANNILL FLETCHER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 3262 Westheimer Rd # 636

M M M	/	D D D	/	Y Y Y Y Y
05		21		2020

City Houston State TX Zip Code 77098-1002

FEC Identification Number

Purpose of Disbursement Contribution

C	C00640045
---	-----------

Candidate Name **FLETCHER, ELIZABETH, , ,**

Category/Type

Transaction ID : **VNH26AFA31**

Amount of Each Disbursement this Period

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

2500.00
---------

State: TX District: 07

Memo Item

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

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

12500.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
**BACKPAC**

**A. FINKENAUER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 598

City Dubuque State IA Zip Code 52004-0598

Purpose of Disbursement Contribution

Candidate Name  
**FINKENAUER, ABBY, , ,**

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

State: IA District: 01

Date of Disbursement

MM / DD / YYYY  
06 / 22 / 2020

FEC Identification Number

**C** C00637074

**Transaction ID : VNH26AFBT**

Amount of Each Disbursement this Period

2500.00

Memo Item

**B. HARLEY ROUDA FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address 120 Newport Center Dr # 28

City Newport Beach State CA Zip Code 92660-6916

Purpose of Disbursement Contribution

Candidate Name  
**ROUDA, HARLEY E JR, , ,**

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

State: CA District: 48

Date of Disbursement

MM / DD / YYYY  
05 / 21 / 2020

FEC Identification Number

**C** C00633982

**Transaction ID : VNH26AFA39**

Amount of Each Disbursement this Period

2500.00

Memo Item

**C. KENDRA HORN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 54375

City Oklahoma City State OK Zip Code 73154-1375

Purpose of Disbursement Contribution

Candidate Name  
**HORN, KENDRA, , ,**

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

State: OK District: 05

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2020

FEC Identification Number

**C** C00648915

**Transaction ID : VNH26AFDR**

Amount of Each Disbursement this Period

2000.00

Memo Item

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

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

7000.00

**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)  
**BACKPAC**

**A. KULKARNI FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address 2612 Cypress Springs Dr

City Pearlland State TX Zip Code 77584-6726

Purpose of Disbursement Contribution

Candidate Name  
**KULKARNI, SRI PRESTON, , ,**

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

State: TX District: 22

Date of Disbursement

MM / DD / YYYY  
04 / 20 / 2020

FEC Identification Number

**C** C00662874  
**Transaction ID : VNH26AF7SV**  
Amount of Each Disbursement this Period  
2000.00

Memo Item

**B. NEVADANS FOR STEVEN HORSFORD**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 336664

City North Las Vegas State NV Zip Code 89033-6664

Purpose of Disbursement Contribution

Candidate Name  
**HORSFORD, STEVEN ALEXZANDER, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify)

State: NV District: 04

Date of Disbursement

MM / DD / YYYY  
05 / 21 / 2020

FEC Identification Number

**C** C00668228  
**Transaction ID : VNH26AFA3C**  
Amount of Each Disbursement this Period  
2500.00

Memo Item

**C. SPANBERGER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 3121

City Glen Allen State VA Zip Code 23058-3121

Purpose of Disbursement Contribution

Candidate Name  
**SPANBERGER, ABIGAIL, , ,**

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

State: VA District: 07

Date of Disbursement

MM / DD / YYYY  
05 / 21 / 2020

FEC Identification Number

**C** C00649913  
**Transaction ID : VNH26AFA3!**  
Amount of Each Disbursement this Period  
5000.00

Memo Item

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

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

9500.00

**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)  
**BACKPAC**

Full Name (Last, First, Middle Initial) <b>A. SRI FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2020	
Mailing Address PO Box 898		FEC Identification Number C 000662874 <b>Transaction ID : VNH26AFDR.</b> Amount of Each Disbursement this Period 2000.00	
City Sugar Land	State TX	Zip Code 77487-0898	Category/ Type
Purpose of Disbursement Contribution		Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name <b>KULKARNI, SRI PRESTON, , ,</b>			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 22
Memo Item <input type="checkbox"/>			

Full Name (Last, First, Middle Initial) <b>B. XOCHITL FOR NEW MEXICO</b>		Date of Disbursement MM / DD / YYYY 05 / 21 / 2020	
Mailing Address PO Box 2250		FEC Identification Number C 000666149 <b>Transaction ID : VNH26AFA3D</b> Amount of Each Disbursement this Period 2500.00	
City Las Cruces	State NM	Zip Code 88004-2250	Category/ Type
Purpose of Disbursement Contribution		Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Candidate Name <b>TORRES SMALL, XOCHITL, , ,</b>			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 02
Memo Item <input type="checkbox"/>			

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	41000.00