

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**
ANN PAC

ADDRESS (number and street) **P.O. Box 3535**
 Check if different than previously reported. (ACC) **Ballwin MO 63022**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00531764 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 / / in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / 2019 through / / 2019

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

Signature of Treasurer *Allen, Robert, Michael , ,* [Electronically Filed] Date / / 2019

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

ANN 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="2019"/>	<input type="text" value="32778.75"/>	<input type="text" value="32778.75"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="29223.36"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="46300.00"/>	<input type="text" value="141800.00"/>
(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="75523.36"/>	<input type="text" value="174578.75"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="17525.00"/>	<input type="text" value="116580.39"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="57998.36"/>	<input type="text" value="57998.36"/>
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:

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

ANN 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).....	2300.00	37300.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	2300.00	37300.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	44000.00	104500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	46300.00	141800.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	46300.00	141800.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	46300.00	141800.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	14525.00	69580.39
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	14525.00	69580.39
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3000.00	47000.00
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)) ..	17525.00	116580.39
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	17525.00	116580.39

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)	46300.00	141800.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	46300.00	141800.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	14525.00	69580.39
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	14525.00	69580.39

**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"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<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)
ANN PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KOMAN, JAMES , , ,

Mailing Address **1 CITYPLACE DRIVE**

City SAINT LOUIS	State MO	Zip Code 63141-7014
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) KOMAN PROPERTY	Occupation (for Individual) DEVELOPER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2300.00

Date of Receipt
09 / 09 / 2019

Transaction ID : SA11A.12661

Amount of Each Receipt this Period
2300.00

Memo Item
CONTRIBUTION

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

Mailing Address

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

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

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	2300.00
TOTAL This Period (last page this line number only).....▶	2300.00

**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)
ANN PAC

A. BRADY FOR CONGRESS
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 8277

City THE WOODLANDS	State TX	Zip Code 77387-8277
FEC ID number of contributing federal political committee. C C00311043		
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
MM / DD / YYYY
07 / 19 / 2019
Transaction ID : SA11C.12574

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. OLSON FOR CONGRESS COMMITTEE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 16381

City SUGAR LAND	State TX	Zip Code 77496-6381
FEC ID number of contributing federal political committee. C C00437913		
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 ▼ 1000.00	

Date of Receipt
MM / DD / YYYY
09 / 30 / 2019
Transaction ID : SA11C.13068

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS POLITICAL
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PALLADIAN 1
220 LEIGH FARM RD

City DURHAM	State NC	Zip Code 27707-8110
FEC ID number of contributing federal political committee. C C00077321		
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
MM / DD / YYYY
09 / 30 / 2019
Transaction ID : SA11C.12876

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	6000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (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)
ANN PAC

A. AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL P
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 S. AKARD STREET
 SUITE 1812
 City DALLAS State TX Zip Code 75202-4206
 FEC ID number of contributing federal political committee. **C** C00109017
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt **07 / 19 / 2019**
Transaction ID : SA11C.12575
 Amount of Each Receipt this Period 3000.00
 Memo Item
CONTRIBUTION

B. CHARTER COMMUNICATIONS INC. POLITICAL ACTION COMMITTEE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 ATLANTIC STREET
 10TH FLOOR
 City STAMFORD State CT Zip Code 06901-3512
 FEC ID number of contributing federal political committee. **C** C00426775
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **09 / 30 / 2019**
Transaction ID : SA11C.12873
 Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

C. CITIGROUP INC. PAC - FEDERAL (CITIGROUP PAC-FEDERAL)
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1101 PENNSYLVANIA AVENUE NW SUITE
 City WASHINGTON State DC Zip Code 20004-2524
 FEC ID number of contributing federal political committee. **C** C00008474
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt **09 / 30 / 2019**
Transaction ID : SA11C.12871
 Amount of Each Receipt this Period 1500.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	9500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 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)
ANN PAC

A. CMR POLITICAL ACTION COMMITTEE

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

Mailing Address PO BOX 2485

City SPRINGFIELD	State VA	Zip Code 22152-0485
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FEC ID number of contributing federal political committee. **C** C00469429

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
07		19		2019

Transaction ID : SA11C.12572

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. COMMON SENSE COMMON SOLUTIONS POLITICAL ACTION COMMITTEE

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219-1891
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FEC ID number of contributing federal political committee. **C** C00345058

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2019

Transaction ID : SA11C.12874

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. ELECTING MAJORITY MAKING EFFECTIVE REPUBLICANS

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

Mailing Address PO BOX 183

City ANOKA	State MN	Zip Code 55303-0183
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00592089

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		19		2019

Transaction ID : SA11C.12573

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 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)
ANN PAC

A. EYE OF THE TIGER PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 2485

City SPRINGFIELD	State VA	Zip Code 22152-0485
FEC ID number of contributing federal political committee. C C00467431		
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
MM / DD / YYYY
07 / 19 / 2019
Transaction ID : SA11C.12570

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. GENERAL MOTORS COMPANY POLITICAL ACTION COMMITTEE (GM PAC)
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 25 MASSACHUSETTS AVENUE, NW
SUITE 400

City WASHINGTON	State DC	Zip Code 20001-1427
FEC ID number of contributing federal political committee. C C00076810		
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
MM / DD / YYYY
07 / 29 / 2019
Transaction ID : SA11C.12576

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. MAKING AMERICA PROSPEROUS PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 2485

City SPRINGFIELD	State VA	Zip Code 22152-0485
FEC ID number of contributing federal political committee. C C00445379		
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
MM / DD / YYYY
07 / 19 / 2019
Transaction ID : SA11C.12571

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 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)
ANN PAC

A. NATIONAL MULTIFAMILY HOUSING COUNCIL (NMHC) PAC

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

Mailing Address 1775 EYE STREET, NW
SUITE 100

City WASHINGTON State DC Zip Code 20006-2402

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 30 / 2019

Transaction ID : SA11C.12628

Amount of Each Receipt this Period 1000.00

Memo Item CONTRIBUTION

B. NEW PIONEERS PAC

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

Mailing Address 228 S WASHINGTON ST STE 115

City ALEXANDRIA State VA Zip Code 22314-5404

FEC ID number of contributing federal political committee. **C** C00459123

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 09 / 30 / 2019

Transaction ID : SA11C.12877

Amount of Each Receipt this Period 2500.00

Memo Item CONTRIBUTION

C. THE BOEING COMPANY POLITICAL ACTION COMMITTEE

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

Mailing Address 1200 WILSON BLVD

City ARLINGTON State VA Zip Code 22209-2305

FEC ID number of contributing federal political committee. **C** C00142711

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

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 30 / 2019

Transaction ID : SA11C.13065

Amount of Each Receipt this Period 5000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	8500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 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)
ANN PAC

A. THE GOOD FUND
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5341 FOX RIDGE ROAD

City ROANOKE	State VA	Zip Code 24018-8755
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FEC ID number of contributing federal political committee. **C** C00257956

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		30		2019

Transaction ID : SA11C.12878

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

B. WINE AND SPIRITS WHOLESALERS OF AMERICA, INC. POLITICAL ACTI
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 805 FIFTEENTH ST NW SUITE 430

City WASHINGTON	State DC	Zip Code 20005-2273
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00147173

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		30		2019

Transaction ID : SA11C.12872

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	4500.00
TOTAL This Period (last page this line number only).....▶	44000.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
ANN PAC

A. ALASKANS FOR DON YOUNG

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 2504 FAIRBANKS ST

M M M	/	D D D	/	Y Y Y Y Y
09		20		2019

City ANCHORAGE

State AK

Zip Code 99503-2822

FEC Identification Number

Purpose of Disbursement CONTRIBUTION

011

C C00012229

Transaction ID : SB21B.I7725

Amount of Each Disbursement this Period

Candidate Name YOUNG, DONALD, E, ,

Category/Type

1000.00

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

Memo Item

State: AK District: 01

B. ANDY BARR FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 2059

M M M	/	D D D	/	Y Y Y Y Y
09		20		2019

City LEXINGTON

State KY

Zip Code 40588-2059

FEC Identification Number

Purpose of Disbursement CONTRIBUTION

011

C C00467571

Transaction ID : SB21B.I7727

Amount of Each Disbursement this Period

Candidate Name BARR, GARLAND , ANDY, ,

Category/Type

1000.00

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify)

Memo Item

State: KY District: 06

C. BRIAN MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 3016

M M M	/	D D D	/	Y Y Y Y Y
09		20		2019

City STUART

State FL

Zip Code 34995

FEC Identification Number

Purpose of Disbursement CONTRIBUTION

011

C C00579896

Transaction ID : SB21B.I7730

Amount of Each Disbursement this Period

Candidate Name MAST, BRIAN, , ,

Category/Type

1000.00

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

Memo Item

State: FL District: 18

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

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

3000.00

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
ANN PAC

Full Name (Last, First, Middle Initial)
A. CHELE FARLEY FOR CONGRESS INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	19	/	2019

Mailing Address PO BOX 835

FEC Identification Number

C C00701433

City TUXEDO State NY Zip Code 10987

Transaction ID : SB21B.I7724

Purpose of Disbursement
CONTRIBUTION

011
Category/
Type

Amount of Each Disbursement this Period

1000.00

Candidate Name
FARLEY, CHELE, CHIAVACCI, ,

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

Memo Item

State: NY District: 18

Full Name (Last, First, Middle Initial)
B. FRIENDS OF HAGEDORN

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	20	/	2019

Mailing Address PO BOX 63

FEC Identification Number

C C00550707

City BLUE EARTH State MN Zip Code 56013

Transaction ID : SB21B.I7728

Purpose of Disbursement
CONTRIBUTION

011
Category/
Type

Amount of Each Disbursement this Period

1000.00

Candidate Name
HAGEDORN, JAMES, , ,

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

Memo Item

State: MN District: 01

Full Name (Last, First, Middle Initial)
C. FRIENDS OF DENVER RIGGLEMAN, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	20	/	2019

Mailing Address 9520 ROCKFISH VALLEY HIGHWAY

FEC Identification Number

C C00680488

City AFTON State VA Zip Code 22920

Transaction ID : SB21B.I7729

Purpose of Disbursement
CONTRIBUTION

011
Category/
Type

Amount of Each Disbursement this Period

1000.00

Candidate Name
RIGGLEMAN, DENVER , LEE , , MR. III

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

Memo Item

State: VA District: 05

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

3000.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
ANN PAC

A. MIKE BISHOP FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 883 GREAT OAKS BOULEVARD

M M M	/	D D D	/	Y Y Y Y Y
07		23		2019

City ROCHESTER State MI Zip Code 48307-2748

FEC Identification Number

Purpose of Disbursement CONTRIBUTION

C	C00561001
---	-----------

Candidate Name BISHOP, MIKE, , ,

011
Category/Type

Transaction ID : SB21B.I7580

Amount of Each Disbursement this Period

Office Sought: House Senate President
 Disbursement For: 2020 Primary General Other (specify) ▼
 State: MI District: 08

1000.00

Memo Item

B. RODNEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 305 BEECHWOOD DR

M M M	/	D D D	/	Y Y Y Y Y
07		29		2019

City TAYLORVILL State IL Zip Code 62568-0344

FEC Identification Number

Purpose of Disbursement CONTRIBUTION

C	C00521948
---	-----------

Candidate Name DAVIS, RODNEY, L, ,

011
Category/Type

Transaction ID : SB21B.I7579

Amount of Each Disbursement this Period

Office Sought: House Senate President
 Disbursement For: 2020 Primary General Other (specify) ▼
 State: IL District: 13

2000.00

Memo Item

C. STEVE CHABOT FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 3025 DAYTONA AVE.

M M M	/	D D D	/	Y Y Y Y Y
09		20		2019

City CINCINNATI State OH Zip Code 45211

FEC Identification Number

Purpose of Disbursement CONTRIBUTION

C	C00301838
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Candidate Name CHABOT, STEVE, , ,

011
Category/Type

Transaction ID : SB21B.I7726

Amount of Each Disbursement this Period

Office Sought: House Senate President
 Disbursement For: 2020 Primary General Other (specify) ▼
 State: OH District: 01

2500.00

Memo Item

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

5500.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
ANN PAC

Full Name (Last, First, Middle Initial) A. COMMERCE BANKSHARES, INC.		Date of Disbursement MM / DD / YYYY 07 / 31 / 2019
Mailing Address 14317 MANCHESTER RD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I7578
City BALLWIN	State MO	Zip Code 63011-4048
Purpose of Disbursement BANK FEE		Category/Type 001
Candidate Name		Amount of Each Disbursement this Period 5.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. COMMERCE BANKSHARES, INC.		Date of Disbursement MM / DD / YYYY 08 / 30 / 2019
Mailing Address 14317 MANCHESTER RD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I7600
City BALLWIN	State MO	Zip Code 63011-4048
Purpose of Disbursement BANK FEE		Category/Type 001
Candidate Name		Amount of Each Disbursement this Period 5.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. COMMERCE BANKSHARES, INC.		Date of Disbursement MM / DD / YYYY 08 / 30 / 2019
Mailing Address 14317 MANCHESTER RD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I7601
City BALLWIN	State MO	Zip Code 63011-4048
Purpose of Disbursement BANK FEE		Category/Type 001
Candidate Name		Amount of Each Disbursement this Period 30.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

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

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

40.00
[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)
ANN PAC

Full Name (Last, First, Middle Initial) A. COMMERCE BANKSHARES, INC.		Date of Disbursement MM / DD / YYYY 09 / 30 / 2019
Mailing Address 14317 MANCHESTER RD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I7721
City BALLWIN	State MO	Zip Code 63011-4048
Purpose of Disbursement BANK FEES	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 5.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. COMMERCE BANKSHARES, INC.		Date of Disbursement MM / DD / YYYY 09 / 30 / 2019
Mailing Address 14317 MANCHESTER RD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I7722
City BALLWIN	State MO	Zip Code 63011-4048
Purpose of Disbursement BANK FEE	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 30.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. CRIMSON		Date of Disbursement MM / DD / YYYY 07 / 10 / 2019
Mailing Address 1593 SPRING HILL RD SUITE 400		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I7581
City VIENNA	State VA	Zip Code 22182
Purpose of Disbursement DATA PROCESSING SERVICES	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 250.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

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

285.00

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)
ANN PAC

Full Name (Last, First, Middle Initial) A. CRIMSON		Date of Disbursement MM / DD / YYYY 08 / 12 / 2019
Mailing Address 1593 SPRING HILL RD SUITE 400		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I7603
City VIENNA	State VA	Zip Code 22182
Purpose of Disbursement DATA PROCESSING SERVICES		Category/Type 001
Candidate Name		Amount of Each Disbursement this Period [REDACTED] 250.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. CRIMSON		Date of Disbursement MM / DD / YYYY 09 / 11 / 2019
Mailing Address 1593 SPRING HILL RD SUITE 400		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I7731
City VIENNA	State VA	Zip Code 22182
Purpose of Disbursement DATA PROCESSING SERVICES		Category/Type 001
Candidate Name		Amount of Each Disbursement this Period [REDACTED] 250.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. GULA GRAHAM GROUP		Date of Disbursement MM / DD / YYYY 08 / 22 / 2019
Mailing Address 499 S CAPITOL ST SW STE 420		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I7604
City WASHINGTON	State DC	Zip Code 20003-4027
Purpose of Disbursement FUNDRAISING		Category/Type 003
Candidate Name		Amount of Each Disbursement this Period [REDACTED] 2200.00
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

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

2700.00

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

14525.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
ANN PAC

Full Name (Last, First, Middle Initial)

A. BYRNE FOR SENATE, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2019

Mailing Address PO BOX 3887

FEC Identification Number

C	C00697417
---	-----------

City MONTGOMERY State AL Zip Code 36109

Purpose of Disbursement
CONTRIBUTION

011
Category/ Type

Transaction ID : SB23.I7723

Amount of Each Disbursement this Period

3000.00

Candidate Name
BYRNE, BRADLEY, ROBERTS, ,

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

Memo Item

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

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

Mailing Address

FEC Identification Number

C	
---	--

City State Zip Code

Purpose of Disbursement

Category/ Type

Amount of Each Disbursement this Period

--

Candidate Name

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

Mailing Address

FEC Identification Number

C	
---	--

City State Zip Code

Purpose of Disbursement

Category/ Type

Amount of Each Disbursement this Period

--

Candidate Name

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

Memo Item

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

3000.00

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

3000.00
