

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 NEW PIONEERS PAC

ADDRESS (number and street) 228 S WASHINGTON ST STE 115 ALEXANDRIA VA 22314

2. FEC IDENTIFICATION NUMBER C00459123 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 08/01/2021 through 08/31/2021

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Lisker, Lisa, , , Type or Print Name of Treasurer

Signature of Treasurer Lisker, Lisa, , , [Electronically Filed] Date 09/19/2021

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

NEW PIONEERS 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"/>		194499.48
(b) Cash on Hand at Beginning of Reporting Period.....	121125.76	
(c) Total Receipts (from Line 19)	0.00	32.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	121125.76	194531.48
7. Total Disbursements (from Line 31).....	7871.02	81276.74
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	113254.74	113254.74
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name
NEW PIONEERS 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).....	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	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 Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	0.00	0.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	32.00
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)).....▶	0.00	32.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	0.00	32.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	1371.02	4276.74
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1371.02	4276.74
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	6500.00	67000.00
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	10000.00
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)) ..	7871.02	81276.74
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7871.02	81276.74

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	0.00	0.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1371.02	4276.74
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	32.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1371.02	4244.74

**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

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)
NEW PIONEERS PAC

Full Name (Last, First, Middle Initial) A. American Express		Date of Disbursement MM / DD / YYYY 08 / 26 / 2021	
Mailing Address PO Box 360001		FEC Identification Number C [] Transaction ID : SB21B.12054 Amount of Each Disbursement this Period 59.17	
City Ft. Lauderdale	State FL	Zip Code 33336	Category/ Type []
Purpose of Disbursement Credit Card Payment- Travel: No Vendor Req. Item.			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Huckaby Davis Lisker Inc.		Date of Disbursement MM / DD / YYYY 08 / 10 / 2021	
Mailing Address 228 S. Washington St., Ste. 115		FEC Identification Number C [] Transaction ID : SB21B.12053 Amount of Each Disbursement this Period 1139.37	
City Alexandria	State VA	Zip Code 22314	Category/ Type []
Purpose of Disbursement Compliance Consulting			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C [] Amount of Each Disbursement this Period	
City	State	Zip Code	Category/ Type []
Purpose of Disbursement			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	1198.54
TOTAL This Period (last page this line number only).....▶	1198.54

**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)
NEW PIONEERS PAC

A. American Express

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 360001

City Ft. Lauderdale State FL Zip Code 33336

Purpose of Disbursement Credit Card Payment- See Memo

Candidate Name

Office Sought: House Senate President

Disbursement For: 2022 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 30 / 2021

FEC Identification Number: C

Transaction ID : SB23.12055

Amount of Each Disbursement this Period: 2500.00

Memo Item

B. CLIFF BENTZ FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address 89 SW THIRD AVE

City ONTARIO State OR Zip Code 97914

Purpose of Disbursement Political Contribution

Candidate Name BENTZ, CLIFF, , ,

Office Sought: House Senate President

Disbursement For: 2022 Primary General Other (specify)

State: OR District: 02

Date of Disbursement: 08 / 30 / 2021

FEC Identification Number: C C00725465

Transaction ID : SB23.12055.0

Amount of Each Disbursement this Period: 2500.00

Memo Item

C. American Express

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 360001

City Ft. Lauderdale State FL Zip Code 33336

Purpose of Disbursement Credit Card Payment- See Memo

Candidate Name

Office Sought: House Senate President

Disbursement For: 2022 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 31 / 2021

FEC Identification Number: C

Transaction ID : SB23.12056

Amount of Each Disbursement this Period: 4000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 6500.00

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)
NEW PIONEERS PAC

A. CATHY MCMORRIS RODGERS FOR CONGRESS

Full Name (Last, First, Middle Initial)
CATHY MCMORRIS RODGERS FOR CONGRESS

Date of Disbursement: MM / DD / YYYY
08 / 31 / 2021

Mailing Address: BOX 137

City: SPOKANE State: WA Zip Code: 99210

Purpose of Disbursement: Political Contribution

FEC Identification Number: C 000390476
Transaction ID : SB23.12056.0

Candidate Name: RODGERS, CATHY MCMORRIS, , ,
Amount of Each Disbursement this Period: 4000.00

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

State: WA District: 05 Memo Item

B.

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY

Mailing Address

City State Zip Code

Purpose of Disbursement

FEC Identification Number: C

Candidate Name

Amount of Each Disbursement this Period

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

State: District:

Memo Item

C.

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY

Mailing Address

City State Zip Code

Purpose of Disbursement

FEC Identification Number: C

Candidate Name

Amount of Each Disbursement this Period

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

State: District:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	6500.00