

# 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

Innovation Political Action Committee

ADDRESS (number and street) 228 S. Washington St.

Check if different than previously reported. (ACC) Ste. 115

Alexandria VA 22314

2. **FEC IDENTIFICATION NUMBER** ▼ C C00540187 **CITY** ▲ **STATE** ▲ **ZIP CODE** ▲

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)
- Mar 20 (M3)
- Apr 20 (M4)
- May 20 (M5)
- Jun 20 (M6)
- Jul 20 (M7)
- Oct 20 (M10)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- 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 09 / 01 / 2021 through M M / D D / Y Y Y Y Y Y 09 / 30 / 2021

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

Signature of Treasurer Lisker, Lisa, , , *[Electronically Filed]* Date M M / D D / Y Y Y Y Y Y 10 / 19 / 2021

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

**Innovation Political Action Committee**

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="2021"/>		377272.52
(b) Cash on Hand at Beginning of Reporting Period.....	437594.04	
(c) Total Receipts (from Line 19) .....	124205.39	477817.32
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	561799.43	855089.84
7. Total Disbursements (from Line 31).....	71122.32	364412.73
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	490677.11	490677.11
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	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

**Innovation Political Action Committee**

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).....	45166.00	211744.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	45166.00	211744.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	62500.00	228000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	107666.00	439744.00
12. Transfers From Affiliated/Other Party Committees.....	16539.39	38073.32
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)).....▶	124205.39	477817.32
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	124205.39	477817.32

**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 .....	18622.32	148412.73
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	18622.32	148412.73
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	52500.00	206000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	10000.00
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)) ..	71122.32	364412.73
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	71122.32	364412.73

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	107666.00	439744.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	107666.00	439744.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	18622.32	148412.73
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	18622.32	148412.73

**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 6 OF 30
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)  
**Innovation Political Action Committee**

**A. AMES, KEAGHAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 762 PARK ROAD NW  
 UNIT 7  
 City WASHINGTON State DC Zip Code 20010-1690  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INSTITUTE OF INTERNATIONAL BANKERS Occupation (for Individual) DIRECTOR GOVT AFFAIRS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 17 / 2021  
**Transaction ID : SA11A.34259**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item CONTRIBUTION

**B. ANDERSON, JOHN, A., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 24 EAST MASONIC VIEW AVE  
 City ALEXANDRIA State VA Zip Code 22301-  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTING  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 29 / 2021  
**Transaction ID : SA11A.34728**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item CONTRIBUTION

**C. BARTLETT, DOYLE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 439 NEW JERSEY AVE SE  
 City WASHINGTON State DC Zip Code 20003-  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GRAYROBINSON Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 30 / 2021  
**Transaction ID : SA11A.34723**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 30
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Innovation Political Action Committee**

**A. BROWN, CHRIS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 27 W KIRKE ST  
 City CHEVY CHASE State MD Zip Code 20815-  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MINDSET Occupation (for Individual) PRINCIPAL  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 29 / 2021  
**Transaction ID : SA11A.34726**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item CONTRIBUTION

**B. COMBS, DAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1912 CONTRALTO CT  
 City VIENNA State VA Zip Code 22182-3318  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DCI GROUP Occupation (for Individual) PUBLIC AFFAIRS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 20 / 2021  
**Transaction ID : SA11A.34257**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item CONTRIBUTION

**C. COX, CHRIS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1908 CASEY KEY ROAD  
 City NOKOMIS State FL Zip Code 34275-  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NAVIGATORS GLOBAL LLC Occupation (for Individual) FOUNDING PRINCIPAL  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 09 / 30 / 2021  
**Transaction ID : SA11A.34721**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 30
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Innovation Political Action Committee**

**A. EDATTEL, PAUL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3124 HOLMES RUN ROAD  
 City FALLS CHURCH State VA Zip Code 22042-4308  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) TODD STRATEGY LLC Occupation (for Individual) CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 09 / 17 / 2021  
**Transaction ID : SA11A.34258**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item  
**CONTRIBUTION**

**B. FERENCE, MICHAEL, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 418 C STREET NORTHEAST  
 City WASHINGTON State DC Zip Code 20002-5818  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) S-3 GROUP Occupation (for Individual) CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3750.00

Date of Receipt 09 / 30 / 2021  
**Transaction ID : SA11A.34725**  
 Amount of Each Receipt this Period 1250.00  
 Memo Item  
**CONTRIBUTION**

**C. GANS, DAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 22 N. PINE CIRCLE  
 City BELLEAIR State FL Zip Code 33756-  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) POLARIS CONSULTING Occupation (for Individual) PRINCIPAL  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 09 / 30 / 2021  
**Transaction ID : SA11A.34718**  
 Amount of Each Receipt this Period 1250.00  
 Memo Item  
**CONTRIBUTION**

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 30
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Innovation Political Action Committee**

**A. HAINES, LAURA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 115 STEWART AVENUE  
 City ALEXANDRIA State VA Zip Code 22301-1141  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GUARDIAN Occupation (for Individual) SVP GOVT AFFAIRS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 16 / 2021  
**Transaction ID : SA11A.34260**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item CONTRIBUTION

**B. HOLLY, JOSH, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 825 S MONROE ST  
 City ARLINGTON State VA Zip Code 22204-  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HOLLY STRATEGIES INCORPORATED Occupation (for Individual) GOVERNMENT AND PUBLIC RELATI  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 30 / 2021  
**Transaction ID : SA11A.34724**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item CONTRIBUTION

**C. HOWARD, BENJAMIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 17220 MACDUFF AVENUE  
 City OLNEY State MD Zip Code 20832-2958  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DUBERSTEIN GROUP Occupation (for Individual) LOBBYIST  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 30 / 2021  
**Transaction ID : SA11A.34719**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 30
	<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)  
**Innovation Political Action Committee**

**A. LAPINSKI, MATHEW, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4424 45TH ST NW  
 City WASHINGTON State DC Zip Code 20016-2053  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CROSSROADS STRATEGIES Occupation (for Individual) PARTNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3744.00

Date of Receipt 09 / 08 / 2021  
**Transaction ID : SA11A.34263**  
 Amount of Each Receipt this Period 416.00  
 Memo Item CONTRIBUTION

**B. MURRAY, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12750 39TH AVENUE NORTHEAST  
 City SEATTLE State WA Zip Code 98125-4612  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MONUMENT ADVOCACY Occupation (for Individual) PARTNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3500.00

Date of Receipt 09 / 12 / 2021  
**Transaction ID : SA11A.34262**  
 Amount of Each Receipt this Period 750.00  
 Memo Item CONTRIBUTION

**C. NEVINS, KYLE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1287 BALLANTRAE FARM DRIVE  
 City MCLEAN State VA Zip Code 22101-3027  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HARBINGER STRATEGIES Occupation (for Individual) CONSULTANT  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 09 / 14 / 2021  
**Transaction ID : SA11A.34261**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3666.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 30
	<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)  
**Innovation Political Action Committee**

**A. POLING, PARKER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 806 MASSACHUSETTS AVENUE NORTHEAST  
 City WASHINGTON State DC Zip Code 20002-6016  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HARBINGER STRATEGIES Occupation (for Individual) GOVERNMENT RELATIONS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 30 / 2021  
**Transaction ID : SA11A.34720**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item CONTRIBUTION

**B. RICH, PETER, DAVIS, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3395 TURNER MOUNTAIN ROAD  
 City THE PLAINS State VA Zip Code 20198-  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RFA Occupation (for Individual) PARTNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 29 / 2021  
**Transaction ID : SA11A.34727**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item CONTRIBUTION

**C. ROGERS, GEORGE, R., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5305 LITTLE FALLS ROAD  
 City ARLINGTON State VA Zip Code 22207-1521  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) REPUBLIC CONSULTING Occupation (for Individual) CONSULTANT  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 30 / 2021  
**Transaction ID : SA11A.34722**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 30
	<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)  
**Innovation Political Action Committee**

**A. RUSBULDT, ROBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6218 ORMANDY DRIVE  
 City BURKE State VA Zip Code 22015-3854  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) IND. INS. AGENTS & BROKERS Occupation (for Individual) TRADE ASSOC. EXEC  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 09 / 27 / 2021  
**Transaction ID : SA11A.34509**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item CONTRIBUTION

**B. SHAPIRO, JEFFREY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1721 P STREET NORTHWEST APT. D  
 City WASHINGTON State DC Zip Code 20036-1342  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) TIBER CREEK GROUP Occupation (for Individual) CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 30 / 2021  
**Transaction ID : SA11A.34717**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item CONTRIBUTION

**C. STRUNK, JEFFREY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3206 WINNETT ROAD  
 City CHEVY CHASE State MD Zip Code 20815-3204  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FORBES TATE PARTNERS Occupation (for Individual) PARTNER  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 28 / 2021  
**Transaction ID : SA11A.34508**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 30
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**Innovation Political Action Committee**

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

Mailing Address 2201 S. BUCHANAN STREET

City ARLINGTON	State VA	Zip Code 22206-1074
-------------------	-------------	------------------------

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

Name of Employer (for Individual) FRANKLIN SQUARE GROUP	Occupation (for Individual) CONSULTANT
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2021

**Transaction ID : SA11A.34256**

Amount of Each Receipt this Period  
500.00

Memo Item CONTRIBUTION

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	500.00
<b>TOTAL</b> This Period (last page this line number only).....	45166.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 30
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Innovation Political Action Committee**

**A. ABBOTT LABORATORIES EMPLOYEE PAC**

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

Mailing Address 100 ABBOTT PARK RD

City ABBOTT PARK	State IL	Zip Code 60064-3502
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00040279

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
09		30		2021

**Transaction ID : SA11C.34699**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**B. AFLAC PAC**

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

Mailing Address WORLDWIDE HEADQUARTERS  
1932 WYNNTON ROAD

City COLUMBUS	State GA	Zip Code 31999-0001
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00034157

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
09		02		2021

**Transaction ID : SA11C.34215**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**C. AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)**

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

Mailing Address 1120 CONNECTICUT AVENUE NW  
SUITE 600

City WASHINGTON	State DC	Zip Code 20036-3971
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00004275

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
09		30		2021

**Transaction ID : SA11C.34511**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	15000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 30
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Innovation Political Action Committee**

**A. AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PALLADIAN 1  
220 LEIGH FARM RD

City DURHAM State NC Zip Code 27707-8110

FEC ID number of contributing federal political committee. **C** C00077321

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
09 / 20 / 2021

**Transaction ID : SA11C.34252**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**B. AMERICAN PROPERTY CASUALTY INSURANCE ASSOCIATION PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 8700 WEST BRYN MAWR  
SUITE 1200S

City CHICAGO State IL Zip Code 60631-3512

FEC ID number of contributing federal political committee. **C** C00066472

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
09 / 02 / 2021

**Transaction ID : SA11C.34217**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**C. BUILD PAC- NATIONAL ASSOC. OF HOME BUILDERS PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1201 15TH STREET, NW

City WASHINGTON State DC Zip Code 20005-2899

FEC ID number of contributing federal political committee. **C** C00000901

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
09 / 02 / 2021

**Transaction ID : SA11C.34216**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 30
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Innovation Political Action Committee**

**A. COMCAST CORPORATION & NBCUNIVERSAL POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1701 JFK BLVD, 49TH FLOOR

City PHILADELPHIA	State PA	Zip Code 19103-2855
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00248716

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2021

**Transaction ID : SA11C.34702**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**B. FIRST AMERICAN FINANCIAL CORPORATION PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1 FIRST AMERICAN WAY

City SANTA ANA	State CA	Zip Code 92707-5913
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00346726

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
09		20		2021

**Transaction ID : SA11C.34250**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**C. KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KOCHPAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 600 14TH STREET, NW  
SUITE 800

City WASHINGTON	State DC	Zip Code 20005-2099
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00236489

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
09		30		2021

**Transaction ID : SA11C.34698**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	12500.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 17 OF 30
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Innovation Political Action Committee**

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

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

Mailing Address 175 BERKELEY STREET

City BOSTON	State MA	Zip Code 02116-5066
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00171843

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2021

**Transaction ID : SA11C.34700**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**B. METLIFE INC. EMPLOYEES' POLITICAL PARTICIPATION FUND A**

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

Mailing Address 200 PARK AVENUE

City NEW YORK	State NY	Zip Code 10166-0005
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00040923

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
09		30		2021

**Transaction ID : SA11C.34703**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**C. NATIONAL MULTIFAMILY HOUSING PAC**

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

Mailing Address 1775 EYE ST NW  
SUITE 1100

City WASHINGTON	State DC	Zip Code 20006-2424
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2021

**Transaction ID : SA11C.34701**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	12500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 30
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Innovation Political Action Committee**

**A. REGIONS FINANCIAL CORPORATION POLITICAL ACTION COMMITTEE**

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

Mailing Address 1015 15TH STREET NW  
SUITE 920

City WASHINGTON State DC Zip Code 20005-2623

FEC ID number of contributing federal political committee. **C** C00432252

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
09 / 20 / 2021  
**Transaction ID : SA11C.34251**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**B. THE CAPITAL GROUP COMPANIES INC POLITICAL ACTION COMMITTEE**

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

Mailing Address 333 SOUTH HOPE STREET

City LOS ANGELES State CA Zip Code 90071-1406

FEC ID number of contributing federal political committee. **C** C00540518

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
09 / 29 / 2021  
**Transaction ID : SA11C.34715**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**C. UBS AMERICAS INC. PAC**

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

Mailing Address 1501 K STREET NW  
SUITE 1100

City WASHINGTON State DC Zip Code 20005-1410

FEC ID number of contributing federal political committee. **C** C00012245

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
09 / 30 / 2021  
**Transaction ID : SA11C.34512**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	12500.00
<b>TOTAL</b> This Period (last page this line number only).....	62500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 30
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Innovation Political Action Committee**

**A. TEAM MCHENRY**

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

Mailing Address 228 S WASHINGTON ST STE 115

City ALEXANDRIA	State VA	Zip Code 22314-5404
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00544650

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
38073.32

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2021

**Transaction ID : SA12.34716**

Amount of Each Receipt this Period  
16539.39

Memo Item  
TRANSFER

**B. KOBOS, CHAD, , ,**

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

Mailing Address 401 NORTH CHURCH ST. #308

City CHARLOTTE	State NC	Zip Code 28202-1181
-------------------	-------------	------------------------

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

Name of Employer (for Individual) GENESIS FINANCIAL	Occupation (for Individual) FINANCE
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4200.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2021

**Transaction ID : SA.34209.3.0921**

Amount of Each Receipt this Period  
4200.00

Memo Item  
TRANSFER  
TRANSFER FROM TEAM MCHENRY

**C. MULE, EDWARD, A., ,**

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

Mailing Address 15 DAIRY RD.

City GREENWICH	State CT	Zip Code 06830-3447
-------------------	-------------	------------------------

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

Name of Employer (for Individual) SILVER POINT CAPITAL	Occupation (for Individual) CEO
---	------------------------------------

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
09		30		2021

**Transaction ID : SA.34520.3.0921**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER  
TRANSFER FROM TEAM MCHENRY

<b>SUBTOTAL</b> of Receipts This Page (optional).....	16539.39
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 20 OF 30
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Innovation Political Action Committee**

**A. WARLICK, ANDERSON, D., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 1787

City GASTONIA	State NC	Zip Code 28053-1787
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) PARKDALE, INC.		Occupation (for Individual) CEO
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 14 / 2021  
**Transaction ID : SA.33130.3.0921**

Amount of Each Receipt this Period  
 5000.00

Memo Item  
 TRANSFER  
 TRANSFER FROM TEAM MCHENRY

**B. PETE KIM LLC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 17629 N 52ND PL.

City SCOTTSDALE	State AZ	Zip Code 85254-7536
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2021  
**Transaction ID : SA.34517.3.0921**

Amount of Each Receipt this Period  
 5000.00

Memo Item  
 TRANSFER  
 TRANSFER FROM TEAM MCHENRY

**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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	16539.39

**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)  
**Innovation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. ANEDOT**

Mailing Address PO BOX 84314  
SUITE 2105

City  
BATON ROUGE

State  
LA

Zip Code  
70884-1821

Purpose of Disbursement  
ONLINE PROCESSING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.I1768'**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT**

Mailing Address PO BOX 84314  
SUITE 2105

City  
BATON ROUGE

State  
LA

Zip Code  
70884-1821

Purpose of Disbursement  
ONLINE PROCESSING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.I17682**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT**

Mailing Address PO BOX 84314  
SUITE 2105

City  
BATON ROUGE

State  
LA

Zip Code  
70884-1821

Purpose of Disbursement  
ONLINE PROCESSING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.I1768**  
Amount of Each Disbursement this Period

Memo Item

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

**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)  
**Innovation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. ANEDOT**

Mailing Address PO BOX 84314  
SUITE 2105

City  
BATON ROUGE

State  
LA

Zip Code  
70884-1821

Purpose of Disbursement  
ONLINE PROCESSING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1768  
Amount of Each Disbursement this Period

[REDACTED] 1424.80

Memo Item

Full Name (Last, First, Middle Initial)

**B. CMDI**

Mailing Address 1593 SPRING HILL RD., STE. 400

City  
TYSONS CORNER

State  
VA

Zip Code  
22182

Purpose of Disbursement  
SOFTWARE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 27 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1768  
Amount of Each Disbursement this Period

[REDACTED] 250.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. HUCKABY DAVIS LISKER**

Mailing Address 228 S WASHINGTON STREET STE 115

City  
ALEXANDRIA

State  
VA

Zip Code  
22314

Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 01 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1769  
Amount of Each Disbursement this Period

[REDACTED] 2560.12

Memo Item

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

[REDACTED] 4234.92

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

[REDACTED]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Innovation Political Action Committee**

Full Name (Last, First, Middle Initial)

### A. OORBEEK MEMMOTT GROUP

Mailing Address 9593 SPRINGS RD.

City WARRENTON State VA Zip Code 20186

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 01 / 2021

FEC Identification Number

C

Transaction ID : SB21B.I1769  
Amount of Each Disbursement this Period

14000.00

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  
State: District:

Disbursement For:  Primary  General  Other (specify)

Category/  
Type

Date of Disbursement

MM / DD / YYYY

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  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

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

14000.00

18622.32

**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)  
**Innovation Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. BALDERSON FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 09 / 17 / 2021
Mailing Address PO BOX 2302		FEC Identification Number C 000662650 <b>Transaction ID : SB23.I17685</b>
City ZANESVILLE	State OH	Zip Code 43702
Purpose of Disbursement POLITICAL CONTRIBUTION		Amount of Each Disbursement this Period 2500.00
Candidate Name <b>BALDERSON, TROY, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: OH	District: 12	

Full Name (Last, First, Middle Initial) <b>B. DAVIDSON FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 09 / 17 / 2021
Mailing Address 1790 GREENBRIAR DR		FEC Identification Number C 000600718 <b>Transaction ID : SB23.I17688</b>
City TROY	State OH	Zip Code 45373
Purpose of Disbursement POLITICAL CONTRIBUTION		Amount of Each Disbursement this Period 2500.00
Candidate Name <b>DAVIDSON, WARREN, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item
State: OH	District: 08	

Full Name (Last, First, Middle Initial) <b>C. DON BACON FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 09 / 17 / 2021
Mailing Address P.O. BOX 391368		FEC Identification Number C 000575167 <b>Transaction ID : SB23.I17689</b>
City OMAHA	State NE	Zip Code 68139
Purpose of Disbursement POLITICAL CONTRIBUTION		Amount of Each Disbursement this Period 2500.00
Candidate Name <b>BACON, DONALD, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: NE	District: 02	

**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)  
**Innovation Political Action Committee**

**A. DON BACON FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 391368

City OMAHA State NE Zip Code 68139

Purpose of Disbursement  
POLITICAL CONTRIBUTION

Candidate Name  
**BACON, DONALD, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify) ▼  
State: NE District: 02

Date of Disbursement

MM / DD / YYYY  
09 / 17 / 2021

FEC Identification Number

**C** C00575167

**Transaction ID : SB23.I17690**

Amount of Each Disbursement this Period

2500.00

Memo Item

**B. GARBARINO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 101

City BAYPORT State NY Zip Code 11705

Purpose of Disbursement  
POLITICAL CONTRIBUTION

Candidate Name  
**GARBARINO, ANDREW, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify) ▼  
State: NY District: 02

Date of Disbursement

MM / DD / YYYY  
09 / 17 / 2021

FEC Identification Number

**C** C00729954

**Transaction ID : SB23.I17691**

Amount of Each Disbursement this Period

2500.00

Memo Item

**C. JEFF FORTENBERRY FOR UNITED STATES CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 30265

City LINCOLN State NE Zip Code 68503-1871

Purpose of Disbursement  
POLITICAL CONTRIBUTION

Candidate Name  
**FORTENBERRY, JEFFREY, L., HONORABLE,**

Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify) ▼  
State: NE District: 01

Date of Disbursement

MM / DD / YYYY  
09 / 17 / 2021

FEC Identification Number

**C** C00395467

**Transaction ID : SB23.I17693**

Amount of Each Disbursement this Period

2500.00

Memo Item

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

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

7500.00

**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)  
**Innovation Political Action Committee**

**A. MARIA ELVIRA SALAZAR FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 2600 SOUTH DOUGLAS ROAD  
SUITE 900

M M M	/	D D D	/	Y Y Y Y Y
09		17		2021

City CORAL GABL State FL Zip Code 33134

FEC Identification Number

Purpose of Disbursement  
POLITICAL CONTRIBUTION

C	C00671859
---	-----------

Candidate Name  
**SALAZAR, MARIA , ELVIRA, ,**

Category/  
Type

**Transaction ID : SB23.I17701**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify) ▼  
State: FL District: 27

2500.00
---------

Memo Item

**B. MARIA ELVIRA SALAZAR FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 2600 SOUTH DOUGLAS ROAD  
SUITE 900

M M M	/	D D D	/	Y Y Y Y Y
09		17		2021

City CORAL GABL State FL Zip Code 33134

FEC Identification Number

Purpose of Disbursement  
POLITICAL CONTRIBUTION

C	C00671859
---	-----------

Candidate Name  
**SALAZAR, MARIA , ELVIRA, ,**

Category/  
Type

**Transaction ID : SB23.I17702**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify) ▼  
State: FL District: 27

2500.00
---------

Memo Item

**C. MICHELLE STEEL FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 92A SURFSIDE AVENUE, #472

M M M	/	D D D	/	Y Y Y Y Y
09		17		2021

City SURFSIDE State CA Zip Code 90743

FEC Identification Number

Purpose of Disbursement  
POLITICAL CONTRIBUTION

C	C00704981
---	-----------

Candidate Name  
**STEEL, MICHELLE, , ,**

Category/  
Type

**Transaction ID : SB23.I17694**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify) ▼  
State: CA District: 48

2500.00
---------

Memo Item

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

7500.00
---------

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

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

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
**Innovation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. MIKE BOST FOR CONGRESS COMMITTEE**

Mailing Address P.O. BOX 1212

City MURPHYSBORO State IL Zip Code 62966

Purpose of Disbursement  
POLITICAL CONTRIBUTION

Candidate Name  
**BOST, MICHAEL, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify) ▼  
State: IL District: 12

Date of Disbursement

MM / DD / YYYY  
09 / 17 / 2021

FEC Identification Number

C C00546499  
**Transaction ID : SB23.I17695**  
Amount of Each Disbursement this Period  
2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. MILLER-MEEKS FOR CONGRESS**

Mailing Address 11674-90TH ST

City OTTUMWA State IA Zip Code 52501

Purpose of Disbursement  
POLITICAL CONTRIBUTION

Candidate Name  
**MILLER-MEEKS, MARIANNETTE , JANE, ,**

Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify)  
State: IA District: 02

Date of Disbursement

MM / DD / YYYY  
09 / 17 / 2021

FEC Identification Number

C C00558825  
**Transaction ID : SB23.I17696**  
Amount of Each Disbursement this Period  
2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. NICOLE FOR NEW YORK**

Mailing Address PO BOX 60487

City STATEN ISLAND State NY Zip Code 10306

Purpose of Disbursement  
POLITICAL CONTRIBUTION

Candidate Name  
**MALLIOTAKIS, NICOLE, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify) ▼  
State: NY District: 11

Date of Disbursement

MM / DD / YYYY  
09 / 20 / 2021

FEC Identification Number

C C00694778  
**Transaction ID : SB23.I17697**  
Amount of Each Disbursement this Period  
2500.00

Memo Item

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

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

7500.00

# 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)  
**Innovation Political Action Committee**

Full Name (Last, First, Middle Initial)

## A. PETER MEIJER FOR CONGRESS

Mailing Address P.O. BOX 68554

City GRAND RAPIDS State MI Zip Code 49516

Purpose of Disbursement  
POLITICAL CONTRIBUTION

Candidate Name  
**MEIJER, PETER, , MR.,**

Office Sought:  House  Senate  President  
 Disbursement For: 2022  Primary  General  Other (specify) ▼  
 State: MI District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	17	/	2021

FEC Identification Number

**C** C00710962

**Transaction ID : SB23.I17699**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

## B. RODNEY FOR CONGRESS

Mailing Address P.O. BOX 344

City TAYLORVILLE State IL Zip Code 62568

Purpose of Disbursement  
POLITICAL CONTRIBUTION

Candidate Name  
**DAVIS, RODNEY , L, ,**

Office Sought:  House  Senate  President  
 Disbursement For: 2022  Primary  General  Other (specify) ▼  
 State: IL District: 13

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	17	/	2021

FEC Identification Number

**C** C00521948

**Transaction ID : SB23.I17700**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

## C. STEIL FOR WISCONSIN, INC.

Mailing Address 3709 BRIAR CREST DRIVE

City JANESVILLE State WI Zip Code 53546

Purpose of Disbursement  
POLITICAL CONTRIBUTION

Candidate Name  
**STEIL, BRYAN , GEORGE, ,**

Office Sought:  House  Senate  President  
 Disbursement For: 2022  Primary  General  Other (specify) ▼  
 State: WI District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	17	/	2021

FEC Identification Number

**C** C00677286

**Transaction ID : SB23.I17703**

Amount of Each Disbursement this Period

5000.00

Memo Item

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

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

10000.00

**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)  
**Innovation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. TONY GONZALES FOR CONGRESS**

Mailing Address 14439 NW MILITARY HWY  
STE 108-488

City SAN ANTONIO State TX Zip Code 78231

Purpose of Disbursement  
POLITICAL CONTRIBUTION

Candidate Name  
**GONZALES, ERNEST, ANTHONY TONY, , II**

Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify) ▼  
State: TX District: 23

Date of Disbursement

MM / DD / YYYY  
09 / 17 / 2021

FEC Identification Number

**C** C00706614

**Transaction ID : SB23.I17704**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. VICTORIA SPARTZ FOR CONGRESS**

Mailing Address PO BOX 505

City NOBLESVILLE State IN Zip Code 46061

Purpose of Disbursement  
POLITICAL CONTRIBUTION

Candidate Name  
**SPARTZ, VICTORIA, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify)  
State: IN District: 05

Date of Disbursement

MM / DD / YYYY  
09 / 17 / 2021

FEC Identification Number

**C** C00737767

**Transaction ID : SB23.I17705**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. VICTORIA SPARTZ FOR CONGRESS**

Mailing Address PO BOX 505

City NOBLESVILLE State IN Zip Code 46061

Purpose of Disbursement  
POLITICAL CONTRIBUTION

Candidate Name  
**SPARTZ, VICTORIA, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify) ▼  
State: IN District: 05

Date of Disbursement

MM / DD / YYYY  
09 / 17 / 2021

FEC Identification Number

**C** C00737767

**Transaction ID : SB23.I17706**

Amount of Each Disbursement this Period

2500.00

Memo Item

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

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

7500.00

**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)  
**Innovation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. BUILDING LEADERSHIP AND INSPIRING NEW ENTERPRISE PAC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2021

Mailing Address P. O. BOX 96

FEC Identification Number

**C** C00489427

**Transaction ID : SB23.I17686**

Amount of Each Disbursement this Period

5000.00

Memo Item

City ST. ELIZABETH State MO Zip Code 65075

Purpose of Disbursement  
POLITICAL CONTRIBUTION

Category/Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2021  
 Primary  General  
 Other (specify) PAC

State: District:

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

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

Mailing Address

FEC Identification Number

**C**

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:

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

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

Mailing Address

FEC Identification Number

**C**

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)..... ▶

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

5000.00

52500.00