

# 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**  
Ahora PAC

ADDRESS (number and street) 300 Tijeras Avenue NE  
#100  
 Check if different than previously reported. (ACC) Albuquerque NM 87102

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C** C00764753 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 [MM] / [DD] / [YYYY] in the State of [ ]  
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on [MM] / [DD] / [YYYY] in the State of [ ]

5. Covering Period [MM] / [DD] / [YYYY] 01 / 01 / 2023 through [MM] / [DD] / [YYYY] 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.  
Fitzer, Steven, , ,  
Type or Print Name of Treasurer

Signature of Treasurer *Fitzer, Steven, , ,* [Electronically Filed] Date 07 / 28 / 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

Ahora 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="12382.90"/> |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....  | <input type="text" value="12382.90"/> |                                       |
| (c) Total Receipts (from Line 19) .....  | <input type="text" value="25000.00"/> | <input type="text" value="25000.00"/> |
| (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="37382.90"/> | <input type="text" value="37382.90"/> |
| 7. Total Disbursements (from Line 31).....   | <input type="text" value="19437.58"/> | <input type="text" value="19437.58"/> |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)).....                         | <input type="text" value="17945.32"/> | <input type="text" value="17945.32"/> |
| 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

**Ahora PAC**

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

| 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).....  | 25000.00                      | 25000.00                          |
| (ii) Unitemized .....   | 0.00                          | 0.00                              |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶   | 25000.00                      | 25000.00                          |
| (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) .....  | 25000.00                      | 25000.00                          |
| 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)).....▶                         | 25000.00                      | 25000.00                          |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶                                   | 25000.00                      | 25000.00                          |

**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 .....   | 1437.58                       | 1437.58                           |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 1437.58                       | 1437.58                           |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 17000.00                      | 17000.00                          |
| 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).....                                 | 1000.00                       | 1000.00                           |
| 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)) ..      | 19437.58                      | 19437.58                          |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 19437.58                      | 19437.58                          |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

| <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) .....        | 25000.00                              | 25000.00                                  |
| 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) .....    | 25000.00                              | 25000.00                                  |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... | 1437.58                               | 1437.58                                   |
| 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) .....              | 1437.58                               | 1437.58                                   |

**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 14  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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)  
**Ahora PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Choctaw Nation Of Oklahoma**

Mailing Address **PO Box 1550**

City **Durant**   State **OK**   Zip Code **74702-1550**

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 ▼  
**5000.00**

Date of Receipt  
**05 / 10 / 2023**

**Transaction ID : 12814697**

Amount of Each Receipt this Period  
**5000.00**

Memo Item

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

Mailing Address **2500 Steiner St Unit 10**

City **San Francisco**   State **CA**   Zip Code **94115-1187**

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

Name of Employer (for Individual)   Occupation (for Individual)  
**Self Employed   Technology Investor**

Receipt For:  
 Primary    General  
 Other (specify) ▼

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

Date of Receipt  
**05 / 31 / 2023**

**Transaction ID : 12836380**

Amount of Each Receipt this Period  
**5000.00**

Memo Item

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

Mailing Address **2500 Steiner St Unit 10**

City **San Francisco**   State **CA**   Zip Code **94115-1187**

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

Name of Employer (for Individual)   Occupation (for Individual)  
**Self-Employed   Philanthropist**

Receipt For:  
 Primary    General  
 Other (specify)

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

Date of Receipt  
**05 / 31 / 2023**

**Transaction ID : 12836379**

Amount of Each Receipt this Period  
**5000.00**

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **15000.00**

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

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

|   |                              |                              |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:             | PAGE 7 OF 14                 |
|   | (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)  
**Ahora PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Poarch Band Of Creek Indians**

Mailing Address 5811 Jack Springs Rd

|                |             |                        |
|----------------|-------------|------------------------|
| City<br>Atmore | State<br>AL | Zip Code<br>36502-5025 |
|----------------|-------------|------------------------|

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 ▼  
5000.00

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 15    |   | 2023        |

**Transaction ID : 12816748**

Amount of Each Receipt this Period  
5000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Shakopee Mdewakanton Sioux Community**

Mailing Address 2330 Sioux Trl NW

|                    |             |                        |
|--------------------|-------------|------------------------|
| City<br>Prior Lake | State<br>MN | Zip Code<br>55372-9077 |
|--------------------|-------------|------------------------|

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 ▼  
5000.00

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 01    |   | 2023        |

**Transaction ID : 12838450**

Amount of Each Receipt this Period  
5000.00

Memo Item

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

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

Amount of Each Receipt this Period

Memo Item

|   |          |
|---|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 10000.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... | 25000.00 |

**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)  
**Ahora PAC**

|   |  |  |                                       |
|---|--|--|---------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>A. Fitzer, Steven, , ,</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>01 / 05 / 2023   |                                       |
| Mailing Address 300 Tijeras Ave NE<br>Apt 100   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : 500849596</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 611.04 |                                       |
| City<br>Albuquerque   | State<br>NM  | Zip Code<br>87102-4484   | Category/<br>Type<br>002              |
| Purpose of Disbursement<br>Reimbursement of expenses - see below  |  | Candidate Name   |                                       |
| 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) ▼ |  | Memo Item<br><input type="checkbox"/> |
| State: District:  |  |  |                                       |

|   |  |  |  |
|---|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. American Airlines</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>01 / 05 / 2023   |  |
| Mailing Address PO Box 619616   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : 500849595</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 611.04 |  |
| City<br>Dallas  | State<br>TX  | Zip Code<br>75261-9616   | Category/<br>Type<br>[REDACTED]                  |
| Purpose of Disbursement<br>Travel expenses - airfare  |  | Candidate Name   |  |
| 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) ▼ |  | Memo Item<br><input checked="" type="checkbox"/> |
| State: District:  |  |  |  |

|   |  |  |                                       |
|---|--|--|---------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>C. Fitzer, Steven, , ,</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>05 / 17 / 2023   |                                       |
| Mailing Address 300 Tijeras Ave NE<br>Apt 100   |  | FEC Identification Number<br>C [REDACTED]<br><b>Transaction ID : 500869691</b><br>Amount of Each Disbursement this Period<br>[REDACTED] 805.53 |                                       |
| City<br>Albuquerque   | State<br>NM  | Zip Code<br>87102-4484   | Category/<br>Type<br>002              |
| Purpose of Disbursement<br>Reimbursement of expenses - see below  |  | Candidate Name   |                                       |
| 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) ▼ |  | Memo Item<br><input type="checkbox"/> |
| State: District:  |  |  |                                       |

|  |                    |
|--|--------------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | [REDACTED] 1416.57 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | [REDACTED]         |



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Ahora PAC**

Full Name (Last, First, Middle Initial)

### A. The Morrow Washington DC

Mailing Address 222 M St NE

City  
Washington

State  
DC

Zip Code  
20002-8277

Purpose of Disbursement  
Travel expenses - hotel

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 |   | 1 | 7 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C [ ]

Transaction ID : 500869690

Amount of Each Disbursement this Period

[ ] 805.53

Memo Item

Full Name (Last, First, Middle Initial)

### B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

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 |
|   |   |   |   |   |   |   |   |   |   |

FEC Identification Number

C [ ]

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

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

C [ ]

Amount of Each Disbursement this Period

[ ]

Memo Item

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

[ ] 0.00

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

[ ] 1416.57

**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)  
**Ahora PAC**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Andrea Salinas For Oregon</b>  |  | Date of Disbursement<br>MM / DD / YYYY<br>06 / 22 / 2023                      |
| Mailing Address PO Box 230985   |  | FEC Identification Number<br>C 000793703<br><b>Transaction ID : 500872951</b> |
| City Tigard   | State OR   | Zip Code 97281-0985   |
| Purpose of Disbursement<br>2024 Primary contribution  |  | 011<br>Category/Type  |
| Candidate Name<br><b>SALINAS, ANDREA, , ,</b>   |  | Amount of Each Disbursement this Period<br>1000.00                            |
| Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: OR   | District: 06   |   |
| <input type="checkbox"/> Memo Item  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Caraveo For Congress</b>   |  | Date of Disbursement<br>MM / DD / YYYY<br>06 / 22 / 2023                      |
| Mailing Address PO Box 953  |  | FEC Identification Number<br>C 000787788<br><b>Transaction ID : 500872949</b> |
| City Eastlake   | State CO   | Zip Code 80614-0953   |
| Purpose of Disbursement<br>2024 Primary contribution  |  | 011<br>Category/Type  |
| Candidate Name<br><b>CARAVEO, YADIRA, , ,</b>   |  | Amount of Each Disbursement this Period<br>1000.00                            |
| Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |
| State: CO   | District: 08   |   |
| <input type="checkbox"/> Memo Item  |  |   |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Democratic Congressional Campaign Committee</b>                       |  | Date of Disbursement<br>MM / DD / YYYY<br>01 / 05 / 2023                     |
| Mailing Address 430 S Capitol St SE<br>FI 2  |  | FEC Identification Number<br>C 00000935<br><b>Transaction ID : 500849594</b> |
| City Washington  | State DC   | Zip Code 20003-4024  |
| Purpose of Disbursement<br>Political contribution  |  | 011<br>Category/Type   |
| Candidate Name<br><b>Democratic Congressional Campaign Committee</b>   |  | Amount of Each Disbursement this Period<br>2500.00                           |
| Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2024<br><input checked="" 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)..... ▶

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)

Grid for line numbers 21b-30b with checkboxes, where 23 is checked.

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NAME OF COMMITTEE (In Full)
Ahora PAC

A. Democratic Congressional Campaign Committee

Full Name (Last, First, Middle Initial)

Date of Disbursement

Date field: MM/DD/YYYY = 02/14/2023

Mailing Address 430 S Capitol St SE
FI 2

City Washington State DC Zip Code 20003-4024

FEC Identification Number

FEC ID field: C00000935

Purpose of Disbursement Political contribution

Category/Type field: 011

Transaction ID : 500857078

Amount of Each Disbursement this Period

Amount field: 2500.00

Candidate Name

Democratic Congressional Campaign Committee

Office Sought: House Senate President Disbursement For: 2024 Primary General Other (specify)

Memo Item

State: District:

B. Democratic Congressional Campaign Committee

Full Name (Last, First, Middle Initial)

Date of Disbursement

Date field: MM/DD/YYYY = 05/15/2023

Mailing Address 430 S Capitol St SE
FI 2

City Washington State DC Zip Code 20003-4024

FEC Identification Number

FEC ID field: C00000935

Purpose of Disbursement Political contribution

Category/Type field: 011

Transaction ID : 500869464

Amount of Each Disbursement this Period

Amount field: 2500.00

Candidate Name

Democratic Congressional Campaign Committee

Office Sought: House Senate President Disbursement For: 2024 Primary General Other (specify)

Memo Item

State: District:

C. Friends Of Dan Kildee

Full Name (Last, First, Middle Initial)

Date of Disbursement

Date field: MM/DD/YYYY = 06/22/2023

Mailing Address PO Box 248

City Flint State MI Zip Code 48501-0248

FEC Identification Number

FEC ID field: C00499947

Purpose of Disbursement 2024 Primary contribution

Category/Type field: 011

Transaction ID : 500872947

Amount of Each Disbursement this Period

Amount field: 1000.00

Candidate Name

KILDEE, DANIEL, T., ,

Office Sought: House Senate President Disbursement For: 2024 Primary General Other (specify)

Memo Item

State: MI District: 08

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

Subtotal field: 6000.00

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

Total field: (empty)

# 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)  
**Ahora PAC**

### A. Gabe Vasquez For Congress

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box L

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    |   | 22    |   | 2023      |

|                 |             |                        |
|-----------------|-------------|------------------------|
| City<br>Mesilla | State<br>NM | Zip Code<br>88046-4612 |
|-----------------|-------------|------------------------|

FEC Identification Number

Purpose of Disbursement  
2024 Primary contribution

|   |           |
|---|-----------|
| C | C00789404 |
|---|-----------|

Candidate Name  
**VASQUEZ, GABRIEL, , ,**

|                   |
|-------------------|
| 011               |
| Category/<br>Type |

Transaction ID : 500872950

Amount of Each Disbursement this Period

|   |  |
|---|--|
| Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| State: NM District: 02  |  |

|         |
|---------|
| 1000.00 |
|---------|

Memo Item

### B. GALLEGO FOR ARIZONA

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 1710

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    |   | 28    |   | 2023      |

|                 |             |                        |
|-----------------|-------------|------------------------|
| City<br>Phoenix | State<br>AZ | Zip Code<br>85001-1710 |
|-----------------|-------------|------------------------|

FEC Identification Number

Purpose of Disbursement  
2024 Primary campaign contribution

|   |           |
|---|-----------|
| C | C00558627 |
|---|-----------|

Candidate Name  
**GALLEGO, RUBEN, , ,**

|                   |
|-------------------|
| 011               |
| Category/<br>Type |

Transaction ID : 500873216

Amount of Each Disbursement this Period

|   |  |
|---|--|
| Office Sought: <input type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |
| State: AZ District: 00  |  |

|         |
|---------|
| 1000.00 |
|---------|

Memo Item

### C. MARIE FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 1164

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    |   | 22    |   | 2023      |

|                   |             |                        |
|-------------------|-------------|------------------------|
| City<br>Washougal | State<br>WA | Zip Code<br>98671-0926 |
|-------------------|-------------|------------------------|

FEC Identification Number

Purpose of Disbursement  
2024 Primary contribution

|   |           |
|---|-----------|
| C | C00806174 |
|---|-----------|

Candidate Name  
**GLUESENKAMP PEREZ, MARIE, , ,**

|                   |
|-------------------|
| 011               |
| Category/<br>Type |

Transaction ID : 500872952

Amount of Each Disbursement this Period

|   |  |
|---|--|
| Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| State: WA District: 03  |  |

|         |
|---------|
| 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)  
**Ahora PAC**

### A. Martin Heinrich For Senate

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 25763

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 03    |   | 15    |   | 2023      |

City  
Albuquerque

State  
NM

Zip Code  
87125-0763

FEC Identification Number

Purpose of Disbursement  
Campaign contribution - 2024 Primary

|   |           |
|---|-----------|
| C | C00434563 |
|---|-----------|

Candidate Name  
**HEINRICH, MARTIN, , ,**

|                   |
|-------------------|
| 011               |
| Category/<br>Type |

Transaction ID : 500859943

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President  
State: NM District: 00

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

|         |
|---------|
| 2500.00 |
|---------|

Memo Item

### B. Sharice For Congress

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 13851 W 63Rd St  
Num 303

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06    |   | 22    |   | 2023      |

City  
Shawnee

State  
KS

Zip Code  
66216-3800

FEC Identification Number

Purpose of Disbursement  
2024 Primary Contribution

|   |           |
|---|-----------|
| C | C00670034 |
|---|-----------|

Candidate Name  
**DAVIDS, SHARICE, , ,**

|                   |
|-------------------|
| 011               |
| Category/<br>Type |

Transaction ID : 500872948

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President  
State: KS District: 03

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

|         |
|---------|
| 1000.00 |
|---------|

Memo Item

### C.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

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

City

State

Zip Code

FEC Identification Number

Purpose of Disbursement

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

Candidate Name

|                   |
|-------------------|
|                   |
| Category/<br>Type |

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

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

Memo Item

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

|         |
|---------|
| 3500.00 |
|---------|

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

|          |
|----------|
| 17000.00 |
|----------|

# 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)  
**Ahora PAC**

**A. Emerge New Mexico**

Full Name (Last, First, Middle Initial)

Mailing Address 500 Marquette Ave NW  
Ste 280

City Albuquerque State NM Zip Code 87102-5340

Purpose of Disbursement Political contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2024  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 14 / 2023

FEC Identification Number: C

Transaction ID : 500871742

Amount of Each Disbursement this Period: 1000.00

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 1000.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | 1000.00 |