

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**
TRIDENT PAC

ADDRESS (number and street) **PO BOX 1284**
 Check if different than previously reported. (ACC) **VIRGINIA BEACH VA 23451**

2. **FEC IDENTIFICATION NUMBER** **C** C00627133
3. IS THIS REPORT **NEW (N)** OR **AMENDED (A)**

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 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) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / in the State of
(d) 30-Day **POST-Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / through / /

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

Signature of Treasurer **GLAZE, KAYLA, , ,** [Electronically Filed] Date / /

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

TRIDENT PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>	<input type="text"/>	<input type="text" value="9433.40"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="13043.80"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="5900.00"/>	<input type="text" value="48400.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="18943.80"/>	<input type="text" value="57833.40"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="8208.15"/>	<input type="text" value="47097.75"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="10735.65"/>	<input type="text" value="10735.65"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

TRIDENT PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	5900.00	48400.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	5900.00	48400.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	5900.00	48400.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	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)).....▶	5900.00	48400.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	5900.00	48400.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	7208.15	30277.75
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	7208.15	30277.75
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	500.00	16320.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	500.00	500.00
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)) ..	8208.15	47097.75
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8208.15	47097.75

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)	5900.00	48400.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5900.00	48400.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	7208.15	30277.75
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	7208.15	30277.75

**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 11
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
TRIDENT PAC

A. GALLAER, RICK, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5 MIZZEN CIRCLE

City HAMPTON	State VA	Zip Code 23664
-----------------	-------------	-------------------

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

Name of Employer (for Individual) POMOCO AUTO GROUP	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		24		2020

Transaction ID : SA11AI.4812

Amount of Each Receipt this Period
900.00

Memo Item
CONTRIBUTION

B. OWENS, JOHN, M, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1508 LAYDEN COVE WAY

City VIRGINIA BEACH	State VA	Zip Code 23454
------------------------	-------------	-------------------

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

Name of Employer (for Individual) PREVAILANCE	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2020

Transaction ID : SA11AI.4810

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

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

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	5900.00
TOTAL This Period (last page this line number only).....	5900.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
TRIDENT PAC

Full Name (Last, First, Middle Initial)
A. ANEDOT, INC.

Date of Disbursement: MM / DD / YYYY
09 / 24 / 2020

Mailing Address: 1340 POYDRAS STREET
SUITE 1770

City: NEW ORLEANS State: LA Zip Code: 70112

Purpose of Disbursement: CREDIT CARD PROCESSING FEE
Candidate Name: [] Category/Type: []

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

FEC Identification Number: C []
Transaction ID : **SB21B.4819**
Amount of Each Disbursement this Period: 36.30
 Memo Item

Full Name (Last, First, Middle Initial)
B. ANEDOT, INC.

Date of Disbursement: MM / DD / YYYY
09 / 29 / 2020

Mailing Address: 1340 POYDRAS STREET
SUITE 1770

City: NEW ORLEANS State: LA Zip Code: 70112

Purpose of Disbursement: CREDIT CARD PROCESSING FEE
Candidate Name: [] Category/Type: []

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

FEC Identification Number: C []
Transaction ID : **SB21B.4820**
Amount of Each Disbursement this Period: 200.30
 Memo Item

Full Name (Last, First, Middle Initial)
C. BELLIS, KELLY, , ,

Date of Disbursement: MM / DD / YYYY
09 / 21 / 2020

Mailing Address: 8502 ALTANTIC AVENUE
UNIT B

City: VIRGINIA BEACH State: VA Zip Code: 23541

Purpose of Disbursement: FUNDRAISING CONSULTING
Candidate Name: [] Category/Type: []

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

FEC Identification Number: C []
Transaction ID : **SB21B.4817**
Amount of Each Disbursement this Period: 1000.00
 Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1236.60

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
TRIDENT PAC

A. CROSBY OTTENHOFF GROUP

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 611 PENNSYLVANIA AVE
STE #267

M M M	/	D D D	/	Y Y Y Y Y
08		11		2020

City WASHINGTON State DC Zip Code 20003

FEC Identification Number

Purpose of Disbursement
COMPLIANCE CONSULTING / DELIVERY SERVICE

C

Transaction ID : SB21B.4803

Candidate Name

Amount of Each Disbursement this Period

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

609.05

Memo Item

B. CROSBY OTTENHOFF GROUP

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 611 PENNSYLVANIA AVE
STE #267

M M M	/	D D D	/	Y Y Y Y Y
09		08		2020

City WASHINGTON State DC Zip Code 20003

FEC Identification Number

Purpose of Disbursement
COMPLIANCE CONSULTING

C

Transaction ID : SB21B.4815

Candidate Name

Amount of Each Disbursement this Period

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

337.50

Memo Item

C. PPG CONSULTING LLC

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 3401 13TH STREET SOUTH

M M M	/	D D D	/	Y Y Y Y Y
08		03		2020

City ARLINGTON State VA Zip Code 22204

FEC Identification Number

Purpose of Disbursement
FUNDRAISING CONSULTING

C

Transaction ID : SB21B.4808

Candidate Name

Amount of Each Disbursement this Period

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

2500.00

Memo Item

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

3446.55

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

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
TRIDENT PAC

A. PPG CONSULTING LLC

Full Name (Last, First, Middle Initial)
Mailing Address 3401 13TH STREET SOUTH

City ARLINGTON State VA Zip Code 22204

Purpose of Disbursement FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 04 / 2020

FEC Identification Number: C

Transaction ID : SB21B.4814

Amount of Each Disbursement this Period: 2500.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2500.00

TOTAL This Period (last page this line number only)..... ▶ 7183.15

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
TRIDENT PAC

A. ANN WAGNER FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 50

M M M	/	D D D	/	Y Y Y Y Y
09		27		2020

City BALLWIN State MO Zip Code 63022

FEC Identification Number

Purpose of Disbursement
VOIDED PAYMENT - CHECK NOT CASHED

C	C00495846
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Candidate Name

Category/
Type

Transaction ID : SB23.4823

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: MO District: 02

- 2800.00

Memo Item

B. KANSANS FOR MARSHALL

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 1588

M M M	/	D D D	/	Y Y Y Y Y
08		03		2020

City GREAT BEND State KS Zip Code 67530

FEC Identification Number

Purpose of Disbursement
CONTRIBUTION

C	C00576173
---	-----------

Candidate Name

Category/
Type

Transaction ID : SB23.4800

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: KS District: 00

500.00

Memo Item

C. VALADAO FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 5132 NORTH PALM AVENUE
#227

M M M	/	D D D	/	Y Y Y Y Y
08		26		2020

City FRESNO State CA Zip Code 93704

FEC Identification Number

Purpose of Disbursement
CONTRIBUTION

C	C00499392
---	-----------

Candidate Name

Category/
Type

Transaction ID : SB23.4802

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: CA District: 21

2800.00

Memo Item

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

500.00

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

500.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
TRIDENT PAC

A. WILLIAMSBURG-JAMES CITY COUNTY REPUBLICAN COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address PO BIX 2104

City WILLIAMSBURG State VA Zip Code 23187

Purpose of Disbursement
NON-FEDERAL CONTRIBUTION - EVENT SPONSORSHIP

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
07 / 16 / 2020

FEC Identification Number: C

Transaction ID : SB29.4806

Amount of Each Disbursement this Period: 500.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	500.00