

**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

C3 PAC

ADDRESS (number and street)

1390 CHAIN BRIDGE RD

SUITE 515

Check if different
than previously
reported. (ACC)

MCLEAN

VA

22101

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00680314

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☒ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M / D D / Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M / D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y Y Y
02 01 2020

through

M M / D D / Y Y Y Y Y Y
02 29 2020

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

OZANUS, WILLIAM, K, ,

Type or Print Name of Treasurer

Signature of Treasurer

OZANUS, WILLIAM, K, ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
03 19 2020

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**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

C3 PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
02		01		2020

To:

M M	/	D D	/	Y Y Y Y Y
02		29		2020

	COLUMN A This Period	COLUMN B Calendar Year-to-Date															
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="5">2020</td></tr></table>	Y	Y	Y	Y	Y	2020						<table><tr><td colspan="5">46004.07</td></tr></table>	46004.07				
Y	Y	Y	Y	Y													
2020																	
46004.07																	
(b) Cash on Hand at Beginning of Reporting Period.....	<table><tr><td colspan="5">38772.86</td></tr></table>	38772.86															
38772.86																	
(c) Total Receipts (from Line 19)	<table><tr><td colspan="5">37504.62</td></tr></table>	37504.62					<table><tr><td colspan="5">78016.81</td></tr></table>	78016.81									
37504.62																	
78016.81																	
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table><tr><td colspan="5">76277.48</td></tr></table>	76277.48					<table><tr><td colspan="5">124020.88</td></tr></table>	124020.88									
76277.48																	
124020.88																	
7. Total Disbursements (from Line 31).....	<table><tr><td colspan="5">45715.66</td></tr></table>	45715.66					<table><tr><td colspan="5">93459.06</td></tr></table>	93459.06									
45715.66																	
93459.06																	
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table><tr><td colspan="5">30561.82</td></tr></table>	30561.82					<table><tr><td colspan="5">30561.82</td></tr></table>	30561.82									
30561.82																	
30561.82																	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
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

C3 PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
02	/	01	/	2020

To:

M M	/	D D	/	Y Y Y Y
02	/	29	/	2020

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).....

5088.20

7048.20

(ii) Unitemized

32416.42

70968.61

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

37504.62

78016.81

(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)

37504.62

78016.81

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))

37504.62

78016.81

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

37504.62

78016.81

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

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	45715.66	92481.66
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	45715.66	92481.66
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
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	977.40
(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	977.40
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)) ..	45715.66	93459.06
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	45715.66	93459.06

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	37504.62	78016.81
34. Total Contribution Refunds (from Line 28(d))	0.00	977.40
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	37504.62	77039.41
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	45715.66	92481.66
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	45715.66	92481.66

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

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

FOR LINE NUMBER: PAGE 6 OF 44
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

C3 PAC

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

A. ALEXANDER, WAITE, , ,

Mailing Address 4821 S LANDINGS DR, UNIT 403

City
FORT MYERS

State
FL

Zip Code
33919

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2020

Transaction ID : SA11Al.17570

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

B. ALEXANDER, WAITE, , ,

Mailing Address 4821 S LANDINGS DR, UNIT 403

City
FORT MYERS

State
FL

Zip Code
33919

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 02 / 2020

Transaction ID : SA11Al.17568

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. ALEXANDER, WAITE, , ,

Mailing Address 4821 S LANDINGS DR, UNIT 403

City
FORT MYERS

State
FL

Zip Code
33919

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 06 / 2020

Transaction ID : SA11Al.18129

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

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

65.00

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 44
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. ALEXANDER, WAITE, , ,

Mailing Address 4821 S LANDINGS DR, UNIT 403

City
FORT MYERS

State
FL

Zip Code
33919

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 06 / 2020

Transaction ID : SA11AI.18130

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

B. ALEXANDER, WAITE, , ,

Mailing Address 4821 S LANDINGS DR, UNIT 403

City
FORT MYERS

State
FL

Zip Code
33919

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 06 / 2020

Transaction ID : SA11AI.18131

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. ALEXANDER, WAITE, , ,

Mailing Address 4821 S LANDINGS DR, UNIT 403

City
FORT MYERS

State
FL

Zip Code
33919

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 06 / 2020

Transaction ID : SA11AI.18132

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

75.00

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: PAGE 8 OF 44
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. ALEXANDER, WAITE, , ,

Mailing Address 4821 S LANDINGS DR, UNIT 403

City
FORT MYERS

State
FL

Zip Code
33919

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 06 / 2020

Transaction ID : SA11Al.18133

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

B. ALEXANDER, WAITE, , ,

Mailing Address 4821 S LANDINGS DR, UNIT 403

City
FORT MYERS

State
FL

Zip Code
33919

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 09 / 2020

Transaction ID : SA11Al.18123

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. ALEXANDER, WAITE, , ,

Mailing Address 4821 S LANDINGS DR, UNIT 403

City
FORT MYERS

State
FL

Zip Code
33919

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 09 / 2020

Transaction ID : SA11Al.18124

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

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

75.00

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 44

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. ALEXANDER, WAITE, , ,

Mailing Address 4821 S LANDINGS DR, UNIT 403

City
FORT MYERS

State
FL

Zip Code
33919

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 09 / 2020

Transaction ID : SA11AI.18125

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

B. ALEXANDER, WAITE, , ,

Mailing Address 4821 S LANDINGS DR, UNIT 403

City
FORT MYERS

State
FL

Zip Code
33919

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 09 / 2020

Transaction ID : SA11AI.18126

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. ALEXANDER, WAITE, , ,

Mailing Address 4821 S LANDINGS DR, UNIT 403

City
FORT MYERS

State
FL

Zip Code
33919

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

485.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 09 / 2020

Transaction ID : SA11AI.18127

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

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

75.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 44

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. ALEXANDER, WAITE, , ,

Mailing Address 4821 S LANDINGS DR, UNIT 403

City

FORT MYERS

State

FL

Zip Code

33919

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 09 / 2020

Transaction ID : SA11Al.18128

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

B. ALEXANDER, WAITE, , ,

Mailing Address 4821 S LANDINGS DR, UNIT 403

City

FORT MYERS

State

FL

Zip Code

33919

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 19 / 2020

Transaction ID : SA11Al.19077

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

C. ALEXANDER, WAITE, , ,

Mailing Address 4821 S LANDINGS DR, UNIT 403

City

FORT MYERS

State

FL

Zip Code

33919

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 19 / 2020

Transaction ID : SA11Al.19078

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

55.00

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: PAGE 11 OF 44

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. ALEXANDER, WAITE, , ,

Mailing Address 4821 S LANDINGS DR, UNIT 403

City
FORT MYERS

State
FL

Zip Code
33919

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

565.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 19 / 2020

Transaction ID : SA11Al.19079

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

B. ALEXANDER, WAITE, , ,

Mailing Address 4821 S LANDINGS DR, UNIT 403

City
FORT MYERS

State
FL

Zip Code
33919

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

665.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 19 / 2020

Transaction ID : SA11Al.19080

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

C. ALEXANDER, WAITE, , ,

Mailing Address 4821 S LANDINGS DR, UNIT 403

City
FORT MYERS

State
FL

Zip Code
33919

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

680.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 20 / 2020

Transaction ID : SA11Al.19071

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

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

140.00

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

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

FOR LINE NUMBER: PAGE 12 OF 44

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. ALEXANDER, WAITE, , ,

Mailing Address 4821 S LANDINGS DR, UNIT 403

City

FORT MYERS

State

FL

Zip Code

33919

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

695.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 20 / 2020

Transaction ID : SA11Al.19072

Amount of Each Receipt this Period

15.00

☐

Memo Item

CONTRIBUTION

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

B. ALEXANDER, WAITE, , ,

Mailing Address 4821 S LANDINGS DR, UNIT 403

City

FORT MYERS

State

FL

Zip Code

33919

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

710.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 20 / 2020

Transaction ID : SA11Al.19073

Amount of Each Receipt this Period

15.00

☐

Memo Item

CONTRIBUTION

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

C. ALEXANDER, WAITE, , ,

Mailing Address 4821 S LANDINGS DR, UNIT 403

City

FORT MYERS

State

FL

Zip Code

33919

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐
☐

Primary

☐

General

Other (specify)

Aggregate Year-to-Date ▼

725.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 20 / 2020

Transaction ID : SA11Al.19074

Amount of Each Receipt this Period

15.00

☐

Memo Item

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

45.00

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: PAGE 13 OF 44

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. ALEXANDER, WAITE, , ,

Mailing Address 4821 S LANDINGS DR, UNIT 403

City
FORT MYERS

State
FL

Zip Code
33919

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

740.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 20 / 2020

Transaction ID : SA11AI.19075

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

B. ALEXANDER, WAITE, , ,

Mailing Address 4821 S LANDINGS DR, UNIT 403

City
FORT MYERS

State
FL

Zip Code
33919

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

755.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 20 / 2020

Transaction ID : SA11AI.19076

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

C. ALEXANDER, WAITE, , ,

Mailing Address 4821 S LANDINGS DR, UNIT 403

City
FORT MYERS

State
FL

Zip Code
33919

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

805.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 26 / 2020

Transaction ID : SA11AI.19799

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

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

80.00

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 14 OF 44

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. ALEXANDER, WAITE, , ,

Mailing Address 4821 S LANDINGS DR, UNIT 403

City
FORT MYERS

State
FL

Zip Code
33919

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

855.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 26 / 2020

Transaction ID : SA11AI.19800

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

B. ALEXANDER, WAITE, , ,

Mailing Address 4821 S LANDINGS DR, UNIT 403

City
FORT MYERS

State
FL

Zip Code
33919

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

905.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 26 / 2020

Transaction ID : SA11AI.19801

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

C. ALEXANDER, WAITE, , ,

Mailing Address 4821 S LANDINGS DR, UNIT 403

City
FORT MYERS

State
FL

Zip Code
33919

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

955.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 26 / 2020

Transaction ID : SA11AI.19802

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

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

150.00

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 15 OF 44

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. ALEXANDER, WAITE, , ,

Mailing Address 4821 S LANDINGS DR, UNIT 403

City
FORT MYERS

State
FL

Zip Code
33919

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1005.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 26 / 2020

Transaction ID : SA11AI.19803

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

B. ALEXANDER, WAITE, , ,

Mailing Address 4821 S LANDINGS DR, UNIT 403

City
FORT MYERS

State
FL

Zip Code
33919

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1055.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 26 / 2020

Transaction ID : SA11AI.19804

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

C. ALEXANDER, WAITE, , ,

Mailing Address 4821 S LANDINGS DR, UNIT 403

City
FORT MYERS

State
FL

Zip Code
33919

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1105.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 26 / 2020

Transaction ID : SA11AI.19805

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

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

150.00

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

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

FOR LINE NUMBER: PAGE 16 OF 44
(check only one)

<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)

C3 PAC

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

A. ALEXANDER, WAITE, , ,

Mailing Address 4821 S LANDINGS DR, UNIT 403

City
FORT MYERS

State
FL

Zip Code
33919

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1155.00

Date of Receipt

MM / DD / YYYY
02 / 26 / 2020

Transaction ID : SA11Al.19806

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

B. ALEXANDER, WAITE, , ,

Mailing Address 4821 S LANDINGS DR, UNIT 403

City
FORT MYERS

State
FL

Zip Code
33919

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1205.00

Date of Receipt

MM / DD / YYYY
02 / 26 / 2020

Transaction ID : SA11Al.19807

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

C. ALEXANDER, WAITE, , ,

Mailing Address 4821 S LANDINGS DR, UNIT 403

City
FORT MYERS

State
FL

Zip Code
33919

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1255.00

Date of Receipt

MM / DD / YYYY
02 / 26 / 2020

Transaction ID : SA11Al.19809

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

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

150.00

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 17 OF 44

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. ALEXANDER, WAITE, , ,

Mailing Address 4821 S LANDINGS DR, UNIT 403

City
FORT MYERS

State
FL

Zip Code
33919

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 29 / 2020

Transaction ID : SA11AI.19431

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

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

B. ARDOLINA, XIOMARA, , ,

Mailing Address 23333 4 CHIMNEYS LANE

City
MIDDLEBURG

State
VA

Zip Code
20117

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NOT EMPLOYED

Occupation (for Individual)
WAS A RESTAURANT OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 29 / 2020

Transaction ID : SA11AI.19492

Amount of Each Receipt this Period

80.80

☐ Memo Item
CONTRIBUTION

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

C. BENADO, ERIN, , ,

Mailing Address 2590 BLACK RIVER RD.

City
BETHLEHEM

State
PA

Zip Code
18015

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

202.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 05 / 2020

Transaction ID : SA11AI.18023

Amount of Each Receipt this Period

101.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

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

226.80

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 18 OF 44

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. CHEATHAM, NANCY, M, ,

Mailing Address 811 WEST GRAY STREET

City
HOUSTON

State
TX

Zip Code
77019

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COMMAND VENTURES INC

Occupation (for Individual)
CONTROLLET

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 21 / 2020

Transaction ID : SA11AI.19214

Amount of Each Receipt this Period

110.00

☐ Memo Item
CONTRIBUTION

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

B. CHEATHAM, NANCY, M, ,

Mailing Address 811 WEST GRAY STREET

City
HOUSTON

State
TX

Zip Code
77019

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COMMAND VENTURES INC

Occupation (for Individual)
CONTROLLET

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 24 / 2020

Transaction ID : SA11AI.19213

Amount of Each Receipt this Period

120.00

☐ Memo Item
CONTRIBUTION

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

C. DAVIS, ANDREW, , ,

Mailing Address 8601 GLENOAKS BLVD APT 106

City
SUN VALLEY

State
CA

Zip Code
91352

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 24 / 2020

Transaction ID : SA11AI.19325

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

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

255.00

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 19 OF 44

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

C3 PAC

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

A. DAVIS, ANDREW, , ,

Mailing Address 8601 GLENOAKS BLVD APT 106

City
SUN VALLEY

State
CA

Zip Code
91352

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 26 / 2020

Transaction ID : SA11AI.19882

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

B. DAVIS, ANDREW, , ,

Mailing Address 8601 GLENOAKS BLVD APT 106

City
SUN VALLEY

State
CA

Zip Code
91352

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2020

Transaction ID : SA11AI.19701

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

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

C. DAVIS, ANDREW, , ,

Mailing Address 8601 GLENOAKS BLVD APT 106

City
SUN VALLEY

State
CA

Zip Code
91352

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 29 / 2020

Transaction ID : SA11AI.19481

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

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

80.00

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

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

FOR LINE NUMBER: PAGE 20 OF 44

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

C3 PAC

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

A. GAMBLE, KENNETH, , ,

Mailing Address 175 HUGUENOT STREET

City

NEW ROCHELLE

State

NY

Zip Code

10801

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 07 / 2020

Transaction ID : SA11Al.17993

Amount of Each Receipt this Period

120.00

☐ Memo Item
CONTRIBUTION

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

B. GIANNE, ALDO, , ,

Mailing Address 7969 NORTHWEST 2ND STREET

City

MIAMI

State

FL

Zip Code

33126

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

ALDO GIANNE

Occupation (for Individual)

INVESTOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 27 / 2020

Transaction ID : SA11Al.19740

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

C. GIANNE, ALDO, , ,

Mailing Address 7969 NORTHWEST 2ND STREET

City

MIAMI

State

FL

Zip Code

33126

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

ALDO GIANNE

Occupation (for Individual)

INVESTOR

Receipt For:

☐ Primary
☐ Other (specify)

General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2020

Transaction ID : SA11Al.19681

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

320.00

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

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

Use separate schedule(s)
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(check only one)

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. GWALTNEY, ROSALIE, , ,

Mailing Address 1531 N. MAIN STREET

City
LOVINGTON

State
NM

Zip Code
88260

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NOR-LEA REGIONAL HOSPITAL

Occupation (for Individual)
NURSE ANESTHETIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 05 / 2020

Transaction ID : SA11AI.18426

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

B. GWALTNEY, ROSALIE, , ,

Mailing Address 1531 N. MAIN STREET

City
LOVINGTON

State
NM

Zip Code
88260

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NOR-LEA REGIONAL HOSPITAL

Occupation (for Individual)
NURSE ANESTHETIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 21 / 2020

Transaction ID : SA11AI.19303

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

C. HAMMETT, PEGGY, , ,

Mailing Address 2330 LAKEWOOD YACHT CLUB DR #3

City
SEABROOK

State
TX

Zip Code
77586

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 19 / 2020

Transaction ID : SA11AI.19228

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

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

400.00

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. HERRERA, DION, , ,

Mailing Address 2003 SOUTH COOPER APT 248

City
ARLINGTON

State
TX

Zip Code
76010

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ASSOCIA

Occupation (for Individual)
MAINTENANCE TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 10 / 2020

Transaction ID : SA11AI.18400

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

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

B. ISAACSON, DOUGLAS, , ,

Mailing Address 660 HORSESHOE CURVE

City
PIKE ROAD

State
AL

Zip Code
36064

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.26

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 16 / 2020

Transaction ID : SA11AI.18694

Amount of Each Receipt this Period

60.00

☐ Memo Item
CONTRIBUTION

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

C. JAMES, JEAN, , ,

Mailing Address 18 MISSISSIPPI RIVER CT

City
TROY

State
MO

Zip Code
63379

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 13 / 2020

Transaction ID : SA11AI.18766

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

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

80.00

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. JAMES, JEAN, , ,

Mailing Address 18 MISSISSIPPI RIVER CT

City
TROY

State
MO

Zip Code
63379

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 13 / 2020

Transaction ID : SA11Al.18767

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

B. JAMES, JEAN, , ,

Mailing Address 18 MISSISSIPPI RIVER CT

City
TROY

State
MO

Zip Code
63379

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 26 / 2020

Transaction ID : SA11Al.19826

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

C. KOONCE, RICHARD, , ,

Mailing Address 428 N 250W

City
VALPARAISO

State
IN

Zip Code
46385

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ARCLERMITAL STEEL

Occupation (for Individual)
ROUGHER OPERATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 08 / 2020

Transaction ID : SA11Al.18191

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

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

65.00

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

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. KOONCE, RICHARD, , ,

Mailing Address 428 N 250W

City

VALPARAISO

State

IN

Zip Code

46385

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

ARCLERMITTAL STEEL

Occupation (for Individual)

ROUGHER OPERATOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

270.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 08 / 2020

Transaction ID : SA11Al.18192

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

B. KOONCE, RICHARD, , ,

Mailing Address 428 N 250W

City

VALPARAISO

State

IN

Zip Code

46385

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

ARCLERMITTAL STEEL

Occupation (for Individual)

ROUGHER OPERATOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

290.40

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 20 / 2020

Transaction ID : SA11Al.19117

Amount of Each Receipt this Period

20.20

☐ Memo Item
CONTRIBUTION

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

C. KRONEWITTER, JAMES, , ,

Mailing Address 3818 134TH PLACE SOUTHWEST

City

LYNNWOOD

State

WA

Zip Code

98087

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

THE BOEING COMPANY

Occupation (for Individual)

QUALITY SPECIALIST

Receipt For:

☐ Primary
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 08 / 2020

Transaction ID : SA11Al.18526

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

170.20

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

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

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. MCKEE, LLOYD, RONALD, , JR

Mailing Address 1170 VALENCIA DR

City
TRACY

State
CA

Zip Code
95377

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 27 / 2020

Transaction ID : SA11AI.19741

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

B. MCKEE, LLOYD, RONALD, , JR

Mailing Address 1170 VALENCIA DR

City
TRACY

State
CA

Zip Code
95377

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 27 / 2020

Transaction ID : SA11AI.19742

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. MCKEE, LLOYD, RONALD, , JR

Mailing Address 1170 VALENCIA DR

City
TRACY

State
CA

Zip Code
95377

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2020

Transaction ID : SA11AI.19592

Amount of Each Receipt this Period

200.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

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

250.00

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

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. MILLER, MARY, , ,

Mailing Address 3233 AVALON PLACE

City
HOUSTON

State
TX

Zip Code
77819

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 05 / 2020

Transaction ID : SA11AI.18344

Amount of Each Receipt this Period

120.00

☐ Memo Item
CONTRIBUTION

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

B. MILLER, MARY, , ,

Mailing Address 3233 AVALON PLACE

City
HOUSTON

State
TX

Zip Code
77819

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 09 / 2020

Transaction ID : SA11AI.18330

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. MILLER, MARY, , ,

Mailing Address 3233 AVALON PLACE

City
HOUSTON

State
TX

Zip Code
77819

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 10 / 2020

Transaction ID : SA11AI.18329

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

195.00

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

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

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. MILLER, SANDI, , ,

Mailing Address 2293 TREANA COURT

City
TULARE

State
CA

Zip Code
93274

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 21 / 2020

Transaction ID : SA11AI.19346

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

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

B. MOORE, LAMONT, , ,

Mailing Address 1827 WEST GOWAN ROAD. APT.1010

City
NORTH LAS VEGAS

State
NV

Zip Code
89032

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CCSD

Occupation (for Individual)
CUSTODIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2020

Transaction ID : SA11AI.17637

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. MOORE, LAMONT, , ,

Mailing Address 1827 WEST GOWAN ROAD. APT.1010

City
NORTH LAS VEGAS

State
NV

Zip Code
89032

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CCSD

Occupation (for Individual)
CUSTODIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2020

Transaction ID : SA11AI.17638

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

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

95.00

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

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

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. MOORE, LAMONT, , ,

Mailing Address 1827 WEST GOWAN ROAD. APT.1010

City
NORTH LAS VEGAS

State
NV

Zip Code
89032

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CCSD

Occupation (for Individual)
CUSTODIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 06 / 2020

Transaction ID : SA11Al.18433

Amount of Each Receipt this Period

60.00

☐ Memo Item
CONTRIBUTION

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

B. MOORE, LAMONT, , ,

Mailing Address 1827 WEST GOWAN ROAD. APT.1010

City
NORTH LAS VEGAS

State
NV

Zip Code
89032

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CCSD

Occupation (for Individual)
CUSTODIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 08 / 2020

Transaction ID : SA11Al.18431

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

C. MOORE, LAMONT, , ,

Mailing Address 1827 WEST GOWAN ROAD. APT.1010

City
NORTH LAS VEGAS

State
NV

Zip Code
89032

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CCSD

Occupation (for Individual)
CUSTODIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 08 / 2020

Transaction ID : SA11Al.18432

Amount of Each Receipt this Period

60.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

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

170.00

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. MOORE, LAMONT, , ,

Mailing Address 1827 WEST GOWAN ROAD. APT.1010

City
NORTH LAS VEGAS

State
NV

Zip Code
89032

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CCSD

Occupation (for Individual)
CUSTODIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

770.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 10 / 2020

Transaction ID : SA11Al.18428

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

B. MOORE, LAMONT, , ,

Mailing Address 1827 WEST GOWAN ROAD. APT.1010

City
NORTH LAS VEGAS

State
NV

Zip Code
89032

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CCSD

Occupation (for Individual)
CUSTODIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

795.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 10 / 2020

Transaction ID : SA11Al.18429

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. MOORE, LAMONT, , ,

Mailing Address 1827 WEST GOWAN ROAD. APT.1010

City
NORTH LAS VEGAS

State
NV

Zip Code
89032

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CCSD

Occupation (for Individual)
CUSTODIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

820.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 10 / 2020

Transaction ID : SA11Al.18430

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

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

100.00

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

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. MOORE, LAMONT, , ,

Mailing Address 1827 WEST GOWAN ROAD. APT.1010

City
NORTH LAS VEGAS

State
NV

Zip Code
89032

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CCSD

Occupation (for Individual)
CUSTODIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 15 / 2020

Transaction ID : SA11AI.18859

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

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

B. MOORE, LAMONT, , ,

Mailing Address 1827 WEST GOWAN ROAD. APT.1010

City
NORTH LAS VEGAS

State
NV

Zip Code
89032

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CCSD

Occupation (for Individual)
CUSTODIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

870.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 16 / 2020

Transaction ID : SA11AI.18858

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

C. MOORE, LAMONT, , ,

Mailing Address 1827 WEST GOWAN ROAD. APT.1010

City
NORTH LAS VEGAS

State
NV

Zip Code
89032

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CCSD

Occupation (for Individual)
CUSTODIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

915.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 21 / 2020

Transaction ID : SA11AI.19305

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

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

95.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 31 OF 44

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. MOORE, LAMONT, , ,

Mailing Address 1827 WEST GOWAN ROAD. APT.1010

City
NORTH LAS VEGAS

State
NV

Zip Code
89032

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CCSD

Occupation (for Individual)
CUSTODIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

930.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 21 / 2020

Transaction ID : SA11AI.19306

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

B. MOORE, LAMONT, , ,

Mailing Address 1827 WEST GOWAN ROAD. APT.1010

City
NORTH LAS VEGAS

State
NV

Zip Code
89032

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CCSD

Occupation (for Individual)
CUSTODIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

945.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 21 / 2020

Transaction ID : SA11AI.19307

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

C. MOORE, LAMONT, , ,

Mailing Address 1827 WEST GOWAN ROAD. APT.1010

City
NORTH LAS VEGAS

State
NV

Zip Code
89032

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CCSD

Occupation (for Individual)
CUSTODIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

970.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2020

Transaction ID : SA11AI.19686

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

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

55.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 32 OF 44

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. MOORE, LAMONT, , ,

Mailing Address 1827 WEST GOWAN ROAD. APT.1010

City
NORTH LAS VEGAS

State
NV

Zip Code
89032

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CCSD

Occupation (for Individual)
CUSTODIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

985.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 29 / 2020

Transaction ID : SA11Al.19497

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

B. PITCHER, SHIRLEY, , ,

Mailing Address 8145 ELIZABETH LANE

City
LA PLATA

State
MD

Zip Code
20646

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 27 / 2020

Transaction ID : SA11Al.19791

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

C. PITCHER, SHIRLEY, , ,

Mailing Address 8145 ELIZABETH LANE

City
LA PLATA

State
MD

Zip Code
20646

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2020

Transaction ID : SA11Al.19598

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

45.00

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

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

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. PITCHER, SHIRLEY, , ,

Mailing Address 8145 ELIZABETH LANE

City
LA PLATA

State
MD

Zip Code
20646

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2020

Transaction ID : SA11AI.19599

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

B. RESCINITI, RICHARD, , ,

Mailing Address 2761 TAFT ST APT 211

City
HOLLYWOOD

State
FL

Zip Code
33020

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 10 / 2020

Transaction ID : SA11AI.18102

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

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

C. RESCINITI, RICHARD, , ,

Mailing Address 2761 TAFT ST APT 211

City
HOLLYWOOD

State
FL

Zip Code
33020

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.40

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2020

Transaction ID : SA11AI.19637

Amount of Each Receipt this Period

20.20

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

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

110.20

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

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

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. REUTOV, IAKOV, , ,

Mailing Address 1713 EAST 59TH AVENUE

City
ANCHORAGE

State
AK

Zip Code
99507

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
CONSTRUCTION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 26 / 2020

Transaction ID : SA11AI.19869

Amount of Each Receipt this Period

60.00

☐ Memo Item
CONTRIBUTION

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

B. SONDERMAN, THOMAS, , ,

Mailing Address 7853 GUILD COURT

City
SAINT PAUL

State
MN

Zip Code
55124

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SKYWATER TECHNOLOGY

Occupation (for Individual)
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 04 / 2020

Transaction ID : SA11AI.18229

Amount of Each Receipt this Period

101.00

☐ Memo Item
CONTRIBUTION

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

C. SONG, WILLIAM, , ,

Mailing Address 1156 LAS LOMAS DRIVE

City
LA HABRA

State
CA

Zip Code
90631

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

760.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 06 / 2020

Transaction ID : SA11AI.18445

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

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

176.00

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

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. SONG, WILLIAM, , ,

Mailing Address 1156 LAS LOMAS DRIVE

City
LA HABRA

State
CA

Zip Code
90631

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

775.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 06 / 2020

Transaction ID : SA11AI.18446

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

B. SONG, WILLIAM, , ,

Mailing Address 1156 LAS LOMAS DRIVE

City
LA HABRA

State
CA

Zip Code
90631

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 07 / 2020

Transaction ID : SA11AI.18444

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

C. SONG, WILLIAM, , ,

Mailing Address 1156 LAS LOMAS DRIVE

City
LA HABRA

State
CA

Zip Code
90631

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

875.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 08 / 2020

Transaction ID : SA11AI.18443

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

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

115.00

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

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. SONG, WILLIAM, , ,

Mailing Address 1156 LAS LOMAS DRIVE

City
LA HABRA

State
CA

Zip Code
90631

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 09 / 2020

Transaction ID : SA11AI.18441

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

B. SONG, WILLIAM, , ,

Mailing Address 1156 LAS LOMAS DRIVE

City
LA HABRA

State
CA

Zip Code
90631

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

925.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 09 / 2020

Transaction ID : SA11AI.18442

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. SONG, WILLIAM, , ,

Mailing Address 1156 LAS LOMAS DRIVE

City
LA HABRA

State
CA

Zip Code
90631

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

930.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 14 / 2020

Transaction ID : SA11AI.18863

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

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

55.00

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

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

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(check only one)

PAGE 37 OF 44

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. SONG, WILLIAM, , ,

Mailing Address 1156 LAS LOMAS DRIVE

City
LA HABRA

State
CA

Zip Code
90631

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

980.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 19 / 2020

Transaction ID : SA11AI.19319

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

B. SONG, WILLIAM, , ,

Mailing Address 1156 LAS LOMAS DRIVE

City
LA HABRA

State
CA

Zip Code
90631

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1025.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 21 / 2020

Transaction ID : SA11AI.19318

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

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

C. SONG, WILLIAM, , ,

Mailing Address 1156 LAS LOMAS DRIVE

City
LA HABRA

State
CA

Zip Code
90631

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 22 / 2020

Transaction ID : SA11AI.19317

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

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

170.00

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. SONG, WILLIAM, , ,

Mailing Address 1156 LAS LOMAS DRIVE

City
LA HABRA

State
CA

Zip Code
90631

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1105.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 25 / 2020

Transaction ID : SA11AI.19316

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

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

B. SONG, WILLIAM, , ,

Mailing Address 1156 LAS LOMAS DRIVE

City
LA HABRA

State
CA

Zip Code
90631

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1120.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 26 / 2020

Transaction ID : SA11AI.19845

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

C. SONG, WILLIAM, , ,

Mailing Address 1156 LAS LOMAS DRIVE

City
LA HABRA

State
CA

Zip Code
90631

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1135.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 26 / 2020

Transaction ID : SA11AI.19850

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

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

35.00

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

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. SONG, WILLIAM, , ,

Mailing Address 1156 LAS LOMAS DRIVE

City
LA HABRA

State
CA

Zip Code
90631

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2020

Transaction ID : SA11AI.19728

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

B. SONG, WILLIAM, , ,

Mailing Address 1156 LAS LOMAS DRIVE

City
LA HABRA

State
CA

Zip Code
90631

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 29 / 2020

Transaction ID : SA11AI.19456

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

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

C. SONG, WILLIAM, , ,

Mailing Address 1156 LAS LOMAS DRIVE

City
LA HABRA

State
CA

Zip Code
90631

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 29 / 2020

Transaction ID : SA11AI.19521

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

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

195.00

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 40 OF 44

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. SPENCE, CORINNE, , ,

Mailing Address 2921 LAUREL DR

City

SACRAMENTO

State

CA

Zip Code

95864

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

02 / 14 / 2020

Transaction ID : SA11AI.18900

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

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

B. SPENCE, CORINNE, , ,

Mailing Address 2921 LAUREL DR

City

SACRAMENTO

State

CA

Zip Code

95864

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

02 / 27 / 2020

Transaction ID : SA11AI.19768

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

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

C. SWOOPE, PATRICIA, , ,

Mailing Address 4113 CLINTWOOD LN

City

VIRGINIA BEACH

State

VA

Zip Code

23452

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RE/MAX ALLIANCE

Occupation (for Individual)

REALTOR

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

02 / 19 / 2020

Transaction ID : SA11AI.19009

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

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

450.00

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 41 OF 44

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. VARVARO, CHARLES, , ,

Mailing Address 4026 RIDGE AVENUE

City

EGG HARBOR TOWNSHIP

State

NJ

Zip Code

08234

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 05 / 2020

Transaction ID : SA11AI.17978

Amount of Each Receipt this Period

120.00

☐ Memo Item
CONTRIBUTION

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

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

120.00

5088.20

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 42 OF 44

<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)

C3 PAC

Full Name (Last, First, Middle Initial)

A. CAPCOR STRATEGIES LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		10		2020

Mailing Address 1345 S CAPITOL ST SW
APT 403City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.17957**

Amount of Each Disbursement this Period

6000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. PERSUASION PERFECTED

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		21		2020

Mailing Address 600 F ST NW
5TH FLOORCity
WASHINGTONState
DCZip Code
20004Purpose of Disbursement
WEB SERVICE/ADS

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.18945**

Amount of Each Disbursement this Period

7500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. REVV

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		03		2020

Mailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.18551**

Amount of Each Disbursement this Period

3094.21

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

16594.21

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 43 OF 44

<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)

C3 PAC

Full Name (Last, First, Middle Initial)

A. REVV

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		10		2020

Mailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.18553**

Amount of Each Disbursement this Period

7876.05

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. REVV

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		17		2020

Mailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.18556**

Amount of Each Disbursement this Period

5963.03

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. REVV

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		24		2020

Mailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.18947**

Amount of Each Disbursement this Period

7225.43

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

21064.51

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 44 OF 44

<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)

C3 PAC

Full Name (Last, First, Middle Initial)

A. REVV

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		29		2020

Mailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Category/
Type

FEC Identification Number

C**Transaction ID : SB21B.19398**

Amount of Each Disbursement this Period

7835.94

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

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

7835.94

45494.66