

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Nixon Peabody LLP 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"/>		43336.05
(b) Cash on Hand at Beginning of Reporting Period.....	39138.55	
(c) Total Receipts (from Line 19)	7635.00	14195.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	46773.55	57531.05
7. Total Disbursements (from Line 31).....	6692.07	17449.57
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	40081.48	40081.48
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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Nixon Peabody LLP PAC

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2022 To: M M / D D / Y Y Y Y 09 / 30 / 2022

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).....	3180.00	3854.00
(ii) Unitemized	4455.00	10341.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	7635.00	14195.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	7635.00	14195.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	7635.00	14195.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	7635.00	14195.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

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	1692.07	4199.57
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1692.07	4199.57
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	13250.00
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)) ..	6692.07	17449.57
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6692.07	17449.57

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	7635.00	14195.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7635.00	14195.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1692.07	4199.57
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1692.07	4199.57

**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 14
	<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)
Nixon Peabody LLP PAC

A. ANDERSON, DEBORAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 SPRUCE STREET, APT. 3
 City BOSTON State MA Zip Code 02108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 530.00

Date of Receipt 08 / 01 / 2022
Transaction ID : SA11AI.6243
 Amount of Each Receipt this Period 456.00
 Memo Item

B. BURNHAM, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1003 KIEFER RIDGE DRIVE
 City BALLWIN State MO Zip Code 63021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 223.00

Date of Receipt 08 / 01 / 2022
Transaction ID : SA11AI.6250
 Amount of Each Receipt this Period 120.00
 Memo Item

C. COHEN, LAWRENCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 LAURUS LANE
 City NEWTON State MA Zip Code 02459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 733.00

Date of Receipt 08 / 01 / 2022
Transaction ID : SA11AI.6253
 Amount of Each Receipt this Period 509.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1085.00
TOTAL This Period (last page this line number only).....▶	

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

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

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NAME OF COMMITTEE (In Full)
Nixon Peabody LLP PAC

A. CONNOLLY, SARAH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 21 BEECH ROAD

City Weston	State MA	Zip Code 02493
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
226.00

Date of Receipt
MM / DD / YYYY
08 / 01 / 2022

Transaction ID : SA11AI.6255

Amount of Each Receipt this Period
222.00

Memo Item

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

Mailing Address 1101 HALESWORTH DRIVE

City POTOMAC	State MD	Zip Code 20854
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
204.00

Date of Receipt
MM / DD / YYYY
08 / 01 / 2022

Transaction ID : SA11AI.6265

Amount of Each Receipt this Period
200.00

Memo Item

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

Mailing Address 212 MARINE STREET #303

City SANTA MONICA	State CA	Zip Code 90405
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
260.00

Date of Receipt
MM / DD / YYYY
08 / 01 / 2022

Transaction ID : SA11AI.6270

Amount of Each Receipt this Period
144.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	566.00
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 14
	<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)
Nixon Peabody LLP PAC

A. GORDON, JILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 212 MARINE STREET #303
 City SANTA MONICA State CA Zip Code 90405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 404.00

Date of Receipt 09 / 30 / 2022
Transaction ID : SA11AI.6345
 Amount of Each Receipt this Period 144.00
 Memo Item

B. KEEFE, CHRISTOPHER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 118 MANNING STREET
 City NEEDHAM State MA Zip Code 02492
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 218.00

Date of Receipt 09 / 30 / 2022
Transaction ID : SA11AI.6350
 Amount of Each Receipt this Period 59.00
 Memo Item

C. LEVY, SETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 207 LARIAT COURT
 City SAGLE State ID Zip Code 83860
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 08 / 01 / 2022
Transaction ID : SA11AI.6277
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	303.00
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 14
	<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)
Nixon Peabody LLP PAC

A. LEVY, SETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 207 LARIAT COURT
 City SAGLE State ID Zip Code 83860
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt 09 / 30 / 2022
Transaction ID : SA11AI.6352
 Amount of Each Receipt this Period 100.00
 Memo Item

B. MULLEN, MATTHEW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8508 HOWELL ROAD
 City BETHESDA State MD Zip Code 20817
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 359.00

Date of Receipt 08 / 01 / 2022
Transaction ID : SA11AI.6287
 Amount of Each Receipt this Period 293.00
 Memo Item

C. MULLEN, MATTHEW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8508 HOWELL ROAD
 City BETHESDA State MD Zip Code 20817
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 652.00

Date of Receipt 09 / 30 / 2022
Transaction ID : SA11AI.6356
 Amount of Each Receipt this Period 293.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	686.00
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 14
	<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)
Nixon Peabody LLP PAC

A. SHKOLNIK, BARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 809 CENTRAL
 City WILMETTE State IL Zip Code 60091
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXONPEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 218.00

Date of Receipt 08 / 01 / 2022
Transaction ID : SA11AI.6302
 Amount of Each Receipt this Period 205.00
 Memo Item

B. STAUBER, THADDEUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2408 WILSON AVENUE
 City VENICE State CA Zip Code 90291
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 239.00

Date of Receipt 09 / 30 / 2022
Transaction ID : SA11AI.6367
 Amount of Each Receipt this Period 81.00
 Memo Item

C. WEIKERT, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 91 TIGER TAIL COURT
 City ORINDA State CA Zip Code 94563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NIXON PEABODY LLP Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 242.00

Date of Receipt 08 / 01 / 2022
Transaction ID : SA11AI.6308
 Amount of Each Receipt this Period 127.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	413.00
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 11 OF 14
<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)
Nixon Peabody LLP PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
WEIKERT, ROBERT, , ,

Mailing Address **91 TIGER TAIL COURT**

City ORINDA	State CA	Zip Code 94563
-----------------------	--------------------	--------------------------

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

Name of Employer (for Individual) NIXON PEABODY LLP	Occupation (for Individual) ATTORNEY
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
369.00

Date of Receipt
09 / 30 / 2022

Transaction ID : SA11A1.6371

Amount of Each Receipt this Period
127.00

Memo Item

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

Mailing Address

City	State	Zip Code
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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

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	127.00
TOTAL This Period (last page this line number only).....▶	3180.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Nixon Peabody LLP PAC

Full Name (Last, First, Middle Initial) A. JP MORGAN CHASE BANK		Date of Disbursement MM / DD / YYYY 07 / 15 / 2022
Mailing Address CHASE SQUARE		FEC Identification Number C [REDACTED] Transaction ID : SB21B.6329 Amount of Each Disbursement this Period [REDACTED] 132.45
City ROCHESTER	State NY	Zip Code 14692
Purpose of Disbursement Bank Service Charge		Category/ Type 001
Candidate Name		Memo Item <input type="checkbox"/>
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: _____	

Full Name (Last, First, Middle Initial) B. JP MORGAN CHASE BANK		Date of Disbursement MM / DD / YYYY 08 / 15 / 2022
Mailing Address CHASE SQUARE		FEC Identification Number C [REDACTED] Transaction ID : SB21B.6330 Amount of Each Disbursement this Period [REDACTED] 134.90
City ROCHESTER	State NY	Zip Code 14692
Purpose of Disbursement Bank Service Charge		Category/ Type 001
Candidate Name		Memo Item <input type="checkbox"/>
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: _____	

Full Name (Last, First, Middle Initial) C. JP MORGAN CHASE BANK		Date of Disbursement MM / DD / YYYY 09 / 15 / 2022
Mailing Address CHASE SQUARE		FEC Identification Number C [REDACTED] Transaction ID : SB21B.6338 Amount of Each Disbursement this Period [REDACTED] 120.97
City ROCHESTER	State NY	Zip Code 14692
Purpose of Disbursement		Category/ Type 001
Candidate Name		Memo Item <input type="checkbox"/>
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: _____	

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

388.32

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)
Nixon Peabody LLP PAC

Full Name (Last, First, Middle Initial) A. Nixon Peabody LLP PAC		Date of Disbursement MM / DD / YYYY 08 / 08 / 2022	
Mailing Address 1300 Clinton Square		FEC Identification Number C 000404178 Transaction ID : SB21B.6332	
City Rochester	State NY	Zip Code 14604	Amount of Each Disbursement this Period 1303.75
Purpose of Disbursement Professional Fee		Category/Type 001	Memo Item <input type="checkbox"/>
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:			

Full Name (Last, First, Middle Initial) B.		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		Category/Type	Memo Item <input type="checkbox"/>
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:			

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		Category/Type	Memo Item <input type="checkbox"/>
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:			

SUBTOTAL of Disbursements This Page (optional).....▶	1303.75
TOTAL This Period (last page this line number only).....▶	1692.07

**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)
Nixon Peabody LLP PAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF ALLAN FUNG

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2022

Mailing Address PO BOX 8542

FEC Identification Number

C C00805002

Transaction ID : SB23.6333

Amount of Each Disbursement this Period

5000.00

Memo Item

City CRANSTON State RI Zip Code 02920

Purpose of Disbursement

011
Category/
Type

Candidate Name
FUNG, ALLEN, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2022
 Primary General
 Other (specify) ▼

State: RI District: 02

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).....▶

5000.00

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

5000.00