

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

E-PAC

ADDRESS (number and street) PO BOX 500

Check if different than previously reported. (ACC) GLEN FALLS NY 12801

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

C C00570945 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

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

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

Election on M M / D D / Y Y Y Y Y Y in the State of

- (d) 30-Day POST-Election Report for the:
- | | | |
|----------------------------------------|---------------------------------------|----------------------------------------|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|----------------------------------------|---------------------------------------|----------------------------------------|

Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y Y Y 10 / 01 / 2022 through M M / D D / Y Y Y Y Y Y 10 / 19 / 2022

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

HOBBS, CABELL, , ,

Type or Print Name of Treasurer

Signature of Treasurer HOBBS, CABELL, , , [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 10 / 27 / 2022

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

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

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

E-PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2022"/>	<input type="text" value="381350.74"/>	<input type="text" value="381350.74"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="207314.65"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="20896.62"/>	<input type="text" value="438666.78"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="228211.27"/>	<input type="text" value="820017.52"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="13828.22"/>	<input type="text" value="605634.47"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="214383.05"/>	<input type="text" value="214383.05"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

E-PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	10837.50	84515.22
(ii) Unitemized	1433.38	20821.89
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	12270.88	105337.11
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	166033.28
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	12270.88	271370.39
12. Transfers From Affiliated/Other Party Committees.....	8625.74	147296.39
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	20000.00
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)).....▶	20896.62	438666.78
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	20896.62	438666.78

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	3828.22	200384.47
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	3828.22	200384.47
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10000.00	405000.00
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	250.00
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)) ..	13828.22	605634.47
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	13828.22	605634.47

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	12270.88	271370.39
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	12270.88	271370.39
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	3828.22	200384.47
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	3828.22	200384.47

**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 19
<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

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)
E-PAC

A. WINRED
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219-1891
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FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
91507.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	11	/	2022

Transaction ID : SA11C.662392

Amount of Each Receipt this Period
693.68

Memo Item
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

B. DESCHAINES, CARROLL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1334 S OAKHAVEN DR.

City ANAHEIM	State CA	Zip Code 92804-4726
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	11	/	2022

Transaction ID : SA11A.662438

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

C. MUELLER, JOSEPH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 42 NASSAU ROAD

City POUGHKEEPSIE	State NY	Zip Code 12601-5640
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
415.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	11	/	2022

Transaction ID : SA11A.662423

Amount of Each Receipt this Period
12.50

Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....	62.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 19
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
E-PAC

A. O'DONNELL, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 MORGAN WAY
 City TYNGSBORO State MA Zip Code 01879-2438
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TYNGSBORO EYE CARE Occupation (for Individual) OPTOMETRIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 11 / 2022
Transaction ID : SA11A.662429
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION
 EARMARKED FROM WINRED

B. RICHARDS, MARY, D., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 330 6TH ST S
 City NAPLES State FL Zip Code 34102-6349
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 358.33

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 11 / 2022
Transaction ID : SA11A.662440
 Amount of Each Receipt this Period 50.00
 Memo Item
 CONTRIBUTION
 EARMARKED FROM WINRED

C. SHELTON, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4124 KINGSFERRY
 City ARLINGTON State TX Zip Code 76016-3636
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 11 / 2022
Transaction ID : SA11A.662433
 Amount of Each Receipt this Period 25.00
 Memo Item
 CONTRIBUTION
 EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 19
<input 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)
E-PAC

A. WINRED
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219-1891
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
91507.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2022

Transaction ID : SA11C.666613

Amount of Each Receipt this Period
11613.87

Memo Item
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

B. DILL, JAMES, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 15 MILL ST.

City LANSING	State NY	Zip Code 14882-8917
-----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2022

Transaction ID : SA11A.666681

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

C. EISEN, JOSH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 182 UNION AVE

City HARRISON	State NY	Zip Code 10528-2009
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FEC ID number of contributing federal political committee. **C**

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

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
10	/	18	/	2022

Transaction ID : SA11A.666688

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....	5100.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 19
	<input 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)
E-PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. HUNT, R THOMAS, , ,			Date of Receipt M M / D D / Y Y Y Y Y 10 / 18 / 2022
Mailing Address 3900 KRUSE WAY PLACE			Transaction ID : SA11A.666665
City LAKE OSWEGO	State OR	Zip Code 97035-2512	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED	EARMARKED FROM WINRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 369.14		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. HUNT, R THOMAS, , ,			Date of Receipt M M / D D / Y Y Y Y Y 10 / 18 / 2022
Mailing Address 3900 KRUSE WAY PLACE			Transaction ID : SA11A.666684
City LAKE OSWEGO	State OR	Zip Code 97035-2512	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED	EARMARKED FROM WINRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 369.14		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. HUNT, R THOMAS, , ,			Date of Receipt M M / D D / Y Y Y Y Y 10 / 18 / 2022
Mailing Address 3900 KRUSE WAY PLACE			Transaction ID : SA11A.666685
City LAKE OSWEGO	State OR	Zip Code 97035-2512	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED	EARMARKED FROM WINRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 369.14		

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 19
	<input 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)
E-PAC

A. HYMAN, DIANE, U., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 93
 City DIAMOND POINT State NY Zip Code 12824-0093
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 18 / 2022
Transaction ID : SA11A.666675
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

B. LUBARD, STEPEHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4812 DON JUAN PLACE
 City WOODLAND HILLS State CA Zip Code 91364-4704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) S-L TECH Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 10 / 18 / 2022
Transaction ID : SA11A.666682
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

C. MASSEY, MICHAEL, HOLT, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 85 MERRIMAC STREET
 City BOSTON State MA Zip Code 02114-4728
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OWNER Occupation (for Individual) MH MASSEY & CO LLC
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 18 / 2022
Transaction ID : SA11A.666689
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION
 EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....▶	5150.00
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 11 OF 19
	(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)
E-PAC

A. RICHARDS, MARY, D., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 330 6TH ST S

City NAPLES	State FL	Zip Code 34102-6349
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
358.33

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		18		2022

Transaction ID : SA11A.666679

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

B. RICHARDS, MARY, D., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 330 6TH ST S

City NAPLES	State FL	Zip Code 34102-6349
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
358.33

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		18		2022

Transaction ID : SA11A.666683

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

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

Mailing Address 535 HUNGRY HILL RD

City LONG EDDY	State NY	Zip Code 12760-1459
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		18		2022

Transaction ID : SA11A.666668

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional).....	175.00
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 12 OF 19
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
E-PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
TOMEIO, LYNN, , ,

Mailing Address 19 ELKO LAKE DR.

City PARKSVILLE	State NY	Zip Code 12768-6330
--------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 18 / 2022

Transaction ID : SA11A.666666

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

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

SUBTOTAL of Receipts This Page (optional).....▶	25.00
TOTAL This Period (last page this line number only).....▶	10837.50

**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 19
<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)
E-PAC

A. ELISE VICTORY FUND
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 500

City GLENS FALLS	State NY	Zip Code 12801-0500
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00630632

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
147296.39

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 19 / 2022
Transaction ID : SA12.668454

Amount of Each Receipt this Period
8625.74

Memo Item
TRANSFER

B. BRENNAN, DON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 681 WYCKOFF AVENUE

City MAHWAH	State NJ	Zip Code 07430-3016
----------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)
AQUASPACE BY MASTERSON OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2100.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 19 / 2022
Transaction ID : SA.667005.3.0027

Amount of Each Receipt this Period
2100.00

Memo Item
TRANSFER
TRANSFER FROM ELISE VICTORY FUND

C. FITZPATRICK, MARY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 624 EAGLE WATCH LANE

City OSPREY	State FL	Zip Code 34229-9326
----------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)
NONE COMMUNITY VOLUNTEER

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2900.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2022
Transaction ID : SA.666787.3.0027

Amount of Each Receipt this Period
2900.00

Memo Item
TRANSFER
TRANSFER FROM ELISE VICTORY FUND

SUBTOTAL of Receipts This Page (optional).....	8625.74
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 19
<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)
E-PAC

A. LAGANAS, ELIZA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2929
 City MERRICK State NY Zip Code 11566-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE LAW OFFICE OF ELIZA D. STAHL, PC Occupation (for Individual) LAWYER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 2900.00

Date of Receipt 10 / 11 / 2022
Transaction ID : SA.662517.3.0027
 Amount of Each Receipt this Period 2900.00
 Memo Item
 TRANSFER
 TRANSFER FROM ELISE VICTORY FUND

B. SEMCER, FRANK, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27603 RIVERBANK DRIVE
 City BONITA SPRINGS State FL Zip Code 34134-2645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MICRO STAMPING CORP Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 1000.00

Date of Receipt 10 / 17 / 2022
Transaction ID : SA.664251.3.0027
 Amount of Each Receipt this Period 1000.00
 Memo Item
 TRANSFER
 TRANSFER FROM ELISE VICTORY FUND

C. STANFILL, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43 HUCKLEBERRY HILL RD
 City LINCOLN State MA Zip Code 01773-3508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COORDINATESS OPERATIONS LLC Occupation (for Individual) SOFTWARE ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 5000.00

Date of Receipt 10 / 15 / 2022
Transaction ID : SA.663806.3.0027
 Amount of Each Receipt this Period 5000.00
 Memo Item
 TRANSFER
 TRANSFER FROM ELISE VICTORY FUND

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	8625.74

**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)
E-PAC

Full Name (Last, First, Middle Initial) A. BRENNAN, FRANCIS, , ,		Date of Disbursement MM / DD / YYYY 10 / 03 / 2022
Mailing Address 79 POTOMAC AVE SE #606		FEC Identification Number C [REDACTED] Transaction ID : SB21B.7893 Amount of Each Disbursement this Period 500.00
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement DIGITAL CONSULTING/POLITICAL STRATEGY CONSULTING		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. RENNA, RAYCHEL, , ,		Date of Disbursement MM / DD / YYYY 10 / 03 / 2022
Mailing Address 333 8TH STREET SE APT 410		FEC Identification Number C [REDACTED] Transaction ID : SB21B.7895 Amount of Each Disbursement this Period 1750.00
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. GOOGLE		Date of Disbursement MM / DD / YYYY 10 / 03 / 2022
Mailing Address 1600 AMPHITHEATRE PARKWAY		FEC Identification Number C [REDACTED] Transaction ID : SB21B.7901 Amount of Each Disbursement this Period 24.00
City MOUNTAIN VIEW	State CA	Zip Code 94043
Purpose of Disbursement WEB SERVICE		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

2274.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
E-PAC

Full Name (Last, First, Middle Initial) A. ZOOM		Date of Disbursement MM / DD / YYYY 10 / 03 / 2022
Mailing Address 55 ALMADEN BLVD SUITE 600		FEC Identification Number C [] Transaction ID : SB21B.7900 Amount of Each Disbursement this Period [] 15.74
City SAN JOSE	State CA	Zip Code 95113
Purpose of Disbursement WEB SERVICE		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. USPS		Date of Disbursement MM / DD / YYYY 10 / 04 / 2022
Mailing Address 16 HUDSON AVENUE		FEC Identification Number C [] Transaction ID : SB21B.7896 Amount of Each Disbursement this Period [] 27.90
City GLENS FALLS	State NY	Zip Code 12801
Purpose of Disbursement POSTAGE		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. WINRED TECHNICAL SERVICES LLC		Date of Disbursement MM / DD / YYYY 10 / 11 / 2022
Mailing Address 1776 WILSON BLVD #530		FEC Identification Number C [] Transaction ID : SB21B.7890 Amount of Each Disbursement this Period [] 187.21
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement CREDIT CARD MERCHANT FEE		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

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

[] 230.85
[]

**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)
E-PAC

A. CMDI

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL ROAD STE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement DATABASE MANAGEMENT SVC

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 12 / 2022

FEC Identification Number: C

Transaction ID : SB21B.7892

Amount of Each Disbursement this Period: 500.00

Memo Item

B. SUNOCO LP HQ

Full Name (Last, First, Middle Initial)

Mailing Address 8111 WESTCHESTER DRIVE

City DALLAS State TX Zip Code 75225

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 12 / 2022

FEC Identification Number: C

Transaction ID : SB21B.7897

Amount of Each Disbursement this Period: 60.24

Memo Item

C. SUNOCO LP HQ

Full Name (Last, First, Middle Initial)

Mailing Address 8111 WESTCHESTER DRIVE

City DALLAS State TX Zip Code 75225

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 12 / 2022

FEC Identification Number: C

Transaction ID : SB21B.7898

Amount of Each Disbursement this Period: 67.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 627.24

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)
E-PAC

Full Name (Last, First, Middle Initial) A. COLONY GRILL PORT CHESTER			Date of Disbursement MM / DD / YYYY 10 / 13 / 2022	
Mailing Address 35 ABENDROTH			FEC Identification Number C [REDACTED] Transaction ID : SB21B.7894 Amount of Each Disbursement this Period 87.48	
City PORT CHESTER	State NY	Zip Code 10573	Category/Type [REDACTED]	
Purpose of Disbursement FOOD/BEVERAGES		Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:	<input type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) B. SHELL OIL HQ			Date of Disbursement MM / DD / YYYY 10 / 13 / 2022	
Mailing Address PO BOX 2463			FEC Identification Number C [REDACTED] Transaction ID : SB21B.7899 Amount of Each Disbursement this Period 62.58	
City HOUSTON	State TX	Zip Code 77252	Category/Type [REDACTED]	
Purpose of Disbursement TRAVEL		Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:	<input type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) C. WINRED TECHNICAL SERVICES LLC			Date of Disbursement MM / DD / YYYY 10 / 18 / 2022	
Mailing Address 1776 WILSON BLVD #530			FEC Identification Number C [REDACTED] Transaction ID : SB21B.7891 Amount of Each Disbursement this Period 546.07	
City ARLINGTON	State VA	Zip Code 22209	Category/Type [REDACTED]	
Purpose of Disbursement CREDIT CARD MERCHANT FEE		Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:	<input type="checkbox"/> Memo Item			

SUBTOTAL of Disbursements This Page (optional).....▶	696.13
TOTAL This Period (last page this line number only).....▶	3828.22

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)
E-PAC

A. LEORA LEVY FOR US SENATE INC

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 447

City CHESHIRE State CT Zip Code 06410

Purpose of Disbursement CONTRIBUTION

Candidate Name LEVY, LEORA, , ,

Office Sought: House Senate President

Disbursement For: 2022 Primary General Other (specify) ▼

State: CT District: 00

Date of Disbursement: 10 / 11 / 2022

FEC Identification Number: C00804377

Transaction ID : SB23.5678

Amount of Each Disbursement this Period: 5000.00

Memo Item

B. BRITT FOR ALABAMA INC

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 3759

City MONTGOMERY State AL Zip Code 36109

Purpose of Disbursement CONTRIBUTION

Candidate Name BRITT, KATIE, , ,

Office Sought: House Senate President

Disbursement For: 2022 Primary General Other (specify) ▼

State: AL District: 00

Date of Disbursement: 10 / 19 / 2022

FEC Identification Number: C00781443

Transaction ID : SB23.5679

Amount of Each Disbursement this Period: 5000.00

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

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