

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.

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 checked="" 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.

Type or Print Name of Treasurer MILLER, JOSEPH, , ,

Signature of Treasurer MILLER, JOSEPH, , , 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.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

CONSOLIDATED EDISON INC. EMPLOYEES' POLITICAL ACTION COMMITTEE (CEIPAC)

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="2023"/>	<input type="text" value="75950.81"/>	<input type="text" value="75950.81"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="74514.89"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="1395.42"/>	<input type="text" value="11975.62"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="75910.31"/>	<input type="text" value="87926.43"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="0.00"/>	<input type="text" value="12016.12"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="75910.31"/>	<input type="text" value="75910.31"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

CONSOLIDATED EDISON INC. EMPLOYEES' POLITICAL ACTION COMMITTEE (CEIPAC)

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).....	1174.96	10030.80
(ii) Unitemized	0.00	441.63
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	1174.96	10472.43
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	1174.96	10472.43
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.).....	220.46	1503.19
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)).....▶	1395.42	11975.62
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	1395.42	11975.62

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	0.00	16.12
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	16.12
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	12000.00
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)) ..	0.00	12016.12
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	12016.12

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	1174.96	10472.43
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1174.96	10472.43
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	16.12
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	16.12

**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 11
	<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)
CONSOLIDATED EDISON INC. EMPLOYEES' POLITICAL ACTION COMMITTEE (CEIPAC)

A. BRIZZOLARA, THOMAS, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 320 HIGH STREET
 City NORWOOD State NJ Zip Code 07648
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ORANGE & ROCKLAND UTILITIES INC Occupation (for Individual) DIRECTOR PUBLIC AFFAIRS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.60

Date of Receipt 10 / 13 / 2023
Transaction ID : B000100S000001L11A1
 Amount of Each Receipt this Period 20.83
 Memo Item
PAYROLL DEDUCTION

B. BRIZZOLARA, THOMAS, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 320 HIGH STREET
 City NORWOOD State NJ Zip Code 07648
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ORANGE & ROCKLAND UTILITIES INC Occupation (for Individual) DIRECTOR PUBLIC AFFAIRS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.60

Date of Receipt 10 / 31 / 2023
Transaction ID : B000101S000001L11A1
 Amount of Each Receipt this Period 20.83
 Memo Item
PAYROLL DEDUCTION

C. HO, CHRISTINA, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 388 RIDGE ROAD
 City HARTSDALE State NY Zip Code 10530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONSOLIDATED EDISON OF NY INC Occupation (for Individual) VP STRATEGIC PLANNING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 999.96

Date of Receipt 10 / 13 / 2023
Transaction ID : B000100S000002L11A1
 Amount of Each Receipt this Period 83.33
 Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....▶	124.99
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 11
	<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)
CONSOLIDATED EDISON INC. EMPLOYEES' POLITICAL ACTION COMMITTEE (CEIPAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HO, CHRISTINA, C, ,

Mailing Address 388 RIDGE ROAD

City HARTSDALE	State NY	Zip Code 10530
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CONSOLIDATED EDISON OF NY INC	Occupation (for Individual) VP STRATEGIC PLANNING
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
999.96

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2023

Transaction ID : **B000101S000002L11A1**

Amount of Each Receipt this Period
83.33

Memo Item
PAYROLL DEDUCTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HOGLUND, ROBERT, N, ,

Mailing Address 151 CENTRAL PARK WEST
2W

City NEW YORK	State NY	Zip Code 10023
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CONSOLIDATED EDISON OF NY INC	Occupation (for Individual) SENIOR VP & CFO
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4166.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2023

Transaction ID : **B000100S000003L11A1**

Amount of Each Receipt this Period
208.33

Memo Item
PAYROLL DEDUCTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HOGLUND, ROBERT, N, ,

Mailing Address 151 CENTRAL PARK WEST
2W

City NEW YORK	State NY	Zip Code 10023
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CONSOLIDATED EDISON OF NY INC	Occupation (for Individual) SENIOR VP & CFO
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
4166.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2023

Transaction ID : **B000101S000003L11A1**

Amount of Each Receipt this Period
208.33

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....▶	499.99
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 11
	<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)
CONSOLIDATED EDISON INC. EMPLOYEES' POLITICAL ACTION COMMITTEE (CEIPAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KETSCHKE, MATTHEW, , ,

Mailing Address 26 ADAMS AVENUE

City CRANFORD	State NJ	Zip Code 07016
------------------	-------------	-------------------

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

Name of Employer (for Individual) CONSOLIDATED EDISON OF NY INC	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1333.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	13	/	2023

Transaction ID : **B000100S000004L11A1**

Amount of Each Receipt this Period
66.67

Memo Item
PAYROLL DEDUCTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KETSCHKE, MATTHEW, , ,

Mailing Address 26 ADAMS AVENUE

City CRANFORD	State NJ	Zip Code 07016
------------------	-------------	-------------------

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

Name of Employer (for Individual) CONSOLIDATED EDISON OF NY INC	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1333.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2023

Transaction ID : **B000101S000004L11A1**

Amount of Each Receipt this Period
66.67

Memo Item
PAYROLL DEDUCTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MISQUITA, EDLYN, , ,

Mailing Address 42 GANNETT CT

City WAYNE	State NJ	Zip Code 07470
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CONSOLIDATED EDISON OF NY INC	Occupation (for Individual) VP & GENERAL AUDITOR
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
916.63

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	13	/	2023

Transaction ID : **B000100S000005L11A1**

Amount of Each Receipt this Period
83.33

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	216.67
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 9 OF 11
Use separate schedule(s) for each category of the Detailed Summary Page
FOR LINE NUMBER: (check only one)
11a 11b 11c 12
13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONSOLIDATED EDISON INC. EMPLOYEES' POLITICAL ACTION COMMITTEE (CEIPAC)

A. MISQUITA, EDLYN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 42 GANNETT CT
City WAYNE State NJ Zip Code 07470
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) CONSOLIDATED EDISON OF NY INC Occupation (for Individual) VP & GENERAL AUDITOR
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 916.63

Date of Receipt 10 / 31 / 2023
Transaction ID : B000101S000005L11A1
Amount of Each Receipt this Period 83.33
Memo Item
PAYROLL DEDUCTION

B. SHAH, MILAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 630 1ST AVENUE #23
City NEW YORK State NY Zip Code 10016
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) CONSOLIDATED EDISON OF NY INC Occupation (for Individual) PROJECT MANAGER OCIO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 833.20

Date of Receipt 10 / 13 / 2023
Transaction ID : B000100S000006L11A1
Amount of Each Receipt this Period 41.66
Memo Item
PAYROLL DEDUCTION

C. SHAH, MILAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 630 1ST AVENUE #23
City NEW YORK State NY Zip Code 10016
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) CONSOLIDATED EDISON OF NY INC Occupation (for Individual) PROJECT MANAGER OCIO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 833.20

Date of Receipt 10 / 31 / 2023
Transaction ID : B000101S000006L11A1
Amount of Each Receipt this Period 41.66
Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional) 166.65
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 11
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CONSOLIDATED EDISON INC. EMPLOYEES' POLITICAL ACTION COMMITTEE (CEIPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. STRONG, KIMBERLY, R, ,

Mailing Address **4 IRVING PLACE**

City NEW YORK	State NY	Zip Code 10003
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CONSOLIDATED EDISON OF NY INC	Occupation (for Individual) VP CHIEF ETHICS & COMPLIANCE O
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
916.63

Date of Receipt
10 / 13 / 2023

Transaction ID : B000100S000007L11A1

Amount of Each Receipt this Period
83.33

Memo Item
PAYROLL DEDUCTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. STRONG, KIMBERLY, R, ,

Mailing Address **4 IRVING PLACE**

City NEW YORK	State NY	Zip Code 10003
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CONSOLIDATED EDISON OF NY INC	Occupation (for Individual) VP CHIEF ETHICS & COMPLIANCE C
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
916.63

Date of Receipt
10 / 31 / 2023

Transaction ID : B000101S000007L11A1

Amount of Each Receipt this Period
83.33

Memo Item
PAYROLL DEDUCTION

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

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	166.66
TOTAL This Period (last page this line number only).....	1174.96

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

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NAME OF COMMITTEE (In Full)
CONSOLIDATED EDISON INC. EMPLOYEES' POLITICAL ACTION COMMITTEE (CEIPAC)

A. JPMORGAN CHASE BANK NA
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 182501
 City COLUMBUS State OH Zip Code 43218
 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 ▼
 1503.19

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2023
Transaction ID : B000102S000001L17
 Amount of Each Receipt this Period
 220.46
 Memo Item
 OCTOBER 2023 INTEREST INCOME

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

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period
 Memo Item

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

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	220.46
TOTAL This Period (last page this line number only).....▶	220.46