

**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

Help America's Leaders Political Action Committee (HALPAC)

ADDRESS (number and street)

PO Box 30844

Check if different  
than previously  
reported. (ACC)

Bethesda

MD

20824

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00376038

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)  
(Non-Election  
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)  
(Non-Election  
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

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

in the  
State of(d) 30-Day  
POST-Election  
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

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

in the  
State of

5. Covering Period

M M / D D / Y Y Y Y Y Y  
01 01 2023

through

M M / D D / Y Y Y Y Y Y  
03 31 2023

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

Davis, Clay Paker, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Davis, Clay Paker, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
04 14 2023

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**FEC FORM 3X**  
Rev. 05/2016

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Help America's Leaders Political Action Committee (HALPAC)

Report Covering the Period: From: 

M M	/	D D	/	Y Y Y Y Y Y
01		01		2023

 To: 

M M	/	D D	/	Y Y Y Y Y Y
03		31		2023

	COLUMN A This Period	COLUMN B Calendar Year-to-Date																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																				
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colspan="6">2023</td></tr></table>	Y	Y	Y	Y	Y	Y	2023							<table><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td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☒ 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 20463Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Help America's Leaders Political Action Committee (HALPAC)

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y  
01 01 2023

To:

M M / D D / Y Y Y Y Y  
03 31 2023**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).....

42900.00

42900.00

## (ii) Unitemized .....

0.00

0.00

## (iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

42900.00

42900.00

## (b) Political Party Committees .....

0.00

0.00

## (c) Other Political Committees

(such as PACs).....

5000.00

5000.00

## (d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry  
Totals to Line 33, page 5) .....

47900.00

47900.00

## 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.).....

4.56

4.56

## 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)) .....

47904.56

47904.56

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

47904.56

47904.56

# DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	91898.65	91898.65
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	91898.65	91898.65
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
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 .....	800.00	800.00
(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)).....	800.00	800.00
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)) ..	92698.65	92698.65
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	92698.65	92698.65

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	47900.00	47900.00
34. Total Contribution Refunds (from Line 28(d)) .....	800.00	800.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	47100.00	47100.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....▶	91898.65	91898.65
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	91898.65	91898.65

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB  
.

Form/Schedule: F3XN

Transaction ID :

Please note: The Committee has demonstrated the necessary steps to establish best efforts to obtain and disclose the full identification of all individuals who contribute in excess of \$200 in an election cycle. These efforts include a clear request with the original solicitation, followed by a Request for Missing Information Letter within 30 days, which clearly asks for the missing information without soliciting a contribution. The letter reads: Federal law requires us to make our best efforts to collect and report the name, mailing address, occupation and name of employer of all individuals who contribute in excess of \$200 in an election cycle. We then enclose a self addressed envelope and include a telephone number to reach the committee with any questions. A second Request for Missing Information Letter is sent if we do not receive the information in a timely manner. In the event that we receive additional information from contributors whose information was not originally disclosed, we will amend the appropriate report to reflect the additional disclosures properly.

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 7 OF 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Help America's Leaders Political Action Committee (HALPAC)**

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

**A. Barsz, Peter, , ,**

Mailing Address 50 South Providence Road

City  
Media

State  
PA

Zip Code  
19063

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Barsz, Gowie, Amon & Fultz LLC

Occupation (for Individual)

Accountant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 15 / 2023

**Transaction ID : SA11AI.4760**

Amount of Each Receipt this Period

5800.00

☐ Memo Item

See Partial Refund 4/18/23

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

**B. Begley, George, , ,**

Mailing Address 2775 Pine Top Road

City  
London

State  
KY

Zip Code  
40741

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Begley Lumber Company

Occupation (for Individual)

Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 30 / 2023

**Transaction ID : SA11AI.4782**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

**C. Begley, James, , ,**

Mailing Address PO Box 647

City  
London

State  
KY

Zip Code  
40743

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Begley Lumber Company

Occupation (for Individual)

Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 30 / 2023

**Transaction ID : SA11AI.4781**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

15800.00

# **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 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Help America's Leaders Political Action Committee (HALPAC)**

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

A. Johnson, Ronald, M, ,

Mailing Address 3213 Summit Square Place Suite 100

City  
Lexington

State  
KY

Zip Code  
40509

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
R.M. Johnson Holding Co., LLC

Occupation (for Individual)  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 20 / 2023

Transaction ID : SA11AI.4784

Amount of Each Receipt this Period

5000.00

☒ Memo Item

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

B. R.M. Johnson Holding Co., LLC

Mailing Address 3213 Summit Square Place  
Suite 100

City  
Lexington

State  
KY

Zip Code  
40509

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 ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 20 / 2023

Transaction ID : SA11AI.4783

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Verified Non-Corporate - See Memo Item

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

C. Rahn, William (Alex), , ,

Mailing Address 834 Church Avenue

City  
West Chester

State  
PA

Zip Code  
19382

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Wanner Associates

Occupation (for Individual)  
Lobbyist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2900.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 28 / 2023

Transaction ID : SA11AI.4747

Amount of Each Receipt this Period

2900.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

7900.00



# **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 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Help America's Leaders Political Action Committee (HALPAC)**

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

A. Schena, Robert, , ,

Mailing Address 424 General Washington Road

City  
Wayne

State  
PA

Zip Code  
19087

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Rajant Corp

Occupation (for Individual)

Chairman &amp; CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 27 / 2023

Transaction ID : SA11AI.4746

Amount of Each Receipt this Period

5800.00

☐ Memo Item

See Refund 2/10/23

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

B. Smith, Will, , ,

Mailing Address 2620 S. Grant Street

City  
Arlington

State  
VA

Zip Code  
22202

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

CGA Group

Occupation (for Individual)

Principal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 04 / 2023

Transaction ID : SA11AI.4726

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

C. Thom, Greg, , ,

Mailing Address 309 Riley Street

City  
Falls Church

State  
VA

Zip Code  
22046

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Ultra Maritime

Occupation (for Individual)

Senior Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 24 / 2023

Transaction ID : SA11AI.4758

Amount of Each Receipt this Period

5000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

11300.00

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 10 OF 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Help America's Leaders Political Action Committee (HALPAC)**

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

**A. Van Rassen, Michael, , ,**

Mailing Address 134 Manningham Dr

City  
Madison

State  
AL

Zip Code  
35758

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Rajant Corp.

Occupation (for Individual)

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 27 / 2023

Transaction ID : SA11AI.4778

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

**B. Wanner, John, , ,**

Mailing Address 7155 Sterling Rd.

City  
Harrisburg

State  
PA

Zip Code  
17112

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 ▼

2900.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 31 / 2023

Transaction ID : SA11AI.4748

Amount of Each Receipt this Period

2900.00

☐ Memo Item

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

**C.**

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

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

7900.00

42900.00

	11a		11b	<b>X</b>	11c		12		
	13		14		15		16		17

Help America's Leaders Political Action Committee (HALPAC)

5000.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 26

<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)

Help America's Leaders Political Action Committee (HALPAC)

Full Name (Last, First, Middle Initial)

**A. Anedot**Mailing Address 1340 Poydras Street  
Suite 1770City  
New OrleansState  
LAZip Code  
70112Purpose of Disbursement  
PAC E-Merchant Fees

001

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	1			2	0	2	3		

FEC Identification Number

C

Transaction ID : SB21B.4742

Amount of Each Disbursement this Period

348.60

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Anedot**Mailing Address 1340 Poydras Street  
Suite 1770City  
New OrleansState  
LAZip Code  
70112Purpose of Disbursement  
PAC E-Merchant Fees

001

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:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.4743

Amount of Each Disbursement this Period

116.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Anedot**Mailing Address 1340 Poydras Street  
Suite 1770City  
New OrleansState  
LAZip Code  
70112Purpose of Disbursement  
PAC E-Merchant Fees

001

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	3		

FEC Identification Number

C

Transaction ID : SB21B.4786

Amount of Each Disbursement this Period

232.30

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

697.20

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 26

<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)

Help America's Leaders Political Action Committee (HALPAC)

Full Name (Last, First, Middle Initial)

**A. Anedot**Mailing Address 1340 Poydras Street  
Suite 1770City  
New OrleansState  
LAZip Code  
70112Purpose of Disbursement  
PAC E-Merchant Fees

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
02 / 28 / 2023

FEC Identification Number

C Transaction ID : SB21B.4757

Amount of Each Disbursement this Period

200.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Apple Transportation**

Mailing Address 15501 McGregor Blvd

City  
Fort MeyersState  
FLZip Code  
33908Purpose of Disbursement  
PAC Transportation

002

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
02 / 10 / 2023

FEC Identification Number

C Transaction ID : SB21B.4765

Amount of Each Disbursement this Period

75.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Bellini Italian**

Mailing Address 2331 Tamiami Trl N

City  
NaplesState  
FLZip Code  
34103Purpose of Disbursement  
PAC Meal Expense

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
02 / 27 / 2023

FEC Identification Number

C Transaction ID : SB21B.4770

Amount of Each Disbursement this Period

265.42

☒ Memo Item

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

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

200.30

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 26

<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)

Help America's Leaders Political Action Committee (HALPAC)

Full Name (Last, First, Middle Initial)

**A. Blue Grass Tours**

Mailing Address 817 Enterprise Drive

City  
LexingtonState  
KYZip Code  
40510Purpose of Disbursement  
PAC Event Transportation

007

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	7			2	0	2	3	

FEC Identification Number

C

Transaction ID : SB21B.4752

Amount of Each Disbursement this Period

8450.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Capitol Hill Club**

Mailing Address 300 1st St SE

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
PAC Meal Expense

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.4715

Amount of Each Disbursement this Period

60.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Capitol Hill Club**

Mailing Address 300 1st St SE

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
PAC Meal Expense

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.4719

Amount of Each Disbursement this Period

270.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

8450.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 26

<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)

Help America's Leaders Political Action Committee (HALPAC)

Full Name (Last, First, Middle Initial)

**A. Capitol Hill Club**

Mailing Address 300 1st St SE

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
PAC Meal Expense

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	2			1	6							2022

FEC Identification Number

C

Transaction ID : SB21B.4735

Amount of Each Disbursement this Period

119.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Capitol Hill Club**

Mailing Address 300 1st St SE

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
PAC Meal Expense

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	7							2023

FEC Identification Number

C

Transaction ID : SB21B.4755

Amount of Each Disbursement this Period

195.86

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Capitol Hill Club**

Mailing Address 300 1st St SE

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
PAC Meal Expense

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	8							2023

FEC Identification Number

C

Transaction ID : SB21B.4764

Amount of Each Disbursement this Period

110.00

☒ Memo Item

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

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

												0.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 16 OF 26

<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)

Help America's Leaders Political Action Committee (HALPAC)

Full Name (Last, First, Middle Initial)

**A. Capitol Hill Club**

Mailing Address 300 1st St SE

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
PAC Catering

001

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:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	3	

FEC Identification Number

C

Transaction ID : SB21B.4767

Amount of Each Disbursement this Period

661.40

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Capitol Hill Club**

Mailing Address 300 1st St SE

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
PAC Meal Expense

001

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:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	3	

FEC Identification Number

C

Transaction ID : SB21B.4768

Amount of Each Disbursement this Period

77.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Cardmember Service**

Mailing Address P.O. Box 790408

City  
St. LouisState  
MOZip Code  
63179Purpose of Disbursement  
PAC Credit Card Fee

001

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:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	2			0	7			2	0	2	2	

FEC Identification Number

C

Transaction ID : SB21B.4721

Amount of Each Disbursement this Period

183.39

☒ Memo Item

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

0.00

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



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 26

<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)

Help America's Leaders Political Action Committee (HALPAC)

Full Name (Last, First, Middle Initial)

**A. Cardmember Service**

Mailing Address P.O. Box 790408

City  
St. LouisState  
MOZip Code  
63179Purpose of Disbursement  
SEE MEMO ITEMS

001

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	3			2	0	2	3		

FEC Identification Number

C

Transaction ID : SB21B.4713

Amount of Each Disbursement this Period

730.20

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Cardmember Service**

Mailing Address P.O. Box 790408

City  
St. LouisState  
MOZip Code  
63179Purpose of Disbursement  
PAC Credit Card Fee

001

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	4			2	0	2	3		

FEC Identification Number

C

Transaction ID : SB21B.4731

Amount of Each Disbursement this Period

39.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Cardmember Service**

Mailing Address P.O. Box 790408

City  
St. LouisState  
MOZip Code  
63179Purpose of Disbursement  
PAC Credit Card Fee

001

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	9			2	0	2	3		

FEC Identification Number

C

Transaction ID : SB21B.4732

Amount of Each Disbursement this Period

218.64

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

730.20

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 18 OF 26

<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)

Help America's Leaders Political Action Committee (HALPAC)

Full Name (Last, First, Middle Initial)

**A. Cardmember Service**

Mailing Address P.O. Box 790408

City  
St. LouisState  
MOZip Code  
63179Purpose of Disbursement  
SEE MEMO ITEMS

001

Candidate Name

Category/  
Type

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	1			2	3			2	0	2	3		

FEC Identification Number

C

Transaction ID : SB21B.4729

Amount of Each Disbursement this Period

1153.38

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Cardmember Service**

Mailing Address P.O. Box 790408

City  
St. LouisState  
MOZip Code  
63179Purpose of Disbursement  
PAC Credit Card Fee

001

Candidate Name

Category/  
Type

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	2			0	7			2	0	2	3		

FEC Identification Number

C

Transaction ID : SB21B.4754

Amount of Each Disbursement this Period

187.48

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Cardmember Service**

Mailing Address P.O. Box 790408

City  
St. LouisState  
MOZip Code  
63179Purpose of Disbursement  
SEE MEMO ITEMS

001

Candidate Name

Category/  
Type

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	1			2	0	2	3		

FEC Identification Number

C

Transaction ID : SB21B.4753

Amount of Each Disbursement this Period

383.34

☐ Memo Item

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

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

1	5	3	6	.	7	2
---	---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 19 OF 26

<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)

Help America's Leaders Political Action Committee (HALPAC)

Full Name (Last, First, Middle Initial)

**A. Cardmember Service**

Mailing Address P.O. Box 790408

City  
St. LouisState  
MOZip Code  
63179Purpose of Disbursement  
PAC Credit Card Fee

001

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	6			2	0	2	3		

FEC Identification Number

C

Transaction ID : SB21B.4774

Amount of Each Disbursement this Period

39.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Cardmember Service**

Mailing Address P.O. Box 790408

City  
St. LouisState  
MOZip Code  
63179Purpose of Disbursement  
PAC Credit Card Fee

001

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	6			2	0	2	3		

FEC Identification Number

C

Transaction ID : SB21B.4775

Amount of Each Disbursement this Period

201.28

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Cardmember Service**

Mailing Address P.O. Box 790408

City  
St. LouisState  
MOZip Code  
63179Purpose of Disbursement  
SEE MEMO ITEMS

001

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:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.4763

Amount of Each Disbursement this Period

2773.93

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

2773.93

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 20 OF 26

<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)

Help America's Leaders Political Action Committee (HALPAC)

Full Name (Last, First, Middle Initial)

**A. CFS Compliance**

Mailing Address PO Box 30844

City  
BethesdaState  
MDZip Code  
20824Purpose of Disbursement  
PAC Compliance Consulting

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
01 13 2023

FEC Identification Number

C

Transaction ID : SB21B.4727

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CFS Compliance**

Mailing Address PO Box 30844

City  
BethesdaState  
MDZip Code  
20824Purpose of Disbursement  
PAC Compliance Consulting

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
03 20 2023

FEC Identification Number

C

Transaction ID : SB21B.4776

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Churchill Downs**

Mailing Address 700 Central Ave

City  
LouisvilleState  
KYZip Code  
40208Purpose of Disbursement  
PAC Facility Rental

007

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
01 12 2023

FEC Identification Number

C

Transaction ID : SB21B.4725

Amount of Each Disbursement this Period

62976.00

☐ Memo Item

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

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

64476.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 21 OF 26

<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)

Help America's Leaders Political Action Committee (HALPAC)

Full Name (Last, First, Middle Initial)

**A. Churchill Downs**

Mailing Address 700 Central Ave

City  
LouisvilleState  
KYZip Code  
40208Purpose of Disbursement  
PAC Facility Rental

007

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	5			2	0	2	3		

FEC Identification Number

C

Transaction ID : SB21B.4762

Amount of Each Disbursement this Period

1014.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Curb**

Mailing Address 11-11 34th Avenue

City  
Long Island CityState  
NYZip Code  
11106Purpose of Disbursement  
PAC Transportation

002

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:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.4737

Amount of Each Disbursement this Period

15.79

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Delta Airlines**

Mailing Address 1030 Delta Blvd

City  
AtlantaState  
GAZip Code  
30320Purpose of Disbursement  
PAC Airfare

002

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:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.4772

Amount of Each Disbursement this Period

547.80

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

1014.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 22 OF 26

<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)

Help America's Leaders Political Action Committee (HALPAC)

Full Name (Last, First, Middle Initial)

**A. Delta Airlines**

Mailing Address 1030 Delta Blvd

City  
AtlantaState  
GAZip Code  
30320Purpose of Disbursement  
PAC Airfare

002

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:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.4773

Amount of Each Disbursement this Period

547.80

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Kroger**

Mailing Address 181 S Highway 27

City  
SomersetState  
KYZip Code  
42501Purpose of Disbursement  
PAC Food & Beverage

007

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:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.4739

Amount of Each Disbursement this Period

47.67

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Rogers, Cynthia, D, ,**

Mailing Address 309 College Street

City  
SomersetState  
KYZip Code  
42501Purpose of Disbursement  
PAC Event Planning

003

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	9			2	0	2	3		

FEC Identification Number

C

Transaction ID : SB21B.4728

Amount of Each Disbursement this Period

4000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

4000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 23 OF 26

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27  
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Help America's Leaders Political Action Committee (HALPAC)

Full Name (Last, First, Middle Initial)

**A. Rogers, Cynthia, D, ,**

Mailing Address 309 College Street

City  
Somerset

State  
KY

Zip Code  
42501

Purpose of Disbursement  
PAC Event Planning

003

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 Y  
02 / 17 / 2023

FEC Identification Number

C

Transaction ID : SB21B.4751

Amount of Each Disbursement this Period

4000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Rogers, Cynthia, D, ,**

Mailing Address 309 College Street

City  
Somerset

State  
KY

Zip Code  
42501

Purpose of Disbursement  
PAC Event Planning

003

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 Y  
03 / 20 / 2023

FEC Identification Number

C

Transaction ID : SB21B.4777

Amount of Each Disbursement this Period

4000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. The UPS Store**

Mailing Address 1032 15th Street NW

City  
Washington

State  
DC

Zip Code  
20005

Purpose of Disbursement  
PAC Shipping 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 Y  
12 / 06 / 2022

FEC Identification Number

C

Transaction ID : SB21B.4717

Amount of Each Disbursement this Period

95.18

☒ Memo Item

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

8000.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 24 OF 26

<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)

Help America's Leaders Political Action Committee (HALPAC)

Full Name (Last, First, Middle Initial)

**A. The UPS Store**

Mailing Address 1032 15th Street NW

City  
WashingtonState  
DCZip Code  
20005Purpose of Disbursement  
PAC Shipping Expense

001

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:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	2			0	7							

FEC Identification Number

C

Transaction ID : SB21B.4718

Amount of Each Disbursement this Period

121.63

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. The UPS Store**

Mailing Address 1032 15th Street NW

City  
WashingtonState  
DCZip Code  
20005Purpose of Disbursement  
PAC Shipping Expense

001

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:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	2			1	2							

FEC Identification Number

C

Transaction ID : SB21B.4736

Amount of Each Disbursement this Period

120.59

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. The UPS Store**

Mailing Address 1032 15th Street NW

City  
WashingtonState  
DCZip Code  
20005Purpose of Disbursement  
PAC Shipping Expense

001

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:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	2			3	0							

FEC Identification Number

C

Transaction ID : SB21B.4734

Amount of Each Disbursement this Period

361.52

☒ Memo Item

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

0.00

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



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 25 OF 26

<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)

Help America's Leaders Political Action Committee (HALPAC)

Full Name (Last, First, Middle Initial)

**A. The UPS Store**

Mailing Address 1032 15th Street NW

City  
WashingtonState  
DCZip Code  
20005Purpose of Disbursement  
PAC Shipping Expense

001

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	3			2	0	2	3		

FEC Identification Number

C

Transaction ID : SB21B.4733

Amount of Each Disbursement this Period

231.17

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. The UPS Store**

Mailing Address 1032 15th Street NW

City  
WashingtonState  
DCZip Code  
20005Purpose of Disbursement  
PAC Shipping

001

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	3			2	0	2	3		

FEC Identification Number

C

Transaction ID : SB21B.4766

Amount of Each Disbursement this Period

103.22

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. The UPS Store**

Mailing Address 1032 15th Street NW

City  
WashingtonState  
DCZip Code  
20005Purpose of Disbursement  
PAC Shipping

001

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	3			2	0	2	3		

FEC Identification Number

C

Transaction ID : SB21B.4769

Amount of Each Disbursement this Period

146.01

☒ Memo Item

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

0.00

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

91878.35

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 26 OF 26

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

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NAME OF COMMITTEE (In Full)

Help America's Leaders Political Action Committee (HALPAC)

Full Name (Last, First, Middle Initial)

**A. Schena, Robert, , ,**

Mailing Address 424 General Washington Road

City  
WayneState  
PAZip Code  
19087Purpose of Disbursement  
PAC Contribution Refund

010

Category/  
Type

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	2			1	4			2	0	2	3		

FEC Identification Number

C

Transaction ID : SB28A.4749

Amount of Each Disbursement this Period

800.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

800.00

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

800.00