

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED FEC MAILCENTER

2022 JUL 29 14:01

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. NATIONAL ASSOCIATION OF PLUMBING-HEATING-COOLING CONTRACTORS PAC AKA PHCC-PAC

12FE4M5

ADDRESS (number and street) 180 S WASHINGTON, SUITE 100 FALLS CHURCH VA 22046

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C00157875

3. IS THIS REPORT NEW OR AMENDED

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), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11), Dec 20 (M12), Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S)

Election on [MM/DD/YYYY] in the State of []

- (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

Election on [MM/DD/YYYY] in the State of []

5. Covering Period 04 01 2022 through 06 30 2022

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 AHEARN, MICHAEL, . .

Signature of Treasurer AHEARN, MICHAEL, . . Date 07 13 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.

Table with 8 columns and 1 row for Office Use Only.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

NATIONAL ASSOCIATION OF PLUMBING-HEATING-COOLING CONTRACTORS PAC AKA PHCC-PAC

Report Covering the Period: From:

MM / DD / YYYY
04 / 01 / 2022

To:

MM / DD / YYYY
06 / 30 / 2022

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, YYYYYY 2022		36,000.96
(b) Cash on Hand at Beginning of Reporting Period.....	34,000.96	
(c) Total Receipts (from Line 19)	3,000.00	3,000.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	37,000.96	39,000.96
7. Total Disbursements (from Line 31).....	3,000.00	3,000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	34,000.96	36,000.96
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY 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

NONDISCRIMINATION

DETAILED SUMMARY PAGE
of Disbursements

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II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3,000.00	5,000.00
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	0.00
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)) ..	3,000.00	5,000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3,000.00	5,000.00

DETAILED SUMMARY PAGE
of Disbursements

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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)	3000.00	3000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

NON-PROFIT ORGANIZATION

**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 7
	<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)
NATIONAL ASSOCIATION OF PLUMBING-HEATING-COOLING CONTRACTORS PAC AKA PHCC-PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Long, Joel, , ,		Date of Receipt
Mailing Address 1535 W May Ave		<input type="checkbox"/> 05 / <input type="checkbox"/> 04 / <input type="checkbox"/> 2022
City Gastonia	State NC	Zip Code 28052
FEC ID number of contributing federal political committee. C		Transaction ID : SA11AI.4099
Name of Employer (for Individual) GSM Services, Inc.		Occupation (for Individual) Business Owner
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="checkbox"/> Memo Item Contribution
	<input type="checkbox"/> 1000.00	<input type="checkbox"/> 1000.00

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Whitney, Joseph, , ,		Date of Receipt
Mailing Address 15 Hawk Hill Ln		<input type="checkbox"/> 05 / <input type="checkbox"/> 31 / <input type="checkbox"/> 2022
City Ipswich	State MA	Zip Code 01938
FEC ID number of contributing federal political committee. C		Transaction ID : SA11AI.4101
Name of Employer (for Individual) Garden Street Properties, LLC		Occupation (for Individual) Business Owner
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="checkbox"/> Memo Item Contribution
	<input type="checkbox"/> 2000.00	<input type="checkbox"/> 2000.00

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name		Date of Receipt
Mailing Address		<input type="checkbox"/> / <input type="checkbox"/> / <input type="checkbox"/>
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
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 ▼	<input type="checkbox"/> Memo Item
	<input type="checkbox"/>	<input type="checkbox"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="checkbox"/> 3000.00
TOTAL This Period (last page this line number only).....▶	<input type="checkbox"/> 3000.00

NONDISCRIMINATION POLICY

**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)						PAGE 7 OF 7		
	<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

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF PLUMBING-HEATING-COOLING CONTRACTORS PAC AKA.PHCC-PAC

Full Name (Last, First, Middle Initial) A. Cuellar, Henry, , ,			Date of Disbursement MM / DD / YYYY 05 / 17 / 2022		
Mailing Address 1519 WASHINGTON STREET SUITE 200			FEC Identification Number C00371302 Transaction ID : SB23.4111		
City LAREDO	State TX	Zip Code 78040	Amount of Each Disbursement this Period 1000.00		
Purpose of Disbursement Contribution			Memo Item <input type="checkbox"/>		
Candidate Name TEXANS FOR HENRY CUELLAR, , ,			Category/Type 011		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: TX District: 28					

Full Name (Last, First, Middle Initial) B. Foxx, Virginia, , ,			Date of Disbursement MM / DD / YYYY 05 / 17 / 2022		
Mailing Address PO BOX 2676			FEC Identification Number C00386748 Transaction ID : SB23.4105		
City BOONE	State NC	Zip Code 28607	Amount of Each Disbursement this Period 1000.00		
Purpose of Disbursement Contribution			Memo Item <input type="checkbox"/>		
Candidate Name VIRGINIA FOXX FOR CONGRESS, , ,			Category/Type 011		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: NC District: 05					

Full Name (Last, First, Middle Initial) C. Krohmer, Ben, , ,			Date of Disbursement MM / DD / YYYY 05 / 17 / 2022		
Mailing Address 507 East 16th Ave			FEC Identification Number C Transaction ID : SB23.4114		
City MITCHELL	State SD	Zip Code 57301	Amount of Each Disbursement this Period 1000.00		
Purpose of Disbursement Contribution			Memo Item <input type="checkbox"/>		
Candidate Name BEN KROHMER FOR SOUTH DAKOTA, , ,			Category/Type 011		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: SD District: 20					

SUBTOTAL of Disbursements This Page (optional).....▶	3000.00
TOTAL This Period (last page this line number only).....▶	3000.00

NON-CONFIDENTIAL

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt <i>7/20/22</i>
<input type="checkbox"/> USPS First Class Mail	Postmarked Date of Receipt
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

SPM
 PREPARER *7/20/22*
DATE PREPARED
 (3/2015)

NON-PROFIT ORGANIZATION