

# 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  
Good Day PAC

ADDRESS (number and street) PO Box 10381  
▼  
 Check if different than previously reported. (ACC)  
Pittsburgh PA 15234

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
C C00672667 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 01 / 01 / 2023 through M M / D D / Y Y Y Y Y Y 06 / 30 / 2023

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

Signature of Treasurer *Lamb, Conor, , ,* [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 07 / 11 / 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

Good Day PAC

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

|  | COLUMN A<br>This Period               | COLUMN B<br>Calendar Year-to-Date     |
|--|---------------------------------------|---------------------------------------|
| 6. (a) Cash on Hand<br>January 1, <input type="text" value="2023"/>  |                                       | <input type="text" value="75819.87"/> |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....  | <input type="text" value="75819.87"/> |                                       |
| (c) Total Receipts (from Line 19) .....  | <input type="text" value="5052.00"/>  | <input type="text" value="5052.00"/>  |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | <input type="text" value="80871.87"/> | <input type="text" value="80871.87"/> |
| 7. Total Disbursements (from Line 31).....   | <input type="text" value="66164.51"/> | <input type="text" value="66164.51"/> |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)).....                         | <input type="text" value="14707.36"/> | <input type="text" value="14707.36"/> |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | <input type="text" value="0.00"/>     |                                       |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>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

Good Day PAC

Report Covering the Period: From: 01 / 01 / 2023 To: 06 / 30 / 2023

| I. Receipts   | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:  |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees   |                               |                                   |
| (i) Itemized (use Schedule A).....  | 5000.00                       | 5000.00                           |
| (ii) Unitemized .....   | 52.00                         | 52.00                             |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶   | 5052.00                       | 5052.00                           |
| (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) .....  | 5052.00                       | 5052.00                           |
| 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)).....▶                         | 5052.00                       | 5052.00                           |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶                                   | 5052.00                       | 5052.00                           |

**DETAILED SUMMARY PAGE**  
of Disbursements

| II. Disbursements  | COLUMN A<br>Total This Period | COLUMN B<br>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 .....   | 19164.51                      | 19164.51                          |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 19164.51                      | 19164.51                          |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 9000.00                       | 9000.00                           |
| 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).....                                 | 38000.00                      | 38000.00                          |
| 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)) ..      | 66164.51                      | 66164.51                          |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 66164.51                      | 66164.51                          |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

| <b>III. Net Contributions/<br/>Operating Expenditures</b>                            | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>Calendar Year-to-Date</b> |
|--|---------------------------------------|---|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....        | 5052.00                               | 5052.00                                   |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                            | 0.00                                  | 0.00                                      |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....    | 5052.00                               | 5052.00                                   |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... | 19164.51                              | 19164.51                                  |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                 | 0.00                                  | 0.00                                      |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....              | 19164.51                              | 19164.51                                  |

**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 17  
(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)  
**Good Day PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Grealish, Thomas, , ,

Mailing Address 920 Fort Duquesne Blvd

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>Pittsburgh | State<br>PA | Zip Code<br>15222 |
|--------------------|-------------|-------------------|

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

|   |  |
|---|--|
| Name of Employer (for Individual)<br>Henderson Brothers | Occupation (for Individual)<br>President |
|---|--|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05  | / | 10  | / | 2023    |

**Transaction ID : 11ai-000048957**

Amount of Each Receipt this Period  
5000.00

Memo Item

Earmarked through ACT Blue

**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 |
|     | / |     | / |         |

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 |
|     | / |     | / |         |

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).....▶ | 5000.00 |

**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)  
**Good Day PAC**

**A. Storage Sense - Upper St. Clair**

Full Name (Last, First, Middle Initial)

Mailing Address 1100 Boyce Rd

City Upper St Clair State PA Zip Code 15241

Purpose of Disbursement Storage Rental

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 25 / 2023

FEC Identification Number: C

Transaction ID : 21b-04-00216

Amount of Each Disbursement this Period: 220.05

Memo Item

**B. CommonCentsConsulting, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 313

City Maricopa State AZ Zip Code 85139

Purpose of Disbursement Compliance and Accounting Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 09 / 2023

FEC Identification Number: C

Transaction ID : 21b-04-00221

Amount of Each Disbursement this Period: 250.00

Memo Item

**C. CommonCentsConsulting, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 313

City Maricopa State AZ Zip Code 85139

Purpose of Disbursement Compliance and Accounting Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 09 / 2023

FEC Identification Number: C

Transaction ID : 21b-04-00221

Amount of Each Disbursement this Period: 250.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 720.05

**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)  
**Good Day PAC**

Full Name (Last, First, Middle Initial)  
**A. CommonCentsConsulting, LLC**

Mailing Address PO Box 313

City Maricopa State AZ Zip Code 85139

Purpose of Disbursement Compliance and Accounting Services

Candidate Name

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

State: District:

Date of Disbursement: 03 / 09 / 2023

FEC Identification Number: C

Transaction ID : 21b-04-00221

Amount of Each Disbursement this Period: 250.00

Memo Item

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

Mailing Address PO Box 313

City Maricopa State AZ Zip Code 85139

Purpose of Disbursement Compliance and Accounting Services

Candidate Name

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

State: District:

Date of Disbursement: 03 / 09 / 2023

FEC Identification Number: C

Transaction ID : 21b-04-00221

Amount of Each Disbursement this Period: 250.00

Memo Item

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

Mailing Address ATTN Client Accounting  
PO Box 24643

City Seattle State WA Zip Code 98124-0643

Purpose of Disbursement Legal Fees

Candidate Name

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

State: District:

Date of Disbursement: 03 / 09 / 2023

FEC Identification Number: C

Transaction ID : 21b-04-00221

Amount of Each Disbursement this Period: 677.87

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1177.87

**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)

**Good Day PAC**

Full Name (Last, First, Middle Initial)

**A. Perkins Coie LLP**

Mailing Address ATTN Client Accounting  
PO Box 24643

City  
Seattle

State  
WA

Zip Code  
98124-0643

Purpose of Disbursement  
Legal Fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 0 | 9 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

**Transaction ID : 21b-04-00222**

Amount of Each Disbursement this Period

10287.97

Memo Item

Full Name (Last, First, Middle Initial)

**B. Chase Card Services**

Mailing Address PO Box 94014

City  
Palatine

State  
IL

Zip Code  
60094

Purpose of Disbursement  
Credit Card Payment - See Memos if itemized

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

Category/  
Type

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 2 | 9 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

**Transaction ID : 21b-04-00223**

Amount of Each Disbursement this Period

391.62

Memo Item

Full Name (Last, First, Middle Initial)

**C. Storage Sense - Upper St. Clair**

Mailing Address 1100 Boyce Rd

City  
Upper St Clair

State  
PA

Zip Code  
15241

Purpose of Disbursement  
Storage Rental

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 2 | 9 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

**Transaction ID : 21b-04-00223**

Amount of Each Disbursement this Period

391.62

Memo Item

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

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

10679.59

**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)  
**Good Day PAC**

Full Name (Last, First, Middle Initial)  
**A. Perkins Coie LLP**

Date of Disbursement  
MM / DD / YYYY  
04 / 05 / 2023

Mailing Address ATTN Client Accounting  
PO Box 24643

City Seattle State WA Zip Code 98124-0643

Purpose of Disbursement  
Legal Fees

Candidate Name

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

State: District:

FEC Identification Number  
**C**  
Transaction ID : 21b-04-00225  
Amount of Each Disbursement this Period  
121.12

Memo Item

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

Date of Disbursement  
MM / DD / YYYY  
05 / 03 / 2023

Mailing Address PO Box 94014

City Palatine State IL Zip Code 60094

Purpose of Disbursement  
Credit Card Payment - See Memos if itemized

Candidate Name

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

State: District:

FEC Identification Number  
**C**  
Transaction ID : 21b-04-00235  
Amount of Each Disbursement this Period  
408.74

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Storage Sense - Upper St. Clair**

Date of Disbursement  
MM / DD / YYYY  
05 / 03 / 2023

Mailing Address 1100 Boyce Rd

City Upper St Clair State PA Zip Code 15241

Purpose of Disbursement  
Storage Rental

Candidate Name

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

State: District:

FEC Identification Number  
**C**  
Transaction ID : 21b-04-00235  
Amount of Each Disbursement this Period  
204.37

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 529.86

**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)

**Good Day PAC**

Full Name (Last, First, Middle Initial)

**A. Storage Sense - Upper St. Clair**

Mailing Address 1100 Boyce Rd

City  
Upper St Clair

State  
PA

Zip Code  
15241

Purpose of Disbursement  
Storage Rental

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 |
| 0 | 5 |   | 0 | 3 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

**C** [ ]  
**Transaction ID : 21b-04-00235**  
 Amount of Each Disbursement this Period  
 [ ] 204.37

Memo Item

Full Name (Last, First, Middle Initial)

**B. CommonCentsConsulting, LLC**

Mailing Address PO Box 313

City  
Maricopa

State  
AZ

Zip Code  
85139

Purpose of Disbursement  
Compliance and Accounting Services

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 |
| 0 | 5 |   | 0 | 4 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

**C** [ ]  
**Transaction ID : 21b-04-00228**  
 Amount of Each Disbursement this Period  
 [ ] 250.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. CommonCentsConsulting, LLC**

Mailing Address PO Box 313

City  
Maricopa

State  
AZ

Zip Code  
85139

Purpose of Disbursement  
Compliance and Accounting Services

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 |
| 0 | 5 |   | 0 | 4 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

**C** [ ]  
**Transaction ID : 21b-04-00228**  
 Amount of Each Disbursement this Period  
 [ ] 250.00

Memo Item

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

|     |        |
|-----|--------|
| [ ] | 500.00 |
|-----|--------|

**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)

**Good Day PAC**

Full Name (Last, First, Middle Initial)

### A. Pennsylvania Democratic Party

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05    |   | 24    |   | 2023      |

Mailing Address 229 State St

FEC Identification Number

|   |           |
|---|-----------|
| C | C00167130 |
|---|-----------|

**Transaction ID : 21b-04-00241**

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Memo Item

City Harrisburg State PA Zip Code 17101

Purpose of Disbursement Contribution

|               |
|---------------|
| Category/Type |
|---------------|

Candidate Name

**Pennsylvania Democratic Party**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

### B. CommonCentsConsulting, LLC

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    |   | 06    |   | 2023      |

Mailing Address PO Box 313

FEC Identification Number

|   |  |
|---|--|
| C |  |
|---|--|

**Transaction ID : 21b-04-00244**

Amount of Each Disbursement this Period

|        |
|--------|
| 250.00 |
|--------|

Memo Item

City Maricopa State AZ Zip Code 85139

Purpose of Disbursement Compliance and Accounting Services

|               |
|---------------|
| Category/Type |
|---------------|

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

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)..... ▶

|         |
|---------|
| 5250.00 |
|---------|

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

|          |
|----------|
| 18857.37 |
|----------|

**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)

**Good Day PAC**

Full Name (Last, First, Middle Initial)

**A. Chris Deluzio for Congress**

Mailing Address PO BOX 16210

City  
PITTSBURGH

State  
PA

Zip Code  
15242

Purpose of Disbursement  
Contribution

Candidate Name

**Deluzio, Chris, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: PA District: 17

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 0 | 3 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

**C** C00787648

**Transaction ID : 23-04-00232-I**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Cartwright for Congress**

Mailing Address PO Box 414

City  
Scranton

State  
PA

Zip Code  
18501

Purpose of Disbursement  
Contribution

Candidate Name

**Cartwright, Matthew, A., ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify)

State: PA District: 08

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 0 | 3 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

**C** C00509968

**Transaction ID : 23-04-00231-C**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Susan Wild for Congress**

Mailing Address 1636 N Cedar Crest Blvd #183

City  
Allentown

State  
PA

Zip Code  
18104

Purpose of Disbursement  
Contribution

Candidate Name

**Wild, Susan, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: PA District: 07

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 0 | 3 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

**C** C00658567

**Transaction ID : 23-04-00230-**

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)..... ▶

3000.00

**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)

**Good Day PAC**

Full Name (Last, First, Middle Initial)

**A. Bob Casey for Senate INC**

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05    |   | 03    |   | 2023      |

Mailing Address PO Box 58746

FEC Identification Number

|   |           |
|---|-----------|
| C | C00431056 |
|---|-----------|

City Philadelphia State PA Zip Code 19102

**Transaction ID : 23-04-00233-I**

Purpose of Disbursement Contribution

Amount of Each Disbursement this Period

Candidate Name

**Casey, Robert, P, , Jr**

Category/Type

|         |
|---------|
| 3000.00 |
|---------|

Office Sought:  House  Senate  President

Disbursement For: 2024  Primary  General  Other (specify) ▼

Memo Item

State: PA District:

Full Name (Last, First, Middle Initial)

**B. Colin Allred for Congress**

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05    |   | 03    |   | 2023      |

Mailing Address PO Box 601631

FEC Identification Number

|   |           |
|---|-----------|
| C | C00637868 |
|---|-----------|

City Dallas State TX Zip Code 75360

**Transaction ID : 23-04-00234-C**

Purpose of Disbursement Contribution

Amount of Each Disbursement this Period

Candidate Name

**Allred, Colin, , ,**

Category/Type

|         |
|---------|
| 3000.00 |
|---------|

Office Sought:  House  Senate  President

Disbursement For: 2024  Primary  General  Other (specify) ▼

Memo Item

State: TX District: 32

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 |  |
|---|--|

City State Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Candidate Name

Category/Type

|  |
|--|
|  |
|--|

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

Memo Item

State: District:

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

|         |
|---------|
| 6000.00 |
|---------|

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

|         |
|---------|
| 9000.00 |
|---------|

# 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)

**Good Day PAC**

Full Name (Last, First, Middle Initial)

### A. Committee to Elect Michael Lamb

Mailing Address 928 Washington Rd

City  
Pittsburgh

State  
PA

Zip Code  
15228

Purpose of Disbursement  
Non Federal Contribution

Candidate Name

**Committee to Elect Michael Lamb**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [ ]

**Transaction ID : 29-04-00219-I**

Amount of Each Disbursement this Period

[ ] 2500.00

Memo Item

Full Name (Last, First, Middle Initial)

### B. Fairness PA

Mailing Address c/o Rachel Doran  
121 S Broad St Ste 400

City  
Philadelphia

State  
PA

Zip Code  
19107

Purpose of Disbursement  
Non-Federal Contribution

Candidate Name

**Fairness PA**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

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

FEC Identification Number

C [ ]

**Transaction ID : 29-04-00226-C**

Amount of Each Disbursement this Period

[ ] 1000.00

Memo Item

Full Name (Last, First, Middle Initial)

### C. Committee to Elect Michael Lamb

Mailing Address 928 Washington Rd

City  
Pittsburgh

State  
PA

Zip Code  
15228

Purpose of Disbursement  
Non Federal Contribution

Candidate Name

**Committee to Elect Michael Lamb**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 0 | 3 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C [ ]

**Transaction ID : 29-04-00229-**

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 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)  
**Good Day PAC**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Beaver County Democratic Committee</b>                                   |  | Date of Disbursement<br>MM / DD / YYYY<br>05 / 24 / 2023  |
| Mailing Address 124 Huron St  |  | FEC Identification Number<br>C 00669770<br><b>Transaction ID : 29-04-00238-I</b><br>Amount of Each Disbursement this Period<br>- 500.00 |
| City Aliquippa  | State PA   | Zip Code 15001  |
| Purpose of Disbursement<br>Voided - Stale Check Not Needed  |  | Category/Type   |
| Candidate Name<br><b>Beaver County Democratic Committee</b>   |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  | <input type="checkbox"/> Memo Item   |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Committee to Elect Ryan Bizzarro</b>                                     |  | Date of Disbursement<br>MM / DD / YYYY<br>05 / 24 / 2023  |
| Mailing Address PO Box 8750   |  | FEC Identification Number<br>C<br><b>Transaction ID : 29-04-00239-C</b><br>Amount of Each Disbursement this Period<br>- 1000.00 |
| City Erie   | State PA   | Zip Code 16505  |
| Purpose of Disbursement<br>Voided - Stale Check Not Needed  |  | Category/Type   |
| Candidate Name<br><b>Committee to Elect Ryan Bizzarro</b>   |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  | <input type="checkbox"/> Memo Item   |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Fairness PA</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>05 / 24 / 2023  |
| Mailing Address c/o Rachel Doran<br>121 S Broad St Ste 400  |  | FEC Identification Number<br>C<br><b>Transaction ID : 29-04-00240-</b><br>Amount of Each Disbursement this Period<br>30000.00 |
| City Philadelphia   | State PA   | Zip Code 19107  |
| Purpose of Disbursement<br>Non-Federal Contribution   |  | Category/Type   |
| Candidate Name<br><b>Fairness PA</b>  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: District:  | <input type="checkbox"/> Memo Item   |   |

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

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

|          |
|----------|
| 28500.00 |
|          |



# 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)

**Good Day PAC**

Full Name (Last, First, Middle Initial)

### A. Allegheny County Democratic Committee

Mailing Address 22 Wabash St Ste 205

City  
Pittsburgh

State  
PA

Zip Code  
15220

Purpose of Disbursement  
Non Federal Contribution

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 6 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

**Transaction ID : 29-04-00242-4**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

### B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
|   |   |   |   |   |   |   |   |   |   |

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

### C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
|   |   |   |   |   |   |   |   |   |   |

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

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

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