

# 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.

Common Values PAC

ADDRESS (number and street)

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

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:
- |                                      |                                      |                                       |  |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)  | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)  | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE)                           |

- (c) 12-Day PRE-Election Report for the:
- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) |                                       |

Election on  /  /  in the State of

- (d) 30-Day POST-Election Report for the:
- |   |                                       |  |
|---|---------------------------------------|--|
| <input checked="" type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|---|---------------------------------------|--|

Election on  /  /  in the State of

5. Covering Period  /  /  through  /  /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Koch, Timothy, A., ,

Type or Print Name of Treasurer

Signature of Treasurer Koch, Timothy, A., , [Electronically Filed] Date  /  /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office Use Only									
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**Common Values 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="2020"/>	<input type="text" value=""/>	<input type="text" value="609550.91"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="713467.39"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="70000.00"/>	<input type="text" value="542861.04"/>
(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="783467.39"/>	<input type="text" value="1152411.95"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="170268.36"/>	<input type="text" value="539212.92"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="613199.03"/>	<input type="text" value="613199.03"/>
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:**

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

**Common Values 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).....	8000.00	87750.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	8000.00	87750.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	62000.00	438000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	70000.00	525750.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	17111.04
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)).....▶	70000.00	542861.04
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	70000.00	542861.04

**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 .....	20268.36	119062.92
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	20268.36	119062.92
22. Transfers to Affiliated/Other Party Committees.....	0.00	750.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	140000.00	405000.00
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).....	10000.00	14400.00
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)) ..	170268.36	539212.92
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	170268.36	539212.92

**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) .....	70000.00	525750.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	70000.00	525750.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	20268.36	119062.92
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	20268.36	119062.92

**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 31
	<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)  
**Common Values PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Bode, Denise, A., ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 10 / 2020 <b>Transaction ID : SA11AI.10343</b>		
Mailing Address 28389 Catalpa Point Rd			Amount of Each Receipt this Period 2500.00		
City Easton	State MD	Zip Code 21601	<input type="checkbox"/> Memo Item Contribution		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) Michael Best Strategies		Occupation (for Individual) Partner	<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 ▼ 2500.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Brachman, Marshall, A., ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 22 / 2020 <b>Transaction ID : SA11AI.10341</b>		
Mailing Address 634 A St NE			Amount of Each Receipt this Period 500.00		
City Washington	State DC	Zip Code 20002	<input type="checkbox"/> Memo Item Contribution		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) Marshall Brackman LLC		Occupation (for Individual) 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 ▼ 500.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Cherokee Nation</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 28 / 2020 <b>Transaction ID : SA11AI.10288</b>		
Mailing Address PO Box 948			Amount of Each Receipt this Period 2500.00		
City Tahlequah	State OK	Zip Code 74465	<input type="checkbox"/> Memo Item Contribution		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual)		Occupation (for Individual)	<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 ▼ 2500.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5500.00
<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:	PAGE 7 OF 31
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Common Values PAC**

**A. Corrigan, Joseph, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6490 Lake Meadow Dr.  
 City Burke State VA Zip Code 22015  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Steptoe & Johnson LLP Occupation (for Individual) Managing Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 21 / 2020  
**Transaction ID : SA11AI.10250**  
 Amount of Each Receipt this Period 500.00  
 Memo Item Contribution

**B. Duberstein, Kenneth, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5032 Lowell St. NW  
 City Washington State DC Zip Code 20004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The Duberstein Group, Inc. Occupation (for Individual) Chairman & CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 28 / 2020  
**Transaction ID : SA11AI.10270**  
 Amount of Each Receipt this Period 500.00  
 Memo Item Contribution

**C. Dunn, Brendan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 519 S Lee St  
 City Alexandria State VA Zip Code 22314  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Akin Gump Occupation (for Individual) Lawyer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 29 / 2020  
**Transaction ID : SA11AI.10342**  
 Amount of Each Receipt this Period 500.00  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1500.00
<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:	PAGE 8 OF 31
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Common Values PAC**

**A. Kirlin, Emily, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 130 E Street SE  
 City Washington State DC Zip Code 20003  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Peck Madigan Jones Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 21 / 2020  
**Transaction ID : SA11AI.10337**  
 Amount of Each Receipt this Period 500.00  
 Memo Item Contribution

**B. Williams, Tony, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8426 NE 22nd Place  
 City Clyde Hill State WA Zip Code 98004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Washington 2 Advocates Occupation (for Individual) Public Affairs Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 22 / 2020  
**Transaction ID : SA11AI.10339**  
 Amount of Each Receipt this Period 500.00  
 Memo Item Contribution

**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 Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	8000.00



**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 9 OF 31
<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)  
**Common Values PAC**

**A. AFLAC POLITICAL ACTION COMMITTEE (AFLAC PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1932 WYNNTON ROAD

City COLUMBUS	State GA	Zip Code 31999
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00034157

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2020

**Transaction ID : SA11C.10292**

Amount of Each Receipt this Period  
1500.00

Memo Item Contribution

**B. AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PALLADIAN 1  
220 LEIGH FARM RD

City DURHAM	State NC	Zip Code 27707
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00077321

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2020

**Transaction ID : SA11C.10289**

Amount of Each Receipt this Period  
2500.00

Memo Item Contribution

**C. AMERICAN SPEECH-LANGUAGE-HEARING ASSOCIATION PAC (ASHA PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 2200 RESEARCH BOULEVARD

City ROCKVILLE	State MD	Zip Code 20850
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FEC ID number of contributing federal political committee. **C** C00210666

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2020

**Transaction ID : SA11C.10278**

Amount of Each Receipt this Period  
2500.00

Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6500.00
<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 10 OF 31
<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)  
**Common Values PAC**

**A. ANTHEM, INC. POLITICAL ACTION COMMITTEE (ANTHEM PAC)**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1001 PENNSYLVANIA AVE NW  
 STE. 710  
 City WASHINGTON State DC Zip Code 20004  
 FEC ID number of contributing federal political committee. **C** C00197228  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 26 / 2020  
**Transaction ID : SA11C.10269**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item Contribution

**B. ASSURED GUARANTY MUNICIPAL CORP POLITICAL ACTION COMMITTEE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1633 BROADWAY  
 City NEW YORK State NY Zip Code 10019  
 FEC ID number of contributing federal political committee. **C** C00685958  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 28 / 2020  
**Transaction ID : SA11C.10271**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item Contribution

**C. BHFS-E, PC PAC (BROWNSTEIN HYATT FARBER SCHRECK POLITICAL ACTION COMMITTEE)**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 410 SEVENTEENTH STREET  
 SUITE 2200  
 City DENVER State CO Zip Code 80202  
 FEC ID number of contributing federal political committee. **C** C00390583  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 10 / 21 / 2020  
**Transaction ID : SA11C.10258**  
 Amount of Each Receipt this Period 2000.00  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	8000.00
<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 11 OF 31
<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)  
**Common Values PAC**

**A. COVINGTON AND BURLING LLP PAC**

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

Mailing Address **ONE CITYCENTER**  
**850 TENTH STREET, NW**

City **WASHINGTON** State **DC** Zip Code **20001**

FEC ID number of contributing federal political committee. **C C00462630**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**5000.00**

Date of Receipt  
**10 / 21 / 2020**

**Transaction ID : SA11C.10263**

Amount of Each Receipt this Period  
**5000.00**

Memo Item Contribution

**B. ELECTRIC POWER SUPPLY ASSOCIATION POLITICAL ACTION COMMITTEE**

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

Mailing Address **1401 NEW YORK AVENUE, NW**  
**9TH FLOOR**

City **WASHINGTON** State **DC** Zip Code **20005**

FEC ID number of contributing federal political committee. **C C00326009**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1000.00**

Date of Receipt  
**10 / 28 / 2020**

**Transaction ID : SA11C.10273**

Amount of Each Receipt this Period  
**1000.00**

Memo Item Contribution

**C. ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE**

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

Mailing Address **LILLY CORPORATE CENTER**

City **INDIANAPOLIS** State **IN** Zip Code **46285**

FEC ID number of contributing federal political committee. **C C00082792**

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
**2500.00**

Date of Receipt  
**10 / 28 / 2020**

**Transaction ID : SA11C.10282**

Amount of Each Receipt this Period  
**2500.00**

Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>8500.00</b>
<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 12 OF 31
<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)  
**Common Values PAC**

**A. EMD SERONO, INC. POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address ONE TECHNOLOGY PLACE

City ROCKLAND	State MA	Zip Code 02370
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00258236

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2020

**Transaction ID : SA11C.10260**

Amount of Each Receipt this Period  
3000.00

Memo Item Contribution

**B. FEDEX CORPORATION POLITICAL ACTION COMMITTEE (FEDEXPAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 942 S SHADY GROVE ROAD

City MEMPHIS	State TN	Zip Code 38120
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00068692

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2020

**Transaction ID : SA11C.10287**

Amount of Each Receipt this Period  
3000.00

Memo Item Contribution

**C. GILEAD SCIENCES INC HEALTHCARE POLICY PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 333 LAKESIDE DRIVE

City FOSTER CITY	State CA	Zip Code 94404
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00396895

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2020

**Transaction ID : SA11C.10286**

Amount of Each Receipt this Period  
2500.00

Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	8500.00
<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 13 OF 31
<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)  
**Common Values PAC**

**A. INDEPENDENT COMMUNITY BANKERS OF AMERICA POLITICAL ACTION COMMITTEE**

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

Mailing Address 1615 L STREET, NW  
SUITE 900

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00032698

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 M / D D D / Y Y Y Y Y Y  
10 / 28 / 2020

**Transaction ID : SA11C.10275**

Amount of Each Receipt this Period  
1000.00

Memo Item Contribution

**B. INTERNATIONAL PAPER POLITICAL ACTION COMMITTEE (IP-PAC)**

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

Mailing Address 1101 PENNSYLVANIA AVENUE NW  
SUITE 200

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00034405

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2020

**Transaction ID : SA11C.10248**

Amount of Each Receipt this Period  
2500.00

Memo Item Contribution

**C. KPMG PARTNERS/PRINCIPALS AND EMPLOYEES PAC**

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

Mailing Address 1801 K STREET, NW

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00280222

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 M / D D D / Y Y Y Y Y Y  
10 / 21 / 2020

**Transaction ID : SA11C.10265**

Amount of Each Receipt this Period  
5000.00

Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	8500.00
<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 14 OF 31
<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)  
**Common Values PAC**

**A. NATIONAL AUTOMOBILE DEALERS ASSOCIATION POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 8400 WESTPARK DRIVE

City TYSONS	State VA	Zip Code 22102
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00040998

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2020

**Transaction ID : SA11C.10291**

Amount of Each Receipt this Period  
2500.00

Memo Item Contribution

**B. PG&E CORPORATION EMPLOYEES ENERGYPAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 77 BEALE STREET, MAIL CODE: B29H

City SAN FRANCISCO	State CA	Zip Code 94105
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00177469

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2020

**Transaction ID : SA11C.10353**

Amount of Each Receipt this Period  
2500.00

Memo Item Contribution

**C. REYNOLDS AMERICAN INC. POLITICAL ACTION COMMITTEE; RAI PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address P. O. BOX 718

City WINSTON-SALEM	State NC	Zip Code 27102
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00042002

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2020

**Transaction ID : SA11C.10280**

Amount of Each Receipt this Period  
2500.00

Memo Item Contribution

<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 15 OF 31
<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)  
**Common Values PAC**

**A. SANOFI US SERVICES INC. EMPLOYEES' POLITICAL ACTION COMMITTEE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 55 CORPORATE DRIVE  
 City BRIDGEWATER State NJ Zip Code 08807  
 FEC ID number of contributing federal political committee. **C** C00144345  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 10 / 21 / 2020  
**Transaction ID : SA11C.10259**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item Contribution

**B. SINCLAIR BROADCAST GROUP PAC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10706 BEAVER DAM ROAD  
 City COCKEYSVILLE State MD Zip Code 21030  
 FEC ID number of contributing federal political committee. **C** C00562660  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 21 / 2020  
**Transaction ID : SA11C.10252**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item Contribution

**C. UNITED PARCEL SERVICE INC. PAC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 55 GLENLAKE PARKWAY NE  
 City ATLANTA State GA Zip Code 30328  
 FEC ID number of contributing federal political committee. **C** C00064766  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 21 / 2020  
**Transaction ID : SA11C.10261**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 8500.00  
**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 16 OF 31
<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)  
**Common Values PAC**

**A. VALERO ENERGY CORPORATION POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address ONE VALERO WAY

City SAN ANTONIO	State TX	Zip Code 78249
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00109546

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 M	/	D D D	/	Y Y Y Y Y Y
10		21		2020

**Transaction ID : SA11C.10262**

Amount of Each Receipt this Period  
5000.00

Memo Item Contribution

**B. XCEL ENERGY EMPLOYEE POLITICAL ACTION COMMITTEE (XPAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 701 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00107771

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 M	/	D D D	/	Y Y Y Y Y Y
10		28		2020

**Transaction ID : SA11C.10277**

Amount of Each Receipt this Period  
1000.00

Memo Item Contribution

**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 M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	62000.00



**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)  
**Common Values PAC**

Full Name (Last, First, Middle Initial)

**A. Anedot, Inc.**

Mailing Address PO Box 84314

City  
Baton Rouge

State  
LA

Zip Code  
70884

Purpose of Disbursement  
PAC Credit Card Processing

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			26			2020			

FEC Identification Number

C [ ]

**Transaction ID : SB21B.10347**

Amount of Each Disbursement this Period

[ ] 59.40

Memo Item

Full Name (Last, First, Middle Initial)

**B. Anedot, Inc.**

Mailing Address PO Box 84314

City  
Baton Rouge

State  
LA

Zip Code  
70884

Purpose of Disbursement  
PAC Credit Card Processing

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			03			2020			

FEC Identification Number

C [ ]

**Transaction ID : SB21B.10346**

Amount of Each Disbursement this Period

[ ] 19.80

Memo Item

Full Name (Last, First, Middle Initial)

**C. Anedot, Inc.**

Mailing Address PO Box 84314

City  
Baton Rouge

State  
LA

Zip Code  
70884

Purpose of Disbursement  
PAC Credit Card Processing

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2020			

FEC Identification Number

C [ ]

**Transaction ID : SB21B.10345**

Amount of Each Disbursement this Period

[ ] 97.80

Memo Item

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

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

[ ] 177.00

[ ]

**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)  
**Common Values PAC**

**A. Bradley, Amy Ford, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 1020 N Fairfax St  
Suite 201

City Alexandria State VA Zip Code 22314

Purpose of Disbursement PAC Fundraising Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 11 / 03 / 2020

FEC Identification Number: C

Transaction ID : SB21B.10295

Amount of Each Disbursement this Period: 5000.00

Memo Item

**B. Bradley, Amy Ford, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 1020 N Fairfax St  
Suite 201

City Alexandria State VA Zip Code 22314

Purpose of Disbursement PAC Expense Reimbursement: Email Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 11 / 10 / 2020

FEC Identification Number: C

Transaction ID : SB21B.10351

Amount of Each Disbursement this Period: 75.00

Memo Item

**C. Foley & Lardner LLP**

Full Name (Last, First, Middle Initial)

Mailing Address 3000 K St NW Ste 600

City Washington State DC Zip Code 20007

Purpose of Disbursement PAC Legal/Admin Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 16 / 2020

FEC Identification Number: C

Transaction ID : SB21B.10245

Amount of Each Disbursement this Period: 1379.12

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 6454.12

**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)  
**Common Values PAC**

**A. Foley & Lardner LLP**

Full Name (Last, First, Middle Initial)

Mailing Address 3000 K St NW Ste 600

City Washington State DC Zip Code 20007

Purpose of Disbursement PAC Legal/Admin Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 19 / 2020

FEC Identification Number: C

Transaction ID : SB21B.10329

Amount of Each Disbursement this Period: 135.00

Memo Item

**B. Koch & Hoos LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 901 N Washington St Ste 700

City Alexandria State VA Zip Code 22314

Purpose of Disbursement PAC Accounting/Compliance Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 30 / 2020

FEC Identification Number: C

Transaction ID : SB21B.10296

Amount of Each Disbursement this Period: 2490.30

Memo Item

**C. Koch & Hoos LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 901 N Washington St Ste 700

City Alexandria State VA Zip Code 22314

Purpose of Disbursement PAC Accounting/Compliance Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 19 / 2020

FEC Identification Number: C

Transaction ID : SB21B.1033t

Amount of Each Disbursement this Period: 1319.40

Memo Item

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

3944.70

**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)  
**Common Values PAC**

Full Name (Last, First, Middle Initial)

**A. Sal Lioni Provisions From Brooklyn**

Mailing Address 78 Vail Lane

City  
Watchung

State  
NJ

Zip Code  
07069

Purpose of Disbursement  
PAC Catering

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			22			2020			

FEC Identification Number

C [ ]

**Transaction ID : SB21B.10335**  
Amount of Each Disbursement this Period

[ ] 6178.54

Memo Item

Full Name (Last, First, Middle Initial)

**B. Snake River Lodge**

Mailing Address 7710 Granite Loop Road

City  
Teton Village

State  
WY

Zip Code  
83025

Purpose of Disbursement  
PAC Event Deposit

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			29			2020			

FEC Identification Number

C [ ]

**Transaction ID : SB21B.10290**  
Amount of Each Disbursement this Period

[ ] 3500.00

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

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C [ ]

Amount of Each Disbursement this Period

[ ]

Memo Item

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

[ ] 9678.54

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

[ ] 20254.36

**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)  
**Common Values PAC**

Full Name (Last, First, Middle Initial)  
**A. BOOZMAN FOR ARKANSAS**

Mailing Address PO BOX 671

City ROGERS State AR Zip Code 72757

Purpose of Disbursement Contribution

Candidate Name **BOOZMAN, JOHN, , ,**

Office Sought:  House  Senate  President

Disbursement For: 2022  Primary  General  Other (specify) ▼

State: AR District: 00

Date of Disbursement: 11 / 16 / 2020

FEC Identification Number: C00476317  
**Transaction ID : SB23.10301**

Amount of Each Disbursement this Period: 5000.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. BOOZMAN FOR ARKANSAS**

Mailing Address PO BOX 671

City ROGERS State AR Zip Code 72757

Purpose of Disbursement Contribution

Candidate Name **BOOZMAN, JOHN, , ,**

Office Sought:  House  Senate  President

Disbursement For: 2022  Primary  General  Other (specify) ▼

State: AR District: 00

Date of Disbursement: 11 / 16 / 2020

FEC Identification Number: C00476317  
**Transaction ID : SB23.10302**

Amount of Each Disbursement this Period: 5000.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. FAMILIES FOR JAMES LANKFORD**

Mailing Address PO BOX 1639

City BETHANY State OK Zip Code 73008

Purpose of Disbursement Contribution

Candidate Name **LANKFORD, JAMES PAUL, , ,**

Office Sought:  House  Senate  President

Disbursement For: 2022  Primary  General  Other (specify) ▼

State: OK District: 00

Date of Disbursement: 11 / 16 / 2020

FEC Identification Number: C00466482  
**Transaction ID : SB23.10319**

Amount of Each Disbursement this Period: 5000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 15000.00

**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)  
**Common Values PAC**

Full Name (Last, First, Middle Initial) <b>A. FAMILIES FOR JAMES LANKFORD</b>		Date of Disbursement MM / DD / YYYY 11 / 16 / 2020
Mailing Address PO BOX 1639		FEC Identification Number C00466482 <b>Transaction ID : SB23.10321</b>
City BETHANY	State OK	Zip Code 73008
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 5000.00
Candidate Name LANKFORD, JAMES PAUL, , ,		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OK	District: 00	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF JOHN THUNE</b>		Date of Disbursement MM / DD / YYYY 11 / 16 / 2020
Mailing Address PO BOX 841		FEC Identification Number C00409581 <b>Transaction ID : SB23.10324</b>
City SIOUX FALLS	State SD	Zip Code 57101
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 5000.00
Candidate Name THUNE, JOHN, , ,		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: SD	District: 00	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF JOHN THUNE</b>		Date of Disbursement MM / DD / YYYY 11 / 16 / 2020
Mailing Address PO BOX 841		FEC Identification Number C00409581 <b>Transaction ID : SB23.10325</b>
City SIOUX FALLS	State SD	Zip Code 57101
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 5000.00
Candidate Name THUNE, JOHN, , ,		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> Senate <input type="checkbox"/> House <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: SD	District: 00	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	15000.00
<b>TOTAL</b> 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)  
**Common Values PAC**

Full Name (Last, First, Middle Initial)  
**A. FRIENDS OF MIKE LEE INC.**

Date of Disbursement:  /  /

Mailing Address: 10 WEST BROADWAY SUITE 500

City: SALT LAKE CITY State: UT Zip Code: 84101

Purpose of Disbursement: Contribution

Candidate Name: LEE, MIKE, , ,

Office Sought:  House  Senate  President

Disbursement For: 2022  Primary  General  Other (specify)  Convention

State: UT District: 00

Category/Type:

FEC Identification Number:   
**Transaction ID : SB23.10326**  
Amount of Each Disbursement this Period:   
 Memo Item

Full Name (Last, First, Middle Initial)  
**B. FRIENDS OF MIKE LEE INC.**

Date of Disbursement:  /  /

Mailing Address: 10 WEST BROADWAY SUITE 500

City: SALT LAKE CITY State: UT Zip Code: 84101

Purpose of Disbursement: Contribution

Candidate Name: LEE, MIKE, , ,

Office Sought:  House  Senate  President

Disbursement For: 2022  Primary  General  Other (specify)

State: UT District: 00

Category/Type:

FEC Identification Number:   
**Transaction ID : SB23.10327**  
Amount of Each Disbursement this Period:   
 Memo Item

Full Name (Last, First, Middle Initial)  
**C. FRIENDS OF ROY BLUNT**

Date of Disbursement:  /  /

Mailing Address: PO BOX 10178

City: COLUMBIA State: MO Zip Code: 65205

Purpose of Disbursement: Contribution

Candidate Name: BLUNT, ROY, , ,

Office Sought:  House  Senate  President

Disbursement For: 2022  Primary  General  Other (specify)

State: MO District: 00

Category/Type:

FEC Identification Number:   
**Transaction ID : SB23.10315**  
Amount of Each Disbursement this Period:   
 Memo Item

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

**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)  
**Common Values PAC**

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF ROY BLUNT**

Mailing Address PO BOX 10178

City COLUMBIA State MO Zip Code 65205

Purpose of Disbursement Contribution

Candidate Name  
**BLUNT, ROY, , ,**

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

Date of Disbursement

MM / DD / YYYY  
11 / 16 / 2020

FEC Identification Number

**C** C00304758

**Transaction ID : SB23.10316**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF TODD YOUNG, INC.**

Mailing Address PO BOX 1053

City BLOOMINGTON State IN Zip Code 47402

Purpose of Disbursement Contribution

Candidate Name  
**YOUNG, TODD CHRISTOPHER, , ,**

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

Date of Disbursement

MM / DD / YYYY  
11 / 16 / 2020

FEC Identification Number

**C** C00459255

**Transaction ID : SB23.10307**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF TODD YOUNG, INC.**

Mailing Address PO BOX 1053

City BLOOMINGTON State IN Zip Code 47402

Purpose of Disbursement Contribution

Candidate Name  
**YOUNG, TODD CHRISTOPHER, , ,**

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

Date of Disbursement

MM / DD / YYYY  
11 / 16 / 2020

FEC Identification Number

**C** C00459255

**Transaction ID : SB23.10309**

Amount of Each Disbursement this Period

5000.00

Memo Item

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

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

15000.00



**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 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)  
**Common Values PAC**

**A. GEORGIANS FOR KELLY LOEFFLER**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 11623

City ATLANTA State GA Zip Code 30355

Purpose of Disbursement Contribution

Candidate Name LOEFFLER, KELLY, , ,

Office Sought:  House  Senate  President  
State: GA District: 00

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼ General Runoff

Date of Disbursement

MM / DD / YYYY  
11 / 09 / 2020

FEC Identification Number

C C00729608

Transaction ID : SB23.10299

Amount of Each Disbursement this Period

5000.00

Memo Item

**B. HOEVEN FOR SENATE**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 15114

City ARLINGTON State VA Zip Code 22215

Purpose of Disbursement Contribution

Candidate Name HOEVEN, JOHN, , ,

Office Sought:  House  Senate  President  
State: ND District: 00

Disbursement For: 2022  
 Primary  General  
 Other (specify)

Date of Disbursement

MM / DD / YYYY  
11 / 16 / 2020

FEC Identification Number

C C00473371

Transaction ID : SB23.10317

Amount of Each Disbursement this Period

5000.00

Memo Item

**C. HOEVEN FOR SENATE**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 15114

City ARLINGTON State VA Zip Code 22215

Purpose of Disbursement Contribution

Candidate Name HOEVEN, JOHN, , ,

Office Sought:  House  Senate  President  
State: ND District: 00

Disbursement For: 2022  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 16 / 2020

FEC Identification Number

C C00473371

Transaction ID : SB23.10318

Amount of Each Disbursement this Period

5000.00

Memo Item

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

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

15000.00

**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 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)  
**Common Values PAC**

Full Name (Last, First, Middle Initial)  
**A. JASON LEWIS FOR SENATE**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	3			2	0	2	0		

Mailing Address P.O. BOX 4515

FEC Identification Number

**C** C00716860

**Transaction ID : SB23.10355**

Amount of Each Disbursement this Period

5000.00

Memo Item

City ST. PAUL State MN Zip Code 55104

Purpose of Disbursement  
Contribution

Category/Type

Candidate Name  
**LEWIS, JASON, , ,**

Office Sought:  House  Senate  President  
State: MN District: 00

Disbursement For: 2020  
 Primary  General  Other (specify) ▼

Full Name (Last, First, Middle Initial)  
**B. JOHN KENNEDY FOR US**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		1	6			2	0	2	0		

Mailing Address 2900 CLEARVIEW PKWY  
SUITE 206

FEC Identification Number

**C** C00608398

**Transaction ID : SB23.10312**

Amount of Each Disbursement this Period

5000.00

Memo Item

City METAIRIE State LA Zip Code 70006

Purpose of Disbursement  
Contribution

Category/Type

Candidate Name  
**KENNEDY, JOHN NEELY, , ,**

Office Sought:  House  Senate  President  
State: LA District: 00

Disbursement For: 2022  
 Primary  General  Other (specify) ▼

Full Name (Last, First, Middle Initial)  
**C. JOHN KENNEDY FOR US**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		1	6			2	0	2	0		

Mailing Address 2900 CLEARVIEW PKWY  
SUITE 206

FEC Identification Number

**C** C00608398

**Transaction ID : SB23.10314**

Amount of Each Disbursement this Period

5000.00

Memo Item

City METAIRIE State LA Zip Code 70006

Purpose of Disbursement  
Contribution

Category/Type

Candidate Name  
**KENNEDY, JOHN NEELY, , ,**

Office Sought:  House  Senate  President  
State: LA District: 00

Disbursement For: 2022  
 Primary  General  Other (specify) ▼

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

15000.00

**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)  
**Common Values PAC**

Full Name (Last, First, Middle Initial) <b>A. MARCO RUBIO FOR US SENATE</b>			Date of Disbursement MM / DD / YYYY 11 / 16 / 2020
Mailing Address 2030 SOUTH DOUGLAS ROAD SUITE 105			FEC Identification Number <b>C</b> C00458844 <b>Transaction ID : SB23.10303</b> Amount of Each Disbursement this Period 5000.00
City CORAL GABLES	State FL	Zip Code 33134	
Purpose of Disbursement Contribution	Category/ Type		
Candidate Name <b>RUBIO, MARCO, , ,</b>	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President		Memo Item <input type="checkbox"/>
State: FL District: 00	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. MARCO RUBIO FOR US SENATE</b>			Date of Disbursement MM / DD / YYYY 11 / 16 / 2020
Mailing Address 2030 SOUTH DOUGLAS ROAD SUITE 105			FEC Identification Number <b>C</b> C00458844 <b>Transaction ID : SB23.10304</b> Amount of Each Disbursement this Period 5000.00
City CORAL GABLES	State FL	Zip Code 33134	
Purpose of Disbursement Contribution	Category/ Type		
Candidate Name <b>RUBIO, MARCO, , ,</b>	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President		Memo Item <input type="checkbox"/>
State: FL District: 00	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. MIKE CRAPO FOR US SENATE</b>			Date of Disbursement MM / DD / YYYY 11 / 16 / 2020
Mailing Address P.O. BOX 1948			FEC Identification Number <b>C</b> C00330886 <b>Transaction ID : SB23.10305</b> Amount of Each Disbursement this Period 5000.00
City BOISE	State ID	Zip Code 83701	
Purpose of Disbursement Contribution	Category/ Type		
Candidate Name <b>CRAPO, MICHAEL, D., ,</b>	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President		Memo Item <input type="checkbox"/>
State: ID District: 00	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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

15000.00

**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)  
**Common Values PAC**

Full Name (Last, First, Middle Initial) <b>A. MIKE CRAPO FOR US SENATE</b>			Date of Disbursement MM / DD / YYYY 11 / 16 / 2020	
Mailing Address P.O. BOX 1948			FEC Identification Number C00330886 <b>Transaction ID : SB23.10306</b>	
City BOISE	State ID	Zip Code 83701	Amount of Each Disbursement this Period 5000.00	
Purpose of Disbursement Contribution		Category/ Type	Memo Item <input type="checkbox"/>	
Candidate Name CRAPO, MICHAEL, D., ,				
Office Sought: <input checked="" 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: ID	District: 00			

Full Name (Last, First, Middle Initial) <b>B. PERDUE FOR SENATE</b>			Date of Disbursement MM / DD / YYYY 11 / 09 / 2020	
Mailing Address PO BOX 12077 SUITE 400			FEC Identification Number C00547570 <b>Transaction ID : SB23.10297</b>	
City ATLANTA	State GA	Zip Code 30355	Amount of Each Disbursement this Period 5000.00	
Purpose of Disbursement Contribution		Category/ Type	Memo Item <input type="checkbox"/>	
Candidate Name PERDUE, DAVID, , ,				
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) General Runoff			
State: GA	District:			

Full Name (Last, First, Middle Initial) <b>C. RAND PAUL FOR US SENATE</b>			Date of Disbursement MM / DD / YYYY 11 / 16 / 2020	
Mailing Address 1332 ANDREA ST			FEC Identification Number C00462069 <b>Transaction ID : SB23.10310</b>	
City BOWLING GREEN	State KY	Zip Code 42104	Amount of Each Disbursement this Period 5000.00	
Purpose of Disbursement Contribution		Category/ Type	Memo Item <input type="checkbox"/>	
Candidate Name PAUL, RAND, , ,				
Office Sought: <input checked="" type="checkbox"/> House <input checked="" 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: KY	District: 00			

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

15000.00

**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)  
**Common Values PAC**

**A. RAND PAUL FOR US SENATE**

Full Name (Last, First, Middle Initial)

Mailing Address 1332 ANDREA ST

City BOWLING GREEN State KY Zip Code 42104

Purpose of Disbursement Contribution

Candidate Name PAUL, RAND, , ,

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

Date of Disbursement

MM / DD / YYYY  
11 / 16 / 2020

FEC Identification Number

**C** C00462069  
**Transaction ID : SB23.10311**  
 Amount of Each Disbursement this Period  
 5000.00

Memo Item

**B. RICHARD BURR COMMITTEE**

Full Name (Last, First, Middle Initial)

Mailing Address POST OFFICE BOX 5928

City WINSTON-SALEM State NC Zip Code 27113

Purpose of Disbursement Contribution

Candidate Name BURR, RICHARD, , ,

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

Date of Disbursement

MM / DD / YYYY  
11 / 16 / 2020

FEC Identification Number

**C** C00385526  
**Transaction ID : SB23.10331**  
 Amount of Each Disbursement this Period  
 5000.00

Memo Item

**C. TIM SCOTT FOR SENATE**

Full Name (Last, First, Middle Initial)

Mailing Address 1405 ASHLEY RIVER RD

City CHARLESTON State SC Zip Code 29407

Purpose of Disbursement Contribution

Candidate Name SCOTT, TIMOTHY, , ,

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

Date of Disbursement

MM / DD / YYYY  
11 / 16 / 2020

FEC Identification Number

**C** C00540302  
**Transaction ID : SB23.10322**  
 Amount of Each Disbursement this Period  
 5000.00

Memo Item

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

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

15000.00

**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 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)  
**Common Values PAC**

Full Name (Last, First, Middle Initial)  
**A. TIM SCOTT FOR SENATE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2020

Mailing Address 1405 ASHLEY RIVER RD

FEC Identification Number

**C** C00540302

**Transaction ID : SB23.10323**

Amount of Each Disbursement this Period

5000.00

Memo Item

City CHARLESTON State SC Zip Code 29407

Purpose of Disbursement  
Contribution

Category/Type

Candidate Name  
**SCOTT, TIMOTHY, , ,**

Office Sought:  House  
 Senate  
 President  
State: SC District: 00

Disbursement For: 2022  
 Primary  General  
 Other (specify) ▼

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  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

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  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

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

5000.00

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

140000.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
**Common Values PAC**

**A. GEORGIANS FOR KELLY LOEFFLER**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 11623

City ATLANTA State GA Zip Code 30355

Purpose of Disbursement Recount Fund

Candidate Name LOEFFLER, KELLY, , ,

Office Sought:  House  Senate  President

Disbursement For: 2020  Primary  General  Other (specify) Other

State: GA District: 00

Date of Disbursement: 11 / 09 / 2020

FEC Identification Number: C00729608  
Transaction ID : SB29.10300  
Amount of Each Disbursement this Period: 5000.00

Memo Item

**B. PERDUE FOR SENATE**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 12077 SUITE 400

City ATLANTA State GA Zip Code 30355

Purpose of Disbursement Recount Fund

Candidate Name PERDUE, DAVID, , ,

Office Sought:  House  Senate  President

Disbursement For: 2020  Primary  General  Other (specify) Other

State: GA District:

Date of Disbursement: 11 / 09 / 2020

FEC Identification Number: C00547570  
Transaction ID : SB29.10298  
Amount of Each Disbursement this Period: 5000.00

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) Other

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

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