

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Moda, Inc. 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="2021"/>	<input type="text" value="30880.78"/>	<input type="text" value="30880.78"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="55725.77"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="3774.99"/>	<input type="text" value="39119.98"/>
(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="59500.76"/>	<input type="text" value="70000.76"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="6800.00"/>	<input type="text" value="17300.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="52700.76"/>	<input type="text" value="52700.76"/>
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

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Moda, Inc. PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	3774.99	38919.98
(ii) Unitemized	0.00	200.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	3774.99	39119.98
(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)	3774.99	39119.98
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)).....▶	3774.99	39119.98
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	3774.99	39119.98

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	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.....	6800.00	17300.00
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)) ..	6800.00	17300.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6800.00	17300.00

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)	3774.99	39119.98
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3774.99	39119.98
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

**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 9
	<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)
Moda, Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Carmichael, Stacy, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 29 / 2021		
Mailing Address 12389 NW Groveshire Avenue			Transaction ID : SA11AI.4351		
City Banks	State OR	Zip Code 97106	Amount of Each Receipt this Period 899.99		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item Contribution		
Name of Employer (for Individual) Moda Health		Occupation (for Individual) Director of Account Services			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1799.98			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Darby, BethAnne, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 29 / 2021		
Mailing Address 3440 SW Illinois Street			Transaction ID : SA11AI.4353		
City Portland	State OR	Zip Code 97239	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item Contribution		
Name of Employer (for Individual) Moda Health		Occupation (for Individual) Director in Healthcare Services			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 570.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Loftin, Scott, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 29 / 2021		
Mailing Address 3647 SW Victoria Lane			Transaction ID : SA11AI.4349		
City Gresham	State OR	Zip Code 97080	Amount of Each Receipt this Period 650.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item Contribution		
Name of Employer (for Individual) Moda Health		Occupation (for Individual) Senior VP Sales and Account Services			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 950.00			

SUBTOTAL of Receipts This Page (optional).....▶	1649.99
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 9
<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)
Moda, Inc. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Popowich, Yale, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 29 / 2021
Mailing Address 1652 NW Riverside Street		Transaction ID : SA11AI.4354
City Portland	State OR	Zip Code 97209
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer (for Individual) Moda Health	Occupation (for Individual) Chief Medical Officer	<input type="checkbox"/> Memo Item Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. True, Mary Lou, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 29 / 2021
Mailing Address 10605 SW Maier Drive		Transaction ID : SA11AI.4352
City Tualatin	State OR	Zip Code 97062
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 650.00	
Name of Employer (for Individual) Moda Health	Occupation (for Individual) VP Human Resources	<input type="checkbox"/> Memo Item Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 850.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Wahgren, Chandra, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 29 / 2021
Mailing Address 18035 Skyland Circle		Transaction ID : SA11AI.4350
City Lake Oswego	State OR	Zip Code 97034
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 975.00	
Name of Employer (for Individual) Moda Health	Occupation (for Individual) Senior Vice President	<input type="checkbox"/> Memo Item Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1200.00	

SUBTOTAL of Receipts This Page (optional).....	2125.00
TOTAL This Period (last page this line number only).....	3774.99

**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)
Moda, Inc. PAC

Full Name (Last, First, Middle Initial) A. CATHY MCMORRIS RODGERS FOR CONGRESS		Date of Disbursement MM / DD / YYYY 12 / 08 / 2021
Mailing Address BOX 137		FEC Identification Number C C00390476 Transaction ID : SB23.4361
City SPOKANE	State WA	Zip Code 99210
Purpose of Disbursement Political Contribution		Category/ Type 011
Candidate Name RODGERS, CATHY MCMORRIS, , ,		Amount of Each Disbursement this Period 1000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: WA	District: 05	
<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. KURT SCHRADER FOR CONGRESS		Date of Disbursement MM / DD / YYYY 09 / 22 / 2021
Mailing Address PO BOX 3314		FEC Identification Number C C00446906 Transaction ID : SB23.4358
City OREGON CITY	State OR	Zip Code 97045
Purpose of Disbursement Political Contribution		Category/ Type 011
Candidate Name SCHRADER, KURT, , ,		Amount of Each Disbursement this Period 1000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OR	District: 05	
<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. WYDEN FOR SENATE		Date of Disbursement MM / DD / YYYY 09 / 22 / 2021
Mailing Address 232 NE 9TH AVENUE		FEC Identification Number C C00308676 Transaction ID : SB23.4359
City PORTLAND	State OR	Zip Code 97232
Purpose of Disbursement Political Contribution		Category/ Type 011
Candidate Name WYDEN, RONALD LEE, , ,		Amount of Each Disbursement this Period 2900.00
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OR	District: 00	
<input type="checkbox"/> Memo Item		

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

4900.00

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 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)
Moda, Inc. PAC

A. WYDEN FOR SENATE

Full Name (Last, First, Middle Initial)
Mailing Address 232 NE 9TH AVENUE

City PORTLAND State OR Zip Code 97232

Purpose of Disbursement Political Contribution

Candidate Name WYDEN, RONALD LEE, , ,

Office Sought: House Senate President

Disbursement For: 2022 Primary General Other (specify) ▼

State: OR District: 00

Date of Disbursement: 09 / 22 / 2021

FEC Identification Number: C C00308676
Transaction ID : SB23.4360

Amount of Each Disbursement this Period: 1900.00

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:

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:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	1900.00
TOTAL This Period (last page this line number only).....▶	6800.00