

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 National Restaurant Association PAC (Restaurant PAC)

ADDRESS (number and street) 2055 L Street, NW Suite 700 Washington DC 20036 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00003764 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 02 / 01 / 2024 through 02 / 29 / 2024

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 Roehl, Dan, , ,

Signature of Treasurer Roehl, Dan, , , Date 03 / 19 / 2024

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

National Restaurant Association PAC (Restaurant 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="2024"/>		<input type="text" value="609139.99"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="707430.43"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="43138.52"/>	<input type="text" value="145147.04"/>
(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="750568.95"/>	<input type="text" value="754287.03"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="25.17"/>	<input type="text" value="3743.25"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="750543.78"/>	<input type="text" value="750543.78"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> 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 the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov)**

DETAILED SUMMARY PAGE  
of Receipts

Write or Type Committee Name

National Restaurant Association PAC (Restaurant PAC)

Report Covering the Period: From: 02 / 01 / 2024 To: 02 / 29 / 2024

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).....	38000.00	139600.00
(ii) Unitemized .....	138.52	547.04
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	38138.52	140147.04
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	5000.00	5000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	43138.52	145147.04
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)).....▶	43138.52	145147.04
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	43138.52	145147.04

**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 .....	2525.17	6243.25
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	2525.17	6243.25
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	- 2500.00	- 2500.00
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)) ..	25.17	3743.25
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	25.17	3743.25

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	43138.52	145147.04
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	43138.52	145147.04
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	2525.17	6243.25
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	2525.17	6243.25

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

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

FOR LINE NUMBER: PAGE 6 OF 12  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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 Restaurant Association PAC (Restaurant PAC)**

**A. Brennan, Ralph, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 550 Bienville Street  
 City New Orleans   State LA   Zip Code 70130-2207  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ralph Brennan Restaurant Group, LLC   Occupation (for Individual) President  
 Receipt For:  Primary    General    Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 02 / 05 / 2024  
**Transaction ID : 18075267**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**B. Balestreri, Theodore, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 555 Abrego St  
 City Monterey   State CA   Zip Code 93940-3229  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Sardine Factory   Occupation (for Individual) Chairman & CEO  
 Receipt For:  Primary    General    Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 02 / 06 / 2024  
**Transaction ID : 18075268**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**C. Korsmo, Michelle, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1099 Langley Fork Ln  
 City McLean   State VA   Zip Code 22101-1718  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) National Restaurant Association   Occupation (for Individual) President & CEO  
 Receipt For:  Primary    General    Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 02 / 12 / 2024  
**Transaction ID : 18075269**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 15000.00  
**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 12
	<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)  
**National Restaurant Association PAC (Restaurant PAC)**

**A. Mallet, Rosalyn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6141 Palomino Dr  
 City Plano State TX Zip Code 75024-6036  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Phasenext Hospitality Occupation (for Individual) CEO/President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 02 / 12 / 2024  
**Transaction ID : 18075270**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**B. Hickey, Philip, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 174 Watercolor Way Suite 103-332  
 City Santa Rosa Beach State FL Zip Code 32459-7350  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) WP Orange LLC (and Miller's Ale House) Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 02 / 16 / 2024  
**Transaction ID : 18075271**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 See contribution from WP Orange LLC

**C. Hamer, Gregory, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 3608  
 City Morgan City State LA Zip Code 70381-3608  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Taco Bell - B & G Food Enterprises, LI Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 02 / 19 / 2024  
**Transaction ID : 18075281**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 12
	<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)  
**National Restaurant Association PAC (Restaurant PAC)**

**A. Fox, Don, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 222 Hollowes Cove  
 City Saint Johns State FL Zip Code 32259-9129  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Works by Don M. Fox Occupation (for Individual) Owner  
 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  
 02 / 26 / 2024  
**Transaction ID : 18075282**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

**B. Cabrera, Blanca, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12380 SW 130th St.  
 City Miami State FL Zip Code 33186-6229  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Sergio's Restaurants Occupation (for Individual) Owner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2024  
**Transaction ID : 18075283**  
 Amount of Each Receipt this Period  
 1250.00  
 Memo Item

**C. Gazitua, Carlos, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12380 SW 130th St.  
 City Miami State FL Zip Code 33186-6229  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Sergio's Restaurants Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2024  
**Transaction ID : 18075284**  
 Amount of Each Receipt this Period  
 1250.00  
 Memo Item

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



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 12
	<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)  
**National Restaurant Association PAC (Restaurant PAC)**

**A. Dover, Carol, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 230 South Adams Street  
 City Tallahassee State FL Zip Code 32301-1729  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Florida Restaurant & Lodging Associati Occupation (for Individual) President and CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 28 / 2024  
**Transaction ID : 18075285**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**B. WP Orange LLC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 174 Watercolor Way  
 City Santa Rosa Beach State FL Zip Code 32459  
 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 ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 16 / 2024  
**Transaction ID : 18075492**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	38000.00

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

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

FOR LINE NUMBER: PAGE 10 OF 12  
(check only one)

<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)  
**National Restaurant Association PAC (Restaurant PAC)**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Inspire Brands Inc. Political Action Committee

Mailing Address Three Glenlake Parkway NE 14th FL

City Atlanta	State GA	Zip Code 30328
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FEC ID number of contributing federal political committee. **C** C00492157

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 12 / 2024

**Transaction ID : 18075286**

Amount of Each Receipt this Period  
5000.00

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  
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
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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

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

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)

Form for line numbers 21b-30b with checkboxes. 21b is checked.

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NAME OF COMMITTEE (In Full)
National Restaurant Association PAC (Restaurant PAC)

Form A: Paypal. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Merchant Fee, Candidate Name, Office Sought, Disbursement For, State, District, Date of Disbursement, FEC Identification Number, Transaction ID, Amount of Each Disbursement, and Memo Item.

Form B: PNC Bank. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Merchant Fee, Candidate Name, Office Sought, Disbursement For, State, District, Date of Disbursement, FEC Identification Number, Transaction ID, Amount of Each Disbursement, and Memo Item.

Form C: Heartland Service Centers. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Merchant Fee, Candidate Name, Office Sought, Disbursement For, State, District, Date of Disbursement, FEC Identification Number, Transaction ID, Amount of Each Disbursement, and Memo Item.

SUBTOTAL of Disbursements This Page (optional) 2525.17
TOTAL This Period (last page this line number only) 2525.17

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)

Grid for line numbers: 21b, 22, 23, 26, 27, 28a, 28b, 28c, 29, 30b. Line 23 is checked.

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NAME OF COMMITTEE (In Full)

National Restaurant Association PAC (Restaurant PAC)

Full Name (Last, First, Middle Initial)

A. Balderson For Congress

Mailing Address 4679 Winterset Dr

City Columbus

State OH

Zip Code 43220-8113

Purpose of Disbursement

Original contribution was made on 9/27/23

Category/Type: 011

Candidate Name

Balderson, Troy, , Rep.,

Office Sought: [X] House, [ ] Senate, [ ] President

Disbursement For: 2024. [X] Primary, [ ] General, [ ] Other (specify)

State: OH District: 12

Date of Disbursement

Date: 02 / 06 / 2024

FEC Identification Number

C C00662650

Transaction ID : 18023812

Amount of Each Disbursement this Period

- 2500.00

[ ] Memo Item Original contribution was made on 9/27/23

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought: [ ] House, [ ] Senate, [ ] President

Disbursement For: [ ] Primary, [ ] General, [ ] Other (specify)

State: District:

Date of Disbursement

Date: / /

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

Category/Type

Office Sought: [ ] House, [ ] Senate, [ ] President

Disbursement For: [ ] Primary, [ ] General, [ ] Other (specify)

State: District:

Date of Disbursement

Date: / /

FEC Identification Number

C

Amount of Each Disbursement this Period

[ ] Memo Item

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

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

- 2500.00

- 2500.00