

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

ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC

ADDRESS (number and street) 7575 E FULTON ROAD

Attn: Max Frantz 52-2F

Check if different than previously reported. (ACC)

ADA MI 49355

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

C C00034884

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

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

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

Election on M M / D D / Y Y Y Y Y Y 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 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 07 / 01 / 2020 through 09 / 30 / 2020

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

Frantz, Max, , ,

Type or Print Name of Treasurer _____

Signature of Treasurer Frantz, Max, , , [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 10 / 13 / 2020

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

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

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>	<input type="text" value=""/>	<input type="text" value="69440.05"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="124421.75"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="4145.40"/>	<input type="text" value="68127.10"/>
(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="128567.15"/>	<input type="text" value="137567.15"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="54500.00"/>	<input type="text" value="63500.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="74067.15"/>	<input type="text" value="74067.15"/>
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

ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC

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).....	4059.06	67853.69
(ii) Unitemized	86.34	273.41
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	4145.40	68127.10
(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)	4145.40	68127.10
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)).....▶	4145.40	68127.10
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	4145.40	68127.10

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	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	52500.00	61500.00
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).....	2000.00	2000.00
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)) ..	54500.00	63500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	54500.00	63500.00

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)	4145.40	68127.10
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4145.40	68127.10
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
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	0.00

**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 21
	(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)
ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC

A. Alfano Briggs, Heather, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 419 New Jersey Avenue SE
 City Washington State DC Zip Code 20003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Alticor Occupation (for Individual) Lead Advisor Public Policy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 190.00

Date of Receipt 09 / 30 / 2020
Transaction ID : SA11AI.7489
 Amount of Each Receipt this Period 60.00
 Memo Item Support

B. Bloemendaal, Dirk, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7575 Fulton Street East
 City Ada State MI Zip Code 49355
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Alticor Occupation (for Individual) Government Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 09 / 30 / 2020
Transaction ID : SA11AI.7480
 Amount of Each Receipt this Period 120.00
 Memo Item Support

C. Elliott, Bob, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5314 Stuart
 City Kentwood State MI Zip Code 49508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Alticor Inc. Occupation (for Individual) Manager - IT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 365.37

Date of Receipt 09 / 30 / 2020
Transaction ID : SA11AI.7479
 Amount of Each Receipt this Period 115.38
 Memo Item Support

SUBTOTAL of Receipts This Page (optional).....	295.38
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 21
<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)
ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Frantz, Max, , ,		Date of Receipt MM / DD / YYYY 09 / 30 / 2020
Mailing Address 7575 E Fulton Road Attn: Max Frantz 52-2F		Transaction ID : SA11AI.7475
City Ada	State MI	Zip Code 49355
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 60.00	
Name of Employer (for Individual) Amway	Occupation (for Individual) Change Management & ALTIPAC Treas	<input type="checkbox"/> Memo Item Support
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 190.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Gill, Brian, T, ,		Date of Receipt MM / DD / YYYY 09 / 30 / 2020
Mailing Address 7575 Fulton Street East		Transaction ID : SA11AI.7490
City Ada	State MI	Zip Code 49355
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 90.00	
Name of Employer (for Individual) Alticor	Occupation (for Individual) Director - Legal	<input type="checkbox"/> Memo Item Support
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Hanenberg, Stephen, , ,		Date of Receipt MM / DD / YYYY 09 / 30 / 2020
Mailing Address 2515 Mason Ridge Ct		Transaction ID : SA11AI.7486
City Grand Rapids	State MI	Zip Code 49525
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 346.14	
Name of Employer (for Individual) Amway Global Services	Occupation (for Individual) VP - Talent Management	<input type="checkbox"/> Memo Item Support
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1096.11	

SUBTOTAL of Receipts This Page (optional).....	496.14
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 21
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC

A. Huyser, Brandi, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7575 Fulton Street East
 City Ada State MI Zip Code 49355
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Amway International Inc. Occupation (for Individual) Director - XS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 182.59

Date of Receipt 09 / 30 / 2020
Transaction ID : SA11AI.7477
 Amount of Each Receipt this Period 57.66
 Memo Item Support

B. Justice, Cary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2328 Gatetree Lane SE
 City Grand Rapids State MI Zip Code 49546
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Alticor, Inc Occupation (for Individual) Director Government Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1520.00

Date of Receipt 09 / 30 / 2020
Transaction ID : SA11AI.7487
 Amount of Each Receipt this Period 480.00
 Memo Item Support

C. Meyers, Bruce, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 836 North State Road
 City Belding State MI Zip Code 48809
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Access Business Group Occupation (for Individual) Group Leader
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 365.37

Date of Receipt 09 / 30 / 2020
Transaction ID : SA11AI.7471
 Amount of Each Receipt this Period 115.38
 Memo Item Support

SUBTOTAL of Receipts This Page (optional).....	653.04
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 21
<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)
ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC

A. Mohr, Mike, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7629 Silverthorn Drive

City Ada	State MI	Zip Code 49301
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Alticor Inc	Occupation (for Individual) Chief Legal Officer
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
760.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2020

Transaction ID : SA11AI.7484

Amount of Each Receipt this Period
240.00

Memo Item Support

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

Mailing Address 1544 Ballybunion Court

City Grand Rapids	State MI	Zip Code 49546
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Alticor Inc.	Occupation (for Individual) Chief Administrative Officer
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
730.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2020

Transaction ID : SA11AI.7482

Amount of Each Receipt this Period
230.76

Memo Item Support

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

Mailing Address 2929 Bonnell Ave SE

City East Grand Rapids	State MI	Zip Code 49506
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Alticor	Occupation (for Individual) Chief Executive Officer
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3653.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2020

Transaction ID : SA11AI.7492

Amount of Each Receipt this Period
1153.80

Memo Item Support

SUBTOTAL of Receipts This Page (optional).....	1624.56
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 21
<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)
ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC

A. Repins, Rainey, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10916 Whispering Valley Lane

City Middleville	State MI	Zip Code 49333
---------------------	-------------	-------------------

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

Name of Employer (for Individual) Alticor Inc.	Occupation (for Individual) Director - Legal
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
365.37

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2020

Transaction ID : SA11AI.7476

Amount of Each Receipt this Period
115.38

Memo Item
Support

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

Mailing Address 7575 Fulton Street East
55-1H

City Ada	State MI	Zip Code 49355
-------------	-------------	-------------------

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

Name of Employer (for Individual) Alticor Inc.	Occupation (for Individual) Director - Global Trade
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
292.22

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2020

Transaction ID : SA11AI.7472

Amount of Each Receipt this Period
92.28

Memo Item
Support

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

Mailing Address 6269 Clubview Court

City Ada	State MI	Zip Code 49301
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Alticor Inc.	Occupation (for Individual) VP - Legal
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
365.37

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2020

Transaction ID : SA11AI.7481

Amount of Each Receipt this Period
115.38

Memo Item
Support

SUBTOTAL of Receipts This Page (optional).....	323.04
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 11 OF 21
	(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

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NAME OF COMMITTEE (In Full)
ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC

A. Sundman, Patricia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7575 Fulton Street East
 City Ada State MI Zip Code 49355
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Amway North America Occupation (for Individual) Supervisor - Call Center
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 365.37

Date of Receipt 09 / 30 / 2020
Transaction ID : SA11AI.7473
 Amount of Each Receipt this Period 115.38
 Memo Item Support

B. Telliga, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 419 New Jersey Avenue SE
 City Washington State DC Zip Code 20003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Alticor Occupation (for Individual) Sr Principal - Public Policy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 730.74

Date of Receipt 09 / 30 / 2020
Transaction ID : SA11AI.7491
 Amount of Each Receipt this Period 230.76
 Memo Item Support

C. Urbytes, Mitchell, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1378 Spinnaker Court
 City Holland State MI Zip Code 49424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Alticor Inc. Occupation (for Individual) Senior Brand Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 09 / 30 / 2020
Transaction ID : SA11AI.7474
 Amount of Each Receipt this Period 90.00
 Memo Item Support

SUBTOTAL of Receipts This Page (optional).....	436.14
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 21
	<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)
ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC

A. VanderMey, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7122 Peddler Lake Road
 City Clarksville State MI Zip Code 48815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Alticor Inc. Occupation (for Individual) Manager - IT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 365.37

Date of Receipt 09 / 30 / 2020
Transaction ID : SA11AI.7488
 Amount of Each Receipt this Period 115.38
 Memo Item Support

B. Wiegand, Carl, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4505 Summit Forest Drive
 City Rockford State MI Zip Code 49341
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Alticor Inc. Occupation (for Individual) VP - IS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 365.37

Date of Receipt 09 / 30 / 2020
Transaction ID : SA11AI.7478
 Amount of Each Receipt this Period 115.38
 Memo Item Support

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).....▶	230.76
TOTAL This Period (last page this line number only).....▶	4059.06

**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)
ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC

Full Name (Last, First, Middle Initial) A. ANNA ESHOO FOR CONGRESS, ANNA , , ,		Date of Disbursement MM / DD / YYYY 07 / 07 / 2020
Mailing Address 555 CAPITOL MALL, SUITE 400		FEC Identification Number C [] Transaction ID : SB23.7504 Amount of Each Disbursement this Period [] 2500.00
City SACRAMENTO	State CA	Zip Code 95814
Purpose of Disbursement Support	Category/Type []	
Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input checked="" 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: CA District: 18		

Full Name (Last, First, Middle Initial) B. BERGMANFORCONGRESS, JACK , , ,		Date of Disbursement MM / DD / YYYY 07 / 07 / 2020
Mailing Address 3585 BUNKER HILL RD, #434		FEC Identification Number C [] Transaction ID : SB23.7506 Amount of Each Disbursement this Period [] 2500.00
City ACME	State MI	Zip Code 49610
Purpose of Disbursement Support	Category/Type []	
Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input checked="" 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: MI District: 01		

Full Name (Last, First, Middle Initial) C. CATHY MCMORRIS RODGERS FOR CON, CATHY, , ,		Date of Disbursement MM / DD / YYYY 09 / 22 / 2020
Mailing Address BOX 137		FEC Identification Number C [] Transaction ID : SB23.7539 Amount of Each Disbursement this Period [] 2500.00
City SPOKANE	State WA	Zip Code 99210
Purpose of Disbursement Support - CATHY MCMORRIS RODGERS FOR CONGRESS	Category/Type []	
Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: WA District: 05		

SUBTOTAL of Disbursements This Page (optional).....▶	[] 7500.00
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 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)
ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC

Full Name (Last, First, Middle Initial) A. CURTIS FOR CONGRESS, JOHN, , ,		Date of Disbursement MM / DD / YYYY 07 / 27 / 2020
Mailing Address 370 EAST SOUTH TEMPLE, SUITE 580		FEC Identification Number C Transaction ID : SB23.7520 Amount of Each Disbursement this Period 2500.00
City SALT LAKE CITY	State UT	
Zip Code 84111	Purpose of Disbursement Support	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input checked="" 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: UT District: 03		

Full Name (Last, First, Middle Initial) B. DAN NEWHOUSE FOR CONGRESS, DAN, , ,		Date of Disbursement MM / DD / YYYY 09 / 22 / 2020
Mailing Address PO BOX 10949		FEC Identification Number C Transaction ID : SB23.7543 Amount of Each Disbursement this Period 2000.00
City YAKIMA	State WA	
Zip Code 98909	Purpose of Disbursement Support	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: WA District: 04		

Full Name (Last, First, Middle Initial) C. FRIENDS OF BEN MCADAMS, BEN, , ,		Date of Disbursement MM / DD / YYYY 09 / 22 / 2020
Mailing Address P O BOX 522167		FEC Identification Number C Transaction ID : SB23.7537 Amount of Each Disbursement this Period 2500.00
City SLC	State UT	
Zip Code 84152	Purpose of Disbursement Support	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: UT District: 04		

SUBTOTAL of Disbursements This Page (optional).....▶	7000.00
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 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)
ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC

A. GUTHRIE FOR CONGRESS, BRETT, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 9639

City BOWLING GREEN State KY Zip Code 42102

Purpose of Disbursement Support

Candidate Name

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: KY District: 02

Date of Disbursement: 09 / 22 / 2020

FEC Identification Number: C

Transaction ID : SB23.7531

Amount of Each Disbursement this Period: 2500.00

Memo Item

B. HUDSON FOR CONGRESS, RICHARD, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 5053

City CONCORD State NC Zip Code 28027

Purpose of Disbursement Support

Candidate Name

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: NC District: 08

Date of Disbursement: 09 / 22 / 2020

FEC Identification Number: C

Transaction ID : SB23.7535

Amount of Each Disbursement this Period: 2500.00

Memo Item

C. JAIME FOR CONGRESS, JAIME, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1614

City RIDGEFIELD State WA Zip Code 98642

Purpose of Disbursement Support

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: WA District: 03

Date of Disbursement: 07 / 27 / 2020

FEC Identification Number: C

Transaction ID : SB23.7514

Amount of Each Disbursement this Period: 1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 6000.00

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 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)
ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC

A. JAIME FOR CONGRESS, JAIME, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1614

City RIDGEFIELD State WA Zip Code 98642

Purpose of Disbursement Support

Candidate Name

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: WA District: 03

Date of Disbursement: 09 / 22 / 2020

FEC Identification Number: C

Transaction ID : SB23.7533

Amount of Each Disbursement this Period: 2000.00

Memo Item

B. JONI FOR IOWA, JONI, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 93441

City DES MOINES State IA Zip Code 50393

Purpose of Disbursement Support

Candidate Name

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: IA District: 00

Date of Disbursement: 09 / 22 / 2020

FEC Identification Number: C

Transaction ID : SB23.7527

Amount of Each Disbursement this Period: 2500.00

Memo Item

C. JOSH GOTTHEIMER FOR CONGRESS, JOSH, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 584

City RIDGEWOOD State NJ Zip Code 07451

Purpose of Disbursement Support

Candidate Name

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: NJ District: 05

Date of Disbursement: 09 / 22 / 2020

FEC Identification Number: C

Transaction ID : SB23.7529

Amount of Each Disbursement this Period: 1000.00

Memo Item

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

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

5500.00

**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)
ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC

A. LISA MCCLAIN FOR CONGRESS, LISA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 11540 34 MILE ROAD

City BRUCE TOWNSHIP State MI Zip Code 48065

Purpose of Disbursement Support

Candidate Name

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: MI District: 10

Date of Disbursement: 09 / 22 / 2020

FEC Identification Number: C

Transaction ID : SB23.7554

Amount of Each Disbursement this Period: 2500.00

Memo Item

B. MOOLENAAR FOR CONGRESS, JOHN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 5915 EASTMAN AVENUE SUITE 100

City MIDLAND State MI Zip Code 48640

Purpose of Disbursement Support

Candidate Name

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: MI District: 04

Date of Disbursement: 09 / 22 / 2020

FEC Identification Number: C

Transaction ID : SB23.7541

Amount of Each Disbursement this Period: 2500.00

Memo Item

C. PETER MEIJER FOR CONGRESS, PETER, , ,

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 68554

City GRAND RAPIDS State MI Zip Code 49516

Purpose of Disbursement Support

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: MI District: 03

Date of Disbursement: 09 / 02 / 2020

FEC Identification Number: C

Transaction ID : SB23.7522

Amount of Each Disbursement this Period: 5000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 10000.00

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 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)
ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC

A. TONY CARDENAS FOR CONGRESS, TONY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 15320

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement Support

Candidate Name

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: CA District: 29

Date of Disbursement: 09 / 22 / 2020

FEC Identification Number: C

Transaction ID : SB23.7525

Amount of Each Disbursement this Period: 2500.00

Memo Item

B. UPTON FOR ALL OF US, FRED, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 490

City SAINT JOSEPH State MI Zip Code 49085

Purpose of Disbursement Support

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: MI District: 06

Date of Disbursement: 07 / 27 / 2020

FEC Identification Number: C

Transaction ID : SB23.7516

Amount of Each Disbursement this Period: 1000.00

Memo Item

C. UPTON FOR ALL OF US, FRED, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 490

City SAINT JOSEPH State MI Zip Code 49085

Purpose of Disbursement Support

Candidate Name

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: MI District: 06

Date of Disbursement: 09 / 22 / 2020

FEC Identification Number: C

Transaction ID : SB23.7547

Amount of Each Disbursement this Period: 5000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 8500.00

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 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)
ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC

Full Name (Last, First, Middle Initial) A. WALBERG FOR CONGRESS, TIM, , ,		Date of Disbursement MM / DD / YYYY 07 / 07 / 2020
Mailing Address PO BOX 1362		FEC Identification Number C [] Transaction ID : SB23.7510 Amount of Each Disbursement this Period [] 1000.00
City JACKSON	State MI	Zip Code 49204
Purpose of Disbursement Support		Category/Type []
Candidate Name		
Office Sought: <input checked="" 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: MI	District: 07	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. WALBERG FOR CONGRESS, TIM, , ,		Date of Disbursement MM / DD / YYYY 09 / 22 / 2020
Mailing Address PO BOX 1362		FEC Identification Number C [] Transaction ID : SB23.7550 Amount of Each Disbursement this Period [] 2500.00
City JACKSON	State MI	Zip Code 49204
Purpose of Disbursement Support		Category/Type []
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MI	District: 07	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. YOUNG FOR IOWA, INC., DAVID, , ,		Date of Disbursement MM / DD / YYYY 09 / 22 / 2020
Mailing Address PO BOX 162		FEC Identification Number C [] Transaction ID : SB23.7556 Amount of Each Disbursement this Period [] 1000.00
City VAN METER	State IA	Zip Code 50261
Purpose of Disbursement Support		Category/Type []
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IA	District: 03	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	[] 4500.00
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 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)
ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC

Full Name (Last, First, Middle Initial)

A. YOUNG FOR IOWA INC. , DAVID, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		07		2020

Mailing Address PO BOX 162

FEC Identification Number

C []

Transaction ID : SB23.7502
Amount of Each Disbursement this Period

[] 1000.00

Memo Item

City VAN METER State IA Zip Code 50261

Purpose of Disbursement Support

[]
Category/
Type

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: IA District: 03

Full Name (Last, First, Middle Initial)

B. YOUNG KIM FOR CONGRESS, YOUNG, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		22		2020

Mailing Address PO BOX 2186

FEC Identification Number

C []

Transaction ID : SB23.7552
Amount of Each Disbursement this Period

[] 2500.00

Memo Item

City FULLERTON State CA Zip Code 92837

Purpose of Disbursement Support

[]
Category/
Type

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2020 Primary General Other (specify) ▼
 State: CA District: 39

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

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

Mailing Address

FEC Identification Number

C []

Amount of Each Disbursement this Period

[]

Memo Item

City State Zip Code

Purpose of Disbursement

[]
Category/
Type

Candidate Name

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

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

[] 3500.00

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

[] 52500.00

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

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NAME OF COMMITTEE (In Full)
ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC

Full Name (Last, First, Middle Initial) A. Iowa Retail Political Action Committee		Date of Disbursement M M / D D / Y Y Y Y Y Y 09 / 22 / 2020	
Mailing Address 10555 New York Ave. Ste 102		FEC Identification Number C [] Transaction ID : SB29.7493 Amount of Each Disbursement this Period [] 2000.00	
City Urbandale	State IA	Zip Code 50322	Category/ Type []
Purpose of Disbursement Non-Federal contribution		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			
Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y Y Y	
Mailing Address		FEC Identification Number C [] Amount of Each Disbursement this Period []	
City	State	Zip Code	Category/ Type []
Purpose of Disbursement		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			
Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y Y Y	
Mailing Address		FEC Identification Number C [] Amount of Each Disbursement this Period []	
City	State	Zip Code	Category/ Type []
Purpose of Disbursement		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			
SUBTOTAL of Disbursements This Page (optional)..... ▶		[] 2000.00	
TOTAL This Period (last page this line number only)..... ▶		[] 2000.00	