

# 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**  
**MISSION FIRST PEOPLE ALWAYS PAC**

ADDRESS (number and street) **PO BOX 2713**  
Check if different than previously reported. (ACC) **FARMINGTON HILLS MI 48333**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00774588** 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  **11** /  **08** /  **2022** in the State of

5. Covering Period  **10** /  **01** /  **2022** through  **11** /  **28** /  **2022**

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

Signature of Treasurer CRATE, BRADLEY, T., MR., [Electronically Filed] Date  **12** /  **08** /  **2022**

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

**MISSION FIRST PEOPLE ALWAYS 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="2022"/>	<input type="text" value="16868.91"/>	<input type="text" value="16868.91"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="98524.10"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="426.00"/>	<input type="text" value="125321.08"/>
(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="98950.10"/>	<input type="text" value="142189.99"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="74348.88"/>	<input type="text" value="117588.77"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="24601.22"/>	<input type="text" value="24601.22"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**MISSION FIRST PEOPLE ALWAYS 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).....	391.00	1939.00
(ii) Unitemized .....	35.00	2165.56
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	426.00	4104.56
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	5000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	426.00	9104.56
12. Transfers From Affiliated/Other Party Committees.....	0.00	116216.52
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)).....▶	426.00	125321.08
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	426.00	125321.08

**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 .....	3098.88	18874.77
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	3098.88	18874.77
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	62500.00	89964.00
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).....	8750.00	8750.00
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)) ..	74348.88	117588.77
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	74348.88	117588.77

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	426.00	9104.56
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	426.00	9104.56
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	3098.88	18874.77
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	3098.88	18874.77

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 30
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**MISSION FIRST PEOPLE ALWAYS PAC**

**A. BURR, EDGAR, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5014 WHITE FLINT DRIVE  
 City KENSINGTON State MD Zip Code 20895  
 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 10 / 05 / 2022  
**Transaction ID : SA11A1.8476**  
 Amount of Each Receipt this Period 25.00  
 Memo Item  
 EARMARKED THROUGH WINRED [SA11A1.8458]

**B. BURR, EDGAR, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5014 WHITE FLINT DRIVE  
 City KENSINGTON State MD Zip Code 20895  
 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 11 / 05 / 2022  
**Transaction ID : SA11A1.8488**  
 Amount of Each Receipt this Period 25.00  
 Memo Item  
 EARMARKED THROUGH WINRED [SA11A1.8472]

**C. ERICKSON, SANDRA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 118 MOCKERNUT CIRCLE  
 City AIKEN State SC Zip Code 29803  
 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 10 / 31 / 2022  
**Transaction ID : SA11A1.8487**  
 Amount of Each Receipt this Period 25.00  
 Memo Item  
 EARMARKED THROUGH WINRED [SA11A1.8471]

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	75.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 30
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**MISSION FIRST PEOPLE ALWAYS PAC**

**A. FITZPATRICK, KATHRYN, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5320 ISLE ROYAL COURT  
 City WEST BLOOMFIELD TOWNSHIP State MI Zip Code 48323  
 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 10 / 15 / 2022  
**Transaction ID : SA11A1.8477**  
 Amount of Each Receipt this Period 22.00  
 Memo Item  
 EARMARKED THROUGH WINRED [SA11A1.8468]

**B. FITZPATRICK, KATHRYN, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5320 ISLE ROYAL COURT  
 City WEST BLOOMFIELD TOWNSHIP State MI Zip Code 48323  
 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 ▼ 242.00

Date of Receipt 11 / 15 / 2022  
**Transaction ID : SA11A1.8490**  
 Amount of Each Receipt this Period 22.00  
 Memo Item  
 EARMARKED THROUGH WINRED [SA11A1.8473]

**C. GREINER, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12491 WELCH ROAD  
 City BRITTON State MI Zip Code 49229  
 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 ▼ 325.00

Date of Receipt 10 / 29 / 2022  
**Transaction ID : SA11A1.8485**  
 Amount of Each Receipt this Period 10.00  
 Memo Item  
 EARMARKED THROUGH WINRED [SA11A1.8470]

<b>SUBTOTAL</b> of Receipts This Page (optional).....	54.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 30
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**MISSION FIRST PEOPLE ALWAYS PAC**

**A. GREINER, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12491 WELCH ROAD  
 City BRITTON State MI Zip Code 49229  
 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 ▼ 350.00

Date of Receipt 10 / 30 / 2022  
**Transaction ID : SA11A1.8482**  
 Amount of Each Receipt this Period 25.00  
 Memo Item  
 EARMARKED THROUGH WINRED [SA11A1.8470]

**B. HOFFMAN, JANET, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1161 N. LAKESHORE DR.  
 City LUDINGTON State MI Zip Code 49431  
 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 10 / 30 / 2022  
**Transaction ID : SA11A1.8481**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 EARMARKED THROUGH WINRED [SA11A1.8470]

**C. KLEBBA, ELLEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5457 RIVER RIDGE DR  
 City BRIGHTON State MI Zip Code 48116  
 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 10 / 20 / 2022  
**Transaction ID : SA11A1.8478**  
 Amount of Each Receipt this Period 31.00  
 Memo Item  
 EARMARKED THROUGH WINRED [SA11A1.8469]

<b>SUBTOTAL</b> of Receipts This Page (optional).....	106.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 30
	<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)  
**MISSION FIRST PEOPLE ALWAYS PAC**

**A. KLEBBA, ELLEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5457 RIVER RIDGE DR  
 City BRIGHTON State MI Zip Code 48116  
 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 ▼ 341.00

Date of Receipt 11 / 20 / 2022  
**Transaction ID : SA11A1.8491**  
 Amount of Each Receipt this Period 31.00  
 Memo Item  
 EARMARKED THROUGH WINRED [SA11A1.8474]

**B. MORIARITY, RICHARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2024 SOUTH DAVIS CIRCLE  
 City MESA State AZ Zip Code 85210  
 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 10 / 30 / 2022  
**Transaction ID : SA11A1.8480**  
 Amount of Each Receipt this Period 75.00  
 Memo Item  
 EARMARKED THROUGH WINRED [SA11A1.8470]

**C. SCHILLING, ABBY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5795 SCOTTDAL ROAD  
 City ST. JOSEPH State MI Zip Code 49085  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) FARMING  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 30 / 2022  
**Transaction ID : SA11A1.8484**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 EARMARKED THROUGH WINRED [SA11A1.8470]

<b>SUBTOTAL</b> of Receipts This Page (optional).....	156.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 30
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**MISSION FIRST PEOPLE ALWAYS PAC**

**A. WINRED**

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
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FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3423.32

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2022

**Transaction ID : SA11AI.8338**

Amount of Each Receipt this Period  
254.96

Memo Item  
 TOTAL EARMARKED THROUGH CONDUIT: PAC  
 LIMIT NOT AFFECTED: ITEMIZED IF REQUIRED

**B. WINRED**

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
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FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3446.08

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2022

**Transaction ID : SA11AI.8458**

Amount of Each Receipt this Period  
22.76

Memo Item  
 TOTAL EARMARKED THROUGH CONDUIT: PAC  
 LIMIT NOT AFFECTED: ITEMIZED IF REQUIRED

**C. WINRED**

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
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FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
3466.58

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2022

**Transaction ID : SA11AI.8468**

Amount of Each Receipt this Period  
20.50

Memo Item  
 TOTAL EARMARKED THROUGH CONDUIT: PAC  
 LIMIT NOT AFFECTED: ITEMIZED IF REQUIRED

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 30
<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)  
**MISSION FIRST PEOPLE ALWAYS PAC**

**A. WINRED**

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
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FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3494.34

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2022

**Transaction ID : SA11AI.8469**

Amount of Each Receipt this Period  
27.76

Memo Item  
 TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED: ITEMIZED IF REQUIRED

**B. WINRED**

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3703.78

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2022

**Transaction ID : SA11AI.8470**

Amount of Each Receipt this Period  
209.44

Memo Item  
 TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED: ITEMIZED IF REQUIRED

**C. WINRED**

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
3731.09

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2022

**Transaction ID : SA11AI.8471**

Amount of Each Receipt this Period  
27.31

Memo Item  
 TOTAL EARMARKED THROUGH CONDUIT: PAC LIMIT NOT AFFECTED: ITEMIZED IF REQUIRED

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 30
<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)  
**MISSION FIRST PEOPLE ALWAYS PAC**

**A. WINRED**

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3758.40

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
11	/	10	/	2022

**Transaction ID : SA11Al.8472**

Amount of Each Receipt this Period  
27.31

Memo Item  
 TOTAL EARMARKED THROUGH CONDUIT: PAC  
 LIMIT NOT AFFECTED: ITEMIZED IF REQUIRED

**B. WINRED**

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3778.43

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
11	/	21	/	2022

**Transaction ID : SA11Al.8473**

Amount of Each Receipt this Period  
20.03

Memo Item  
 TOTAL EARMARKED THROUGH CONDUIT: PAC  
 LIMIT NOT AFFECTED: ITEMIZED IF REQUIRED

**C. WINRED**

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
3806.66

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
11	/	21	/	2022

**Transaction ID : SA11Al.8474**

Amount of Each Receipt this Period  
28.23

Memo Item  
 TOTAL EARMARKED THROUGH CONDUIT: PAC  
 LIMIT NOT AFFECTED: ITEMIZED IF REQUIRED

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	391.00

**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)  
**MISSION FIRST PEOPLE ALWAYS PAC**

Full Name (Last, First, Middle Initial) <b>A. DICKINSON WRIGHT PLLC</b>		Date of Disbursement MM / DD / YYYY 11 / 04 / 2022
Mailing Address 1825 EYE STREET NW SUITE 900		FEC Identification Number C [ ] <b>Transaction ID : SB21B.8510</b> Amount of Each Disbursement this Period [ ] 913.00
City WASHINGTON	State DC	Zip Code 20006
Purpose of Disbursement LEGAL CONSULTING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. IMGE LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 05 / 2022
Mailing Address 108 SOUTH WASHINGTON ST 3RD FLOOR		FEC Identification Number C [ ] <b>Transaction ID : SB21B.8523</b> Amount of Each Disbursement this Period [ ] 11.75
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement FUNDRAISING FEES		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. IMGE LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 06 / 2022
Mailing Address 108 SOUTH WASHINGTON ST 3RD FLOOR		FEC Identification Number C [ ] <b>Transaction ID : SB21B.8524</b> Amount of Each Disbursement this Period [ ] 14.00
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement FUNDRAISING FEES		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 938.75
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
**MISSION FIRST PEOPLE ALWAYS PAC**

Full Name (Last, First, Middle Initial)

### A. IMGE LLC

Mailing Address 108 SOUTH WASHINGTON ST  
3RD FLOOR

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
FUNDRAISING FEES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			12			2022			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.8525

Amount of Each Disbursement this Period

[REDACTED] 1.25

Memo Item

Full Name (Last, First, Middle Initial)

### B. IMGE LLC

Mailing Address 108 SOUTH WASHINGTON ST  
3RD FLOOR

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
FUNDRAISING FEES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			20			2022			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.8526

Amount of Each Disbursement this Period

[REDACTED] 1.10

Memo Item

Full Name (Last, First, Middle Initial)

### C. IMGE LLC

Mailing Address 108 SOUTH WASHINGTON ST  
3RD FLOOR

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
FUNDRAISING FEES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			25			2022			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.8527

Amount of Each Disbursement this Period

[REDACTED] 1.55

Memo Item

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

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

[REDACTED] 3.90

[REDACTED]

**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)  
**MISSION FIRST PEOPLE ALWAYS PAC**

Full Name (Last, First, Middle Initial)

**A. IMAGE LLC**

Date of Disbursement

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

Mailing Address 108 SOUTH WASHINGTON ST  
3RD FLOOR

FEC Identification Number

**C** [REDACTED]

**Transaction ID : SB21B.8528**  
Amount of Each Disbursement this Period

[REDACTED] 11.50

Memo Item

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
FUNDRAISING FEES

[REDACTED]

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. IMAGE LLC**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	4		2	0	2	2

Mailing Address 108 SOUTH WASHINGTON ST  
3RD FLOOR

FEC Identification Number

**C** [REDACTED]

**Transaction ID : SB21B.8529**  
Amount of Each Disbursement this Period

[REDACTED] 1.50

Memo Item

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
FUNDRAISING FEES

[REDACTED]

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. IMAGE LLC**

Date of Disbursement

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

Mailing Address 108 SOUTH WASHINGTON ST  
3RD FLOOR

FEC Identification Number

**C** [REDACTED]

**Transaction ID : SB21B.8530**  
Amount of Each Disbursement this Period

[REDACTED] 1.50

Memo Item

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
FUNDRAISING FEES

[REDACTED]

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

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

[REDACTED] 14.50

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

[REDACTED]

**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)  
**MISSION FIRST PEOPLE ALWAYS PAC**

Full Name (Last, First, Middle Initial)

**A. IMG E LLC**

Mailing Address 108 SOUTH WASHINGTON ST  
3RD FLOOR

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
FUNDRAISING FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 21 / 2022

FEC Identification Number

C

Transaction ID : SB21B.8531

Amount of Each Disbursement this Period

1.10

Memo Item

Full Name (Last, First, Middle Initial)

**B. IMG E LLC**

Mailing Address 108 SOUTH WASHINGTON ST  
3RD FLOOR

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
FUNDRAISING FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 25 / 2022

FEC Identification Number

C

Transaction ID : SB21B.8532

Amount of Each Disbursement this Period

1.55

Memo Item

Full Name (Last, First, Middle Initial)

**C. RED CURVE SOLUTIONS**

Mailing Address 138 CONANT STREET  
2ND FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 05 / 2022

FEC Identification Number

C

Transaction ID : SB21B.8548

Amount of Each Disbursement this Period

1012.03

Memo Item

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

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

1014.68



**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)  
**MISSION FIRST PEOPLE ALWAYS PAC**

Full Name (Last, First, Middle Initial) <b>A. RED CURVE SOLUTIONS</b>			Date of Disbursement MM / DD / YYYY 11 / 03 / 2022	
Mailing Address 138 CONANT STREET 2ND FLOOR			FEC Identification Number C [ ] <b>Transaction ID : SB21B.8549</b> Amount of Each Disbursement this Period [ ] 1040.14	
City BEVERLY	State MA	Zip Code 01915	Category/Type [ ]	
Purpose of Disbursement COMPLIANCE CONSULTING		Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:	<input type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) <b>B. WINRED TECHNICAL SERVICES, LLC</b>			Date of Disbursement MM / DD / YYYY 10 / 05 / 2022	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C [ ] <b>Transaction ID : SB21B.8560</b> Amount of Each Disbursement this Period [ ] 9.26	
City ARLINGTON	State VA	Zip Code 22219	Category/Type [ ]	
Purpose of Disbursement MERCHANT FEES		Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:	<input type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) <b>C. WINRED TECHNICAL SERVICES, LLC</b>			Date of Disbursement MM / DD / YYYY 10 / 06 / 2022	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C [ ] <b>Transaction ID : SB21B.8561</b> Amount of Each Disbursement this Period [ ] 11.04	
City ARLINGTON	State VA	Zip Code 22219	Category/Type [ ]	
Purpose of Disbursement MERCHANT FEES		Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:	<input type="checkbox"/> Memo Item			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 1060.44
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
**MISSION FIRST PEOPLE ALWAYS PAC**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES, LLC</b>			Date of Disbursement MM / DD / YYYY 10 / 12 / 2022	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C [ ] <b>Transaction ID : SB21B.8562</b>	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period [ ] 0.99	
Purpose of Disbursement MERCHANT FEES		Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		Category/Type		

Full Name (Last, First, Middle Initial) <b>B. WINRED TECHNICAL SERVICES, LLC</b>			Date of Disbursement MM / DD / YYYY 10 / 20 / 2022	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C [ ] <b>Transaction ID : SB21B.8563</b>	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period [ ] 0.40	
Purpose of Disbursement MERCHANT FEES		Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		Category/Type		

Full Name (Last, First, Middle Initial) <b>C. WINRED TECHNICAL SERVICES, LLC</b>			Date of Disbursement MM / DD / YYYY 10 / 25 / 2022	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C [ ] <b>Transaction ID : SB21B.8564</b>	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period [ ] 1.69	
Purpose of Disbursement MERCHANT FEES		Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		Category/Type		

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

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

[ ] 3.08
[ ]

**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)  
**MISSION FIRST PEOPLE ALWAYS PAC**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES, LLC</b>		Date of Disbursement MM / DD / YYYY 11 / 03 / 2022
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [ ] <b>Transaction ID : SB21B.8565</b> Amount of Each Disbursement this Period [ ] 9.06
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. WINRED TECHNICAL SERVICES, LLC</b>		Date of Disbursement MM / DD / YYYY 11 / 04 / 2022
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [ ] <b>Transaction ID : SB21B.8566</b> Amount of Each Disbursement this Period [ ] 1.19
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. WINRED TECHNICAL SERVICES, LLC</b>		Date of Disbursement MM / DD / YYYY 11 / 10 / 2022
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [ ] <b>Transaction ID : SB21B.8567</b> Amount of Each Disbursement this Period [ ] 1.19
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 11.44
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
**MISSION FIRST PEOPLE ALWAYS PAC**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES, LLC</b>		Date of Disbursement MM / DD / YYYY 11 / 21 / 2022
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [ ] <b>Transaction ID : SB21B.8568</b>
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period [ ] 0.87
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. WINRED TECHNICAL SERVICES, LLC</b>		Date of Disbursement MM / DD / YYYY 11 / 25 / 2022
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C [ ] <b>Transaction ID : SB21B.8569</b>
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period [ ] 1.22
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 2.09
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ] 3048.88

**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)  
**MISSION FIRST PEOPLE ALWAYS PAC**

Full Name (Last, First, Middle Initial) <b>A. AADLAND FOR COLORADO</b>		Date of Disbursement MM / DD / YYYY 11 / 03 / 2022
Mailing Address PO BOX 630552		FEC Identification Number C00781492 <b>Transaction ID : SB23.8493</b>
City LITTLETON	State CO	Zip Code 80163
Purpose of Disbursement FEDERAL CONTRIBUTION		Amount of Each Disbursement this Period 2000.00
Candidate Name AADLAND, ERIK, , ,		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CO	District: 07	

Full Name (Last, First, Middle Initial) <b>B. AARON BEAN FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 10 / 31 / 2022
Mailing Address 2640A MITCHAM DRIVE		FEC Identification Number C00816983 <b>Transaction ID : SB23.8495</b>
City TALLAHASSEE	State FL	Zip Code 32308
Purpose of Disbursement FEDERAL CONTRIBUTION		Amount of Each Disbursement this Period 2000.00
Candidate Name BEAN, AARON P., , ,		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: FL	District: 04	

Full Name (Last, First, Middle Initial) <b>C. BECKER FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 11 / 03 / 2022
Mailing Address 50 S JONES BLVD STE 201		FEC Identification Number C00769414 <b>Transaction ID : SB23.8497</b>
City LAS VEGAS	State NV	Zip Code 89107
Purpose of Disbursement FEDERAL CONTRIBUTION		Amount of Each Disbursement this Period 2000.00
Candidate Name BECKER, APRIL, , ,		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NV	District: 03	

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

6000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MISSION FIRST PEOPLE ALWAYS PAC**

**A. BIVINGS FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX15045

City: DETROIT State: MI Zip Code: 48215

Purpose of Disbursement: FEDERAL CONTRIBUTION

Candidate Name: BIVINGS, MARTELL DE'ANGELO, , ,

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

State: MI District: 13

Date of Disbursement: 11 / 03 / 2022

FEC Identification Number: C00813048  
Transaction ID : SB23.8499  
Amount of Each Disbursement this Period: 2000.00

Memo Item

**B. BOGNET FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address 1298 N. CHURCH ST. STE. C

City: HAZLE TOWNSHIP State: PA Zip Code: 18202

Purpose of Disbursement: FEDERAL CONTRIBUTION

Candidate Name: BOGNET, JIM, , ,

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

State: PA District: 08

Date of Disbursement: 11 / 03 / 2022

FEC Identification Number: C00735688  
Transaction ID : SB23.8501  
Amount of Each Disbursement this Period: 2000.00

Memo Item

**C. CMR POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 2485

City: SPRINGFIELD State: VA Zip Code: 22152

Purpose of Disbursement: FEDERAL CONTRIBUTION

Candidate Name:

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

State: District:

Date of Disbursement: 11 / 14 / 2022

FEC Identification Number: C00469429  
Transaction ID : SB23.8505  
Amount of Each Disbursement this Period: 5000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 9000.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MISSION FIRST PEOPLE ALWAYS PAC**

Full Name (Last, First, Middle Initial)

## A. CORY MILLS FOR CONGRESS

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2022			

Mailing Address PMB 288  
501 N. ORLANDO AVENUE SUITE 313

City WINTER PARK State FL Zip Code 32789

Purpose of Disbursement  
FEDERAL CONTRIBUTION

FEC Identification Number

C C00774943

Transaction ID : SB23.8507

Amount of Each Disbursement this Period

2000.00

Candidate Name

MILLS, CORY, , ,

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2022  
 Primary  General  
 Other (specify) ▼

State: FL District: 07

Memo Item

Full Name (Last, First, Middle Initial)

## B. DESPOSITO FOR NEW YORK

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			03			2022			

Mailing Address PO BOX 188

City ISLAND PARK State NY Zip Code 11558

Purpose of Disbursement  
FEDERAL CONTRIBUTION

FEC Identification Number

C C00809426

Transaction ID : SB23.8509

Amount of Each Disbursement this Period

2000.00

Candidate Name

DESPOSITO, ANTHONY P, , ,

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2022  
 Primary  General  
 Other (specify)

State: NY District: 04

Memo Item

Full Name (Last, First, Middle Initial)

## C. ELECTING MAJORITY MAKING EFFECTIVE REPUBLICANS

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			14			2022			

Mailing Address PO BOX 183

City ANOKA State MN Zip Code 55303

Purpose of Disbursement  
FEDERAL CONTRIBUTION

FEC Identification Number

C C00592089

Transaction ID : SB23.8512

Amount of Each Disbursement this Period

5000.00

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2022  
 Primary  General  
 Other (specify) ▼

State: District:

Memo Item

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

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

9000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MISSION FIRST PEOPLE ALWAYS PAC**

Full Name (Last, First, Middle Initial) <b>A. ELI CRANE FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 11 / 03 / 2022
Mailing Address PO BOX 1950		FEC Identification Number C 000784934 <b>Transaction ID : SB23.8514</b>
City CORTARO	State AZ	Zip Code 85652
Purpose of Disbursement FEDERAL CONTRIBUTION		Amount of Each Disbursement this Period 2000.00
Candidate Name <b>CRANE, ELI, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: AZ	District: 02	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF ALLAN FUNG</b>		Date of Disbursement MM / DD / YYYY 11 / 03 / 2022
Mailing Address PO BOX 8542		FEC Identification Number C 000805002 <b>Transaction ID : SB23.8516</b>
City CRANSTON	State RI	Zip Code 02920
Purpose of Disbursement FEDERAL CONTRIBUTION		Amount of Each Disbursement this Period 2000.00
Candidate Name <b>FUNG, ALLAN, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: RI	District: 02	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF JEREMY SHAFFER</b>		Date of Disbursement MM / DD / YYYY 11 / 03 / 2022
Mailing Address PO BOX 391		FEC Identification Number C 000803726 <b>Transaction ID : SB23.8518</b>
City GIBSONIA	State PA	Zip Code 15044
Purpose of Disbursement FEDERAL CONTRIBUTION		Amount of Each Disbursement this Period 2000.00
Candidate Name <b>SHAFFER, JEREMY, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: PA	District: 17	<input type="checkbox"/> Memo Item

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



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**MISSION FIRST PEOPLE ALWAYS PAC**

Full Name (Last, First, Middle Initial)

### A. HUDSON FOR CONGRESS

Mailing Address PO BOX 1875

City  
SOUTHERN PINES

State  
NC

Zip Code  
28388

Purpose of Disbursement  
FEDERAL CONTRIBUTION

Candidate Name

**HUDSON, RICHARD L. JR., , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2022  
 Primary  General  
 Other (specify) ▼

State: NC District: 09

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	8		2	0	2	2

FEC Identification Number

**C** C00504522

**Transaction ID : SB23.8520**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

### B. HUIZENGA FOR CONGRESS

Mailing Address PO BOX 254

City  
ZEELAND

State  
MI

Zip Code  
49464

Purpose of Disbursement  
FEDERAL CONTRIBUTION

Candidate Name

**HUIZENGA, WILLIAM P, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2022  
 Primary  General  
 Other (specify)

State: MI District: 04

Date of Disbursement

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

FEC Identification Number

**C** C00459297

**Transaction ID : SB23.8522**

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

### C. KEN CALVERT FOR CONGRESS COMMITTEE

Mailing Address PO BOX 2438

City  
CORONA

State  
CA

Zip Code  
92878

Purpose of Disbursement  
FEDERAL CONTRIBUTION

Candidate Name

**CALVERT, KEN, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2022  
 Primary  General  
 Other (specify) ▼

State: CA District: 41

Date of Disbursement

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

FEC Identification Number

**C** C00257337

**Transaction ID : SB23.8534**

Amount of Each Disbursement this Period

2000.00

Memo Item

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

6500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MISSION FIRST PEOPLE ALWAYS PAC**

**A. KIRKMEYERFORCONGRESS.COM**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 468

City FORT LUPTON State CO Zip Code 80621

Purpose of Disbursement FEDERAL CONTRIBUTION

Candidate Name KIRKMEYER, BARBARA, , ,

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

State: CO District: 08

Date of Disbursement: 11 / 03 / 2022

FEC Identification Number: C00794602  
Transaction ID : SB23.8536  
Amount of Each Disbursement this Period: 2000.00

Memo Item

**B. MAJORITY COMMITTEE PAC--MC PAC**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 10134

City BAKERSFIELD State CA Zip Code 93389

Purpose of Disbursement FEDERAL CONTRIBUTION

Candidate Name

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

State: District:

Date of Disbursement: 11 / 14 / 2022

FEC Identification Number: C00428052  
Transaction ID : SB23.8538  
Amount of Each Disbursement this Period: 5000.00

Memo Item

**C. MIKE GARCIA FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address 9070 IRVINE CENTER DRIVE #150

City IRVINE State CA Zip Code 92618

Purpose of Disbursement FEDERAL CONTRIBUTION

Candidate Name GARCIA, MICHAEL, , ,

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

State: CA District: 27

Date of Disbursement: 11 / 03 / 2022

FEC Identification Number: C00701102  
Transaction ID : SB23.8540  
Amount of Each Disbursement this Period: 2000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 9000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MISSION FIRST PEOPLE ALWAYS PAC**

Full Name (Last, First, Middle Initial) <b>A. MILLER-MEEKS FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 11 / 03 / 2022
Mailing Address PO BOX 33		FEC Identification Number C 000558825 <b>Transaction ID : SB23.8542</b>
City OTTUMWA	State IA	Zip Code 52501
Purpose of Disbursement FEDERAL CONTRIBUTION		Amount of Each Disbursement this Period 2000.00
Candidate Name <b>MILLER-MEEKS, MARIANNETTE JANE, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: IA	District: 01	

Full Name (Last, First, Middle Initial) <b>B. MONICA FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 11 / 03 / 2022
Mailing Address 1317 W FRONTAGE RD STE A		FEC Identification Number C 000765719 <b>Transaction ID : SB23.8547</b>
City ALAMO	State TX	Zip Code 78516
Purpose of Disbursement FEDERAL CONTRIBUTION		Amount of Each Disbursement this Period 2000.00
Candidate Name <b>DE LA CRUZ, MONICA, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item
State: TX	District: 15	

Full Name (Last, First, Middle Initial) <b>C. SALAZAR FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 11 / 03 / 2022
Mailing Address 3725 WEST FLAGLER STREET #281		FEC Identification Number C 000714261 <b>Transaction ID : SB23.8551</b>
City MIAMI	State FL	Zip Code 33134
Purpose of Disbursement FEDERAL CONTRIBUTION		Amount of Each Disbursement this Period 2000.00
Candidate Name <b>SALAZAR, MARIA ELVIRA, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: FL	District: 27	

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

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

6000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MISSION FIRST PEOPLE ALWAYS PAC**

Full Name (Last, First, Middle Initial)

**A. STEVE CHABOT FOR CONGRESS**

Mailing Address 9856 ARCHER LN

City DUBLIN State OH Zip Code 43017

Purpose of Disbursement  
FEDERAL CONTRIBUTION

Candidate Name  
**CHABOT, STEVE, , ,**

Office Sought:  House  Senate  President  
State: OH District: 01  
Disbursement For: 2022  
 Primary  General  Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 03 / 2022

FEC Identification Number

**C** C00301838

**Transaction ID : SB23.8553**

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. THE EYE OF THE TIGER POLITICAL ACTION COMMITTEE**

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement  
FEDERAL CONTRIBUTION

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 14 / 2022

FEC Identification Number

**C** C00467431

**Transaction ID : SB23.8555**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. THE PAT HARRIGAN COMMITTEE**

Mailing Address PO BOX 97275

City RALEIGH State NC Zip Code 27624

Purpose of Disbursement  
FEDERAL CONTRIBUTION

Candidate Name  
**HARRIGAN, PAT, , ,**

Office Sought:  House  Senate  President  
State: NC District: 14  
Disbursement For: 2022  
 Primary  General  Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 03 / 2022

FEC Identification Number

**C** C00802298

**Transaction ID : SB23.8557**

Amount of Each Disbursement this Period

2000.00

Memo Item

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

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

9000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MISSION FIRST PEOPLE ALWAYS PAC**

**A. WALBERG FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 1362  
317 W WASHINGTON AVE

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2022

City JACKSON State MI Zip Code 49204

FEC Identification Number

Purpose of Disbursement  
FEDERAL CONTRIBUTION

C	C00390724
---	-----------

Candidate Name  
**WALBERG, TIMOTHY L REP, , ,**

Category/  
Type

**Transaction ID : SB23.8559**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify) ▼  
State: MI District: 07

2000.00
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Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

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

City State Zip Code

FEC Identification Number

Purpose of Disbursement

C	
---	--

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

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

--

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

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

City State Zip Code

FEC Identification Number

Purpose of Disbursement

C	
---	--

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

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

--

Memo Item

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

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

2000.00
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62500.00
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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 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)  
**MISSION FIRST PEOPLE ALWAYS PAC**

Full Name (Last, First, Middle Initial) <b>A. MISSION FIRST PEOPLE ALWAYS PAC - STATE</b>		Date of Disbursement MM / DD / YYYY 10 / 20 / 2022
Mailing Address PO BOX 2713		FEC Identification Number C [ ] <b>Transaction ID : SB29.8544</b> Amount of Each Disbursement this Period [ ] 8650.00
City FARMINGTON HILLS	State MI	Zip Code 48333
Purpose of Disbursement TRANSFER TO NON-FEDERAL PAC		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. MISSION FIRST PEOPLE ALWAYS PAC - STATE</b>		Date of Disbursement MM / DD / YYYY 11 / 15 / 2022
Mailing Address PO BOX 2713		FEC Identification Number C [ ] <b>Transaction ID : SB29.8545</b> Amount of Each Disbursement this Period [ ] 100.00
City FARMINGTON HILLS	State MI	Zip Code 48333
Purpose of Disbursement TRANSFER TO NON-FEDERAL PAC		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 8750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ] 8750.00