

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**
PAC FOR GOOD

ADDRESS (number and street) P.O. BOX 120085
Check if different than previously reported. (ACC) SAN DIEGO CA 92112

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00768887 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on [MM] / [DD] / [YYYY] in the State of []
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on [MM] / [DD] / [YYYY] in the State of []

5. Covering Period [01] / [01] / [2021] through [06] / [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.
Petterson, Jay, , ,
Type or Print Name of Treasurer

Signature of Treasurer *Petterson, Jay, , ,* [Electronically Filed] Date [07] / [20] / [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

PAC FOR GOOD

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"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="0.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="37000.00"/>	<input type="text" value="37000.00"/>
(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="37000.00"/>	<input type="text" value="37000.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="6467.57"/>	<input type="text" value="6467.57"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="30532.43"/>	<input type="text" value="30532.43"/>
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

PAC FOR GOOD

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).....	36000.00	36000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	36000.00	36000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	1000.00	1000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	37000.00	37000.00
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)).....▶	37000.00	37000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	37000.00	37000.00

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	3217.57	3217.57
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	3217.57	3217.57
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3250.00	3250.00
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)) ..	6467.57	6467.57
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6467.57	6467.57

DETAILED SUMMARY PAGE
of Disbursements

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)	37000.00	37000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	37000.00	37000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	3217.57	3217.57
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	3217.57	3217.57

**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 16
	<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	

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)
PAC FOR GOOD

A. Gaffen, Yehudi, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5960 Cornerstone Ct W

City San Diego	State CA	Zip Code 92121
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Gafcon Inc	Occupation (for Individual) CEO
-------------------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
02 / 28 / 2021

Transaction ID : SA11AI.4099

Amount of Each Receipt this Period
5000.00

Memo Item
Earmarked Contribution: See Below

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

Mailing Address PO BOX 441146

City SOMERVILLE	State MA	Zip Code 02144
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FEC ID number of contributing federal political committee. **C** C00401224

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

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
02 / 24 / 2021

Transaction ID : SA11AI.4099.0

Amount of Each Receipt this Period
5000.00

Memo Item
Note: Above Contribution earmarked through this organization

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

Mailing Address 2728 Ocean Front

City Del Mar	State CA	Zip Code 92014
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Jacobs Investment Company LLC	Occupation (for Individual) Investor
--------------------------------------------------------------------	-----------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
03 / 07 / 2021

Transaction ID : SA11AI.4113

Amount of Each Receipt this Period
5000.00

Memo Item
Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....	10000.00
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 7 OF 16
	<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)
PAC FOR GOOD

A. ACTBLUE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 441146

City SOMERVILLE	State MA	Zip Code 02144
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FEC ID number of contributing federal political committee. **C** C00401224

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 02 / 2021
Transaction ID : SA11AI.4113.0

Amount of Each Receipt this Period
5000.00

Memo Item
Note: Above Contribution earmarked through this organization

B. Jacobs, Genevieve, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 8562 El Paseo Grande

City La Jolla	State CA	Zip Code 92014
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)
Not Employed Not Employed

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
03 / 31 / 2021
Transaction ID : SA11AI.4116

Amount of Each Receipt this Period
5000.00

Memo Item
Earmarked Contribution: See Below

C. ACTBLUE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 441146

City SOMERVILLE	State MA	Zip Code 02144
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FEC ID number of contributing federal political committee. **C** C00401224

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
20000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 30 / 2021
Transaction ID : SA11AI.4116.0

Amount of Each Receipt this Period
5000.00

Memo Item
Note: Above Contribution earmarked through this organization

SUBTOTAL of Receipts This Page (optional).....	5000.00
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 16
<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)
PAC FOR GOOD

A. Jacobs, Irwin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2710 Inverness Ct
 City La Jolla State CA Zip Code 92037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 17 / 2021
Transaction ID : SA11AI.4127
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. Jacobs, Jerri-Ann, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2728 Ocean Front
 City Del Mar State CA Zip Code 92014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 07 / 2021
Transaction ID : SA11AI.4109
 Amount of Each Receipt this Period 5000.00
 Memo Item
 Earmarked Contribution: See Below

C. ACTBLUE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 441146
 City SOMERVILLE State MA Zip Code 02144
 FEC ID number of contributing federal political committee. **C** C00401224
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 03 / 02 / 2021
Transaction ID : SA11AI.4109.0
 Amount of Each Receipt this Period 5000.00
 Memo Item
 Note: Above Contribution earmarked through this organization

SUBTOTAL of Receipts This Page (optional).....	10000.00
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 16
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
PAC FOR GOOD

A. Jacobs, Joan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2710 Inverness Ct
 City La Jolla State CA Zip Code 92037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 17 / 2021
Transaction ID : SA11AI.4129
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. Jacobs, Paul, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8562 El Paseo Grande
 City La Jolla State CA Zip Code 92037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) XCOM Labs Occupation (for Individual) Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 31 / 2021
Transaction ID : SA11AI.4119
 Amount of Each Receipt this Period 5000.00
 Memo Item
 Earmarked Contribution: See Below

C. ACTBLUE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 441146
 City SOMERVILLE State MA Zip Code 02144
 FEC ID number of contributing federal political committee. **C** C00401224
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 03 / 30 / 2021
Transaction ID : SA11AI.4119.0
 Amount of Each Receipt this Period 5000.00
 Memo Item
 Note: Above Contribution earmarked through this organization

SUBTOTAL of Receipts This Page (optional).....▶	10000.00
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 16
	<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)
PAC FOR GOOD

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Vizas, Kathryn, , ,

Mailing Address 1 Plaza Dr

City Berkeley	State CA	Zip Code 94705
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed
---------------------------------------------------	---------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2021

Transaction ID : SA11AI.4122

Amount of Each Receipt this Period
1000.00

Memo Item
Earmarked Contribution: See Below

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

Mailing Address PO BOX 441146

City SOMERVILLE	State MA	Zip Code 02144
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FEC ID number of contributing federal political committee. **C** C00401224

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

Aggregate Year-to-Date ▼
30000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	28	/	2021

Transaction ID : SA11AI.4122.0

Amount of Each Receipt this Period
5000.00

Memo Item
Note: Above Contribution earmarked through this organization

C. 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)
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	36000.00

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 11 OF 16
<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)
PAC FOR GOOD

A. WIN BACK PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 501 W. BROADWAY STE A 192

City SAN DIEGO	State CA	Zip Code 92101
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FEC ID number of contributing federal political committee. **C** C00762856

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 21 / 2021

Transaction ID : SA11C.4125

Amount of Each Receipt this Period
1000.00

Memo Item
Earmarked Contribution: See Below

B. LEAGUE OF CONSERVATION VOTERS
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1920 L STREET N W SUITE 800

City WASHINGTON	State DC	Zip Code 20037
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FEC ID number of contributing federal political committee. **C** C30000103

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 21 / 2021

Transaction ID : SA11C.4125.0

Amount of Each Receipt this Period
1000.00

Memo Item
Note: Above Contribution earmarked through this organization

C.
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
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	1000.00

**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)
PAC FOR GOOD

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 03 / 07 / 2021
Mailing Address PO Box 441146		FEC Identification Number C [] Transaction ID : SB21B.4157 Amount of Each Disbursement this Period [] 395.00
City Somerville	State MA	Zip Code 02144
Purpose of Disbursement Credit Card Fees		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2021 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 03 / 31 / 2021
Mailing Address PO Box 441146		FEC Identification Number C [] Transaction ID : SB21B.4158 Amount of Each Disbursement this Period [] 395.00
City Somerville	State MA	Zip Code 02144
Purpose of Disbursement Credit Card Fees		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2021 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 06 / 30 / 2021
Mailing Address PO Box 441146		FEC Identification Number C [] Transaction ID : SB21B.4159 Amount of Each Disbursement this Period [] 39.50
City Somerville	State MA	Zip Code 02144
Purpose of Disbursement Credit Card Fees		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2021 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	[] 829.50
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)
PAC FOR GOOD

Full Name (Last, First, Middle Initial)
A. The Frost Group

Mailing Address 3701 Porter St NW

City Washington State DC Zip Code 20016

Purpose of Disbursement Fundraising Consulting

Candidate Name

Office Sought: House Senate President
Disbursement For: 2021 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 09 / 2021

FEC Identification Number: C

Transaction ID : SB21B.4131

Amount of Each Disbursement this Period: 500.00

Memo Item

Full Name (Last, First, Middle Initial)
B. The Frost Group

Mailing Address 3701 Porter St NW

City Washington State DC Zip Code 20016

Purpose of Disbursement Fundraising Consulting

Candidate Name

Office Sought: House Senate President
Disbursement For: 2021 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 08 / 2021

FEC Identification Number: C

Transaction ID : SB21B.4133

Amount of Each Disbursement this Period: 500.00

Memo Item

Full Name (Last, First, Middle Initial)
C. The Frost Group

Mailing Address 3701 Porter St NW

City Washington State DC Zip Code 20016

Purpose of Disbursement Fundraising Consulting

Candidate Name

Office Sought: House Senate President
Disbursement For: 2021 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 06 / 2021

FEC Identification Number: C

Transaction ID : SB21B.4134

Amount of Each Disbursement this Period: 500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1500.00

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)
PAC FOR GOOD

Full Name (Last, First, Middle Initial)
A. The Frost Group

Mailing Address 3701 Porter St NW

City Washington State DC Zip Code 20016

Purpose of Disbursement Fundraising Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2021
 Primary General
 Other (specify) ▼

Category/Type

Date of Disbursement: MM / DD / YYYY
06 / 14 / 2021

FEC Identification Number: C

Transaction ID : SB21B.4136

Amount of Each Disbursement this Period: 500.00

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)..... ▶ 500.00

TOTAL This Period (last page this line number only)..... ▶ 2829.50

**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)
PAC FOR GOOD

A. ALEX PADILLA FOR SENATE

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 777 S. FIGUEROA ST
SUITE 4050

M M M	/	D D D	/	Y Y Y Y Y
04		13		2021

City LOS ANGELES State CA Zip Code 90017

FEC Identification Number

Purpose of Disbursement
Contribution

C	C00765164
---	-----------

Candidate Name
PADILLA, ALEX, , ,

Category/
Type

Transaction ID : SB23.4149

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: CA District: 00

1000.00

Memo Item

B. MELANIE FOR NEW MEXICO

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 51493

M M M	/	D D D	/	Y Y Y Y Y
04		16		2021

City ALBUQUERQUE State NM Zip Code 87181

FEC Identification Number

Purpose of Disbursement
Contribution

C	C00765099
---	-----------

Candidate Name
STANSBURY, MELANIE, , ,

Category/
Type

Transaction ID : SB23.4106

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2021 Primary General Other (specify) Special-General
State: NM District: 01

1000.00

Memo Item

C. MELANIE FOR NEW MEXICO

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 51493

M M M	/	D D D	/	Y Y Y Y Y
05		28		2021

City ALBUQUERQUE State NM Zip Code 87181

FEC Identification Number

Purpose of Disbursement
Contribution

C	C00765099
---	-----------

Candidate Name
STANSBURY, MELANIE, , ,

Category/
Type

Transaction ID : SB23.4144

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2021 Primary General Other (specify) Special-General
State: NM District: 01

1000.00

Memo Item

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

3000.00

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)
PAC FOR GOOD

A. VOTE MAMA

Full Name (Last, First, Middle Initial)

Mailing Address 32 AVON PLACE

City AMITYVILLE State NY Zip Code 11701

Purpose of Disbursement Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: 2021 Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
06 / 11 / 2021

FEC Identification Number: C C00692137

Transaction ID : SB23.4150

Amount of Each Disbursement this Period: 250.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	3250.00