

# 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  
Senate Eagle PAC

ADDRESS (number and street) PO Box 50430  
Check if different than previously reported. (ACC) Nashville TN 37205

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
C C00719971 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on 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 11 / 29 / 2022 through M M / D D / Y Y Y Y Y Y 12 / 31 / 2022

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

Signature of Treasurer Williamson, Les, , , [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 01 / 17 / 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.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Senate Eagle PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2022"/>		<input type="text" value="106835.49"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="13699.97"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="54206.72"/>	<input type="text" value="444346.49"/>
(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="67906.69"/>	<input type="text" value="551181.98"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="24974.40"/>	<input type="text" value="508249.69"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="42932.29"/>	<input type="text" value="42932.29"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**Senate Eagle PAC**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	6900.00	70300.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	6900.00	70300.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	25000.00	274200.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	31900.00	344500.00
12. Transfers From Affiliated/Other Party Committees.....	22306.72	99846.49
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	54206.72	444346.49
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	54206.72	444346.49

**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 .....	19974.40	330469.69
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	19974.40	330469.69
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	175000.00
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	2000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	2000.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	780.00
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)) ..	24974.40	508249.69
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	24974.40	508249.69

**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) .....	31900.00	344500.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	2000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	31900.00	342500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	19974.40	330469.69
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	19974.40	330469.69

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 19
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**Senate Eagle PAC**

**A. COLE, ANDREW, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2705 UNICORN LANE NORTHWEST  
 City WASHINGTON State DC Zip Code 20015-2233  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DC ADVOCACY, LLC Occupation (for Individual) LOBBYIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2900.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2022  
**Transaction ID : SA11A.93084**  
 Amount of Each Receipt this Period  
 2900.00  
 Memo Item  
**CONTRIBUTION**

**B. DALY, JUSTIN, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1130 CONNECTICUT AVENUE NORTHWEST  
 City WASHINGTON State DC Zip Code 20036-3904  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DALY CONSULTING GROUP Occupation (for Individual) OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 30 / 2022  
**Transaction ID : SA11A.94206**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item  
**CONTRIBUTION**

**C. REPLOGLE, STEPHEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5407 MACOMB STREET NORTHWEST  
 City WASHINGTON State DC Zip Code 20016-5308  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CAPITOL CONSULTING GROUP Occupation (for Individual) CONSULTANT  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 06 / 2022  
**Transaction ID : SA11A.93083**  
 Amount of Each Receipt this Period  
 1500.00  
 Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6900.00
<b>TOTAL</b> This Period (last page this line number only).....	6900.00

**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 7 OF 19
<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)  
**Senate Eagle PAC**

**A. CHS/COMMUNITY HEALTH SYSTEMS, INC. POLITICAL ACTION CMTE (CH)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 4000 MERIDIAN BLVD

City FRANKLIN	State TN	Zip Code 37067-6325
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FEC ID number of contributing federal political committee. **C** C00485896

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	06	/	2022

**Transaction ID : SA11C.93139**

Amount of Each Receipt this Period  
2000.00

Memo Item  
CONTRIBUTION

**B. CREDIT SUISSE SECURITIES (USA) LLC POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1201 F STREET, NW SUITE 450

City WASHINGTON	State DC	Zip Code 20004-1214
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FEC ID number of contributing federal political committee. **C** C00111559

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	07	/	2022

**Transaction ID : SA11C.93200**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**C. LIBERTY MUTUAL INSURANCE COMPANY - PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 175 BERKELEY STREET

City BOSTON	State MA	Zip Code 02116-5066
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FEC ID number of contributing federal political committee. **C** C00171843

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	16	/	2022

**Transaction ID : SA11C.93723**

Amount of Each Receipt this Period  
3000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10000.00
<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 19
<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)  
**Senate Eagle PAC**

**A. MICROSOFT CORPORATION STAKEHOLDERS VOLUNTARY PAC - MSVPAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1 MICROSOFT WAY

City REDMOND	State WA	Zip Code 98052-8300
FEC ID number of contributing federal political committee. <b>C</b> C00227546		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 23 / 2022  
**Transaction ID : SA11C.94109**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**B. PRUDENTIAL FINANCIAL INC. FEDERAL POLITICAL ACTION COMMITTEE**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 751 BROAD STREET  
14TH FLOOR

City NEWARK	State NJ	Zip Code 07102-3754
FEC ID number of contributing federal political committee. <b>C</b> C00127779		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 30 / 2022  
**Transaction ID : SA11C.94371**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**C. SANOFI US SERVICES INC. EMPLOYEES' POLITICAL ACTION COMMITTEE**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 55 CORPORATE DRIVE

City BRIDGEWATER	State NJ	Zip Code 08807-1265
FEC ID number of contributing federal political committee. <b>C</b> C00144345		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 30 / 2022  
**Transaction ID : SA11C.94370**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10000.00
<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 19
<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)  
**Senate Eagle PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**UNITEDHEALTH GROUP INCORPORATED PAC (UNITEDHEALTH GROUP PAC)**

Mailing Address 701 PENNSYLVANIA AVE, NW  
SUITE 600

City WASHINGTON State DC Zip Code 20004-2692

FEC ID number of contributing federal political committee. **C** C00274431

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 Y  
12 / 06 / 2022

**Transaction ID : SA11C.93138**

Amount of Each Receipt this Period  
5000.00

Memo Item  
**CONTRIBUTION**

**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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5000.00
<b>TOTAL</b> This Period (last page this line number only).....	25000.00

**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 19
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Senate Eagle PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. TEAM HAGERTY VICTORY**

Mailing Address **PO BOX 50430**

City <b>NASHVILLE</b>	State <b>TN</b>	Zip Code <b>37205-0430</b>
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FEC ID number of contributing federal political committee. **C C00788448**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**99846.49**

Date of Receipt  
**12 / 28 / 2022**

**Transaction ID : SA12.94069**

Amount of Each Receipt this Period  
**22306.72**

Memo Item  
**TRANSFER**

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

Mailing Address **3010 UNIVERSITY TERRACE NORTHWEST**

City <b>WASHINGTON</b>	State <b>DC</b>	Zip Code <b>20016-3463</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) <b>PRP</b>	Occupation (for Individual) <b>REAL ESTATE INVESTOR</b>
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1400.00**

Date of Receipt  
**10 / 27 / 2022**

**Transaction ID : SA.88415.4.YE22**

Amount of Each Receipt this Period  
**1400.00**

Memo Item  
**TRANSFER**

**TRANSFER FROM TEAM HAGERTY VICTORY**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. HALL, FRED, J., ,**

Mailing Address **9225 LAKE HEFNER PKWY  
STE 200**

City <b>OKLAHOMA CITY</b>	State <b>OK</b>	Zip Code <b>73120-2061</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) <b>HALL CAPITAL</b>	Occupation (for Individual) <b>CHAIRMAN &amp; CEO</b>
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
**5000.00**

Date of Receipt  
**10 / 07 / 2022**

**Transaction ID : SA.87447.4.YE22**

Amount of Each Receipt this Period  
**5000.00**

Memo Item  
**TRANSFER**

**TRANSFER FROM TEAM HAGERTY VICTORY**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>22306.72</b>
<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 11 OF 19
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Senate Eagle PAC**

**A. HOLLINGSWORTH, JOSEPH, A., MR., JR.**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 ROCKY TOP

City CLINTON	State TN	Zip Code 37716-4204
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CEO	Occupation (for Individual) THE HOLLINGSWORTH COMPANIES
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	13	/	2022

**Transaction ID : SA.85914.4.YE22**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER  
TRANSFER FROM TEAM HAGERTY VICTORY

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

Mailing Address 3225 HIGHLAND PL NW

City WASHINGTON	State DC	Zip Code 20008-3232
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AIC	Occupation (for Individual) PRESIDENT & CEO
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4200.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2022

**Transaction ID : SA.88306.4.YE22**

Amount of Each Receipt this Period  
4200.00

Memo Item  
TRANSFER  
TRANSFER FROM TEAM HAGERTY VICTORY

**C. O'BRIEN, RITA, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1285 GULF SHORE BOULEVARD NORTH  
UNIT 2A

City NAPLES	State FL	Zip Code 34102-4903
----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	12	/	2022

**Transaction ID : SA.86042.4.YE22**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER  
TRANSFER FROM TEAM HAGERTY VICTORY

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<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 12 OF 19
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**Senate Eagle PAC**

**A. O'BRIEN, ROBERT, , , JR.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1285 GULF SHORE BLVD N  
 APT 2A  
 City NAPLES State FL Zip Code 34102-4903  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) COUNTY CORK LLC Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 12 / 2022  
**Transaction ID : SA.86043.4.YE22**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM TEAM HAGERTY VICTORY

**B. PHILLIPS, AVIS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 50730  
 City KNOXVILLE State TN Zip Code 37950-0730  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PHILLIPS INFRASTRUCTURE HOLDINGS INC. Occupation (for Individual) CHAIRMAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 31 / 2022  
**Transaction ID : SA.91018.4.YE22**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM TEAM HAGERTY VICTORY

**C. PHILLIPS, WILLIAM, T., , JR.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 50730  
 City KNOXVILLE State TN Zip Code 37950-0730  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PHILLIPS INFRASTRUCTURE HOLDINGS INC. Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt 10 / 21 / 2022  
**Transaction ID : SA.88398.4.YE22**  
 Amount of Each Receipt this Period 1400.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM TEAM HAGERTY VICTORY

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	22306.72

**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)  
**Senate Eagle PAC**

**A. PRATHER, ETHAN, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 4640 ALLENSVILLE ROAD

City ALLENSVILLE State KY Zip Code 42204

Purpose of Disbursement REIMBURSEMENT

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 09 / 2022

FEC Identification Number: C

Transaction ID : SB21B.I1185f

Amount of Each Disbursement this Period: 609.33

Memo Item

**B. HILTON KNOXVILLE AIRPORT**

Full Name (Last, First, Middle Initial)

Mailing Address 2001 ALCOA HIGHWAY

City ALCOA State TN Zip Code 37701

Purpose of Disbursement HOTEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 27 / 2022

FEC Identification Number: C

Transaction ID : SB21B.I1185f

Amount of Each Disbursement this Period: 239.83

Memo Item

**C. MIDCOAST AVIATION SERVICES, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 600 AIRPORT BOULEVARD

City STATESBORO State GA Zip Code 30461

Purpose of Disbursement FUEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 28 / 2022

FEC Identification Number: C

Transaction ID : SB21B.I1185f

Amount of Each Disbursement this Period: 292.50

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 609.33

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Senate Eagle PAC**

**A. STAMPER, WILLIAM, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 4515 HARDING PIKE  
STE 110

City NASHVILLE State TN Zip Code 37205-2193

Purpose of Disbursement REIMBURSEMENT

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 09 / 2022

FEC Identification Number: C

Transaction ID : SB21B.I1180

Amount of Each Disbursement this Period: 228.93

Memo Item

**B. ENTERPRISE RENT-A-CAR**

Full Name (Last, First, Middle Initial)

Mailing Address 3150 SOUTH 160TH STREET

City SEATAC State WA Zip Code 98188

Purpose of Disbursement RENTAL CAR

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 09 / 2022

FEC Identification Number: C

Transaction ID : SB21B.I1180

Amount of Each Disbursement this Period: 228.93

Memo Item

**C. AMERICAN EXPRESS**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 640448

City DALLAS State TX Zip Code 75265-0448

Purpose of Disbursement CREDIT CARD PAYMENT

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 02 / 2022

FEC Identification Number: C

Transaction ID : SB21B.I1169

Amount of Each Disbursement this Period: 1331.00

Memo Item

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

1559.93

**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 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)  
**Senate Eagle PAC**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN AIRLINES</b>			Date of Disbursement MM / DD / YYYY 10 / 31 / 2022	
Mailing Address 2500 VICTORY AVE				
City DALLAS	State TX	Zip Code 75219-7601	FEC Identification Number C [REDACTED]	
Purpose of Disbursement AIRFARE			Transaction ID : <b>SB21B.I1169</b>	
Candidate Name			Amount of Each Disbursement this Period [REDACTED] 380.60	
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) ▼		Memo Item <input checked="" type="checkbox"/>	
State: _____	District: _____			

Full Name (Last, First, Middle Initial) <b>B. AMERICAN AIRLINES</b>			Date of Disbursement MM / DD / YYYY 11 / 04 / 2022	
Mailing Address 2500 VICTORY AVE				
City DALLAS	State TX	Zip Code 75219-7601	FEC Identification Number C [REDACTED]	
Purpose of Disbursement AIRFARE			Transaction ID : <b>SB21B.I1169</b>	
Candidate Name			Amount of Each Disbursement this Period [REDACTED] 466.60	
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) ▼		Memo Item <input checked="" type="checkbox"/>	
State: _____	District: _____			

Full Name (Last, First, Middle Initial) <b>C. HILTON SCOTTSDALE</b>			Date of Disbursement MM / DD / YYYY 11 / 07 / 2022	
Mailing Address 6333 NORTH SCOTTSDALE ROAD				
City SCOTTSDALE	State AZ	Zip Code 85250	FEC Identification Number C [REDACTED]	
Purpose of Disbursement FOOD/BEVERAGE			Transaction ID : <b>SB21B.I1170</b>	
Candidate Name			Amount of Each Disbursement this Period [REDACTED] 8.02	
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) ▼		Memo Item <input checked="" type="checkbox"/>	
State: _____	District: _____			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 0.00
<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)  
**Senate Eagle PAC**

Full Name (Last, First, Middle Initial)

### A. UBER US

Mailing Address 555 MARKET ST

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-2800

Purpose of Disbursement  
TAXI

002

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
11			05			2022			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1170'

Amount of Each Disbursement this Period

[REDACTED] 19.97

Memo Item

Full Name (Last, First, Middle Initial)

### B. UBER US

Mailing Address 555 MARKET ST

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-2800

Purpose of Disbursement  
TAXI

002

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
11			07			2022			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I11705

Amount of Each Disbursement this Period

[REDACTED] 46.73

Memo Item

Full Name (Last, First, Middle Initial)

### C. UBER US

Mailing Address 555 MARKET ST

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-2800

Purpose of Disbursement  
TAXI

002

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
11			07			2022			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1170

Amount of Each Disbursement this Period

[REDACTED] 14.95

Memo Item

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

[REDACTED] 0.00

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

[REDACTED]



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Senate Eagle PAC**

Full Name (Last, First, Middle Initial) <b>A. ANEDOT</b>		Date of Disbursement MM / DD / YYYY 12 / 09 / 2022
Mailing Address 1340 POYDRAS ST SUITE 1770		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I1179!</b>
City NEW ORLEANS	State LA	Zip Code 70112-5204
Purpose of Disbursement MERCHANT ACCOUNT FEES		Amount of Each Disbursement this Period [REDACTED] 145.80
Candidate Name		<input type="checkbox"/> Memo Item
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:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>B. CMDI</b>		Date of Disbursement MM / DD / YYYY 12 / 16 / 2022
Mailing Address 1593 SPRING HILL ROAD SUITE 400		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I1186!</b>
City VIENNA	State VA	Zip Code 22182
Purpose of Disbursement SUBSCRIPTIONS		Amount of Each Disbursement this Period [REDACTED] 250.00
Candidate Name		<input type="checkbox"/> Memo Item
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:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>C. PINNACLE BANK</b>		Date of Disbursement MM / DD / YYYY 12 / 05 / 2022
Mailing Address 150 3RD AVE S STE 900		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I1179</b>
City NASHVILLE	State TN	Zip Code 37201-2034
Purpose of Disbursement BANK FEE		Amount of Each Disbursement this Period [REDACTED] 200.40
Candidate Name		<input type="checkbox"/> Memo Item
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:	Category/Type 001	

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

596.20

**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 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)  
**Senate Eagle PAC**

Full Name (Last, First, Middle Initial) <b>A. SOCKO STRATEGIES LLC</b>			Date of Disbursement MM / DD / YYYY 12 / 09 / 2022	
Mailing Address 1101 30TH STREET NORTHWEST STE 125			FEC Identification Number C [REDACTED]	
City WASHINGTON	State DC	Zip Code 20007	Transaction ID : <b>SB21B.I1180</b>	
Purpose of Disbursement FINANCE CONSULTING		Category/ Type 003	Amount of Each Disbursement this Period 4008.94	
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. SOCKO STRATEGIES LLC</b>			Date of Disbursement MM / DD / YYYY 12 / 20 / 2022	
Mailing Address 1101 30TH STREET NORTHWEST STE 125			FEC Identification Number C [REDACTED]	
City WASHINGTON	State DC	Zip Code 20007	Transaction ID : <b>SB21B.I1181</b>	
Purpose of Disbursement FINANCE CONSULTING		Category/ Type 003	Amount of Each Disbursement this Period 9200.00	
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>C. VOLUNTEERS FOR AMERICA, INC.</b>			Date of Disbursement MM / DD / YYYY 12 / 09 / 2022	
Mailing Address PO BOX 50430			FEC Identification Number C [REDACTED]	
City NASHVILLE	State TN	Zip Code 37205	Transaction ID : <b>SB21B.I1180</b>	
Purpose of Disbursement FINANCE CONSULTING		Category/ Type 003	Amount of Each Disbursement this Period 4000.00	
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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	17208.94
<b>TOTAL</b> This Period (last page this line number only).....▶	19974.40

# 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)  
**Senate Eagle PAC**

Full Name (Last, First, Middle Initial)  
**A. MARSHA FOR SENATE**

Date of Disbursement

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

Mailing Address PO BOX 3750

City  
**BRENTWOOD**

State  
**TN**

Zip Code  
**37024**

FEC Identification Number

**C** C00376939

Purpose of Disbursement  
**CONTRIBUTION**

**011**

Category/  
Type

**Transaction ID : SB23.I11796**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Candidate Name  
**BLACKBURN, MARSHA, , MRS.,**

Office Sought:  House  Senate  President

Disbursement For: 2024  Primary  General  Other (specify) **PRIMARY**

State: **TN** District:

Memo Item

Full Name (Last, First, Middle Initial)  
**B.**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Mailing Address

City

State

Zip Code

FEC Identification Number

**C**

Purpose of Disbursement

Category/  
Type

Amount of Each Disbursement this Period

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

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Memo Item

Full Name (Last, First, Middle Initial)  
**C.**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Mailing Address

City

State

Zip Code

FEC Identification Number

**C**

Purpose of Disbursement

Category/  
Type

Amount of Each Disbursement this Period

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

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Memo Item

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

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

5	0	0	0	0	0	0	0	0	0
5	0	0	0	0	0	0	0	0	0