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Image# 202012039337579255

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X	For Other 7	Than An Autho	orized Commi	ttee		Office Use Only	
NAME OF COMMITTEE (in full)	TYPE OR PR	RINT ▼	Example: If ty over the lines		12FE4M	5	
Middle Resolution	Federal PAC	Inc.			1 1 1 1 1		1
ADDRESS (number and stre	et) PO Box 47	9					
Check if different than previously reported. (ACC)	Mechanics	ville			VA L	23111	
2. FEC IDENTIFICATIO	N NUMBER ▼	CITY	A		STATE A	ZIP C	ODE A
C C00512335		3. IS 1 REF	THIS PORT	NEW (N) OR	AN (A)	IENDED	
4. TYPE OF REPOR (Choose One) (a) Quarterly Reports: April 15 Quarterly Rep	Report Due C	on: Mar 20	O (M3)	May 20 (M5) Jun 20 (M6) Jul 20 (M7)	Sep Oct :	20 (M8) 20 (M9) 20 (M10)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE)
July 15 Quarterly Rep October 15 Quarterly Rep January 31 Year-End Rep	oort (Q2) F	2-Day PRE-Election Report for the:	Primary (1 Convention		General Special (
July 31 Mid-Y Report (Non-e Year Only) (M	fear (d) 3	30-Day	✗ General (3	90G)	Runoff (3		Special (30S)
5. Covering Period	10 / 15	Election		03 M M 11	2020	State 2020	of VA
I certify that I have examir Type or Print Name of Tre	Bach, Cath		y knowledge an	d belief it is tru	ue, correct and	d complete.	
Signature of Treasurer	Bach, Catharyne, L.,	,	[Electronic	ally Filed] [Date 12	/ 01 /	2020
NOTE: Submission of false,	erroneous, or incon	nplete information r	may subject the p	erson signing t	his Report to th	ne penalties of 5	2 U.S.C. § 30109
Office Use Only						FEC FOI Rev. 05/	

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)	OF RECEIPTS AND DISBURSEMENTS	Page 2
Write or Type Committee Name		
Middle Resolution Federal PAC Inc	3.	
Report Covering the Period: From:	0 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	11 / 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2020		6358.79
(b) Cash on Hand at Beginning of Reporting Period	60607.99	
(c) Total Receipts (from Line 19)	7600.00	176625.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	68207.99	182983.79
7. Total Disbursements (from Line 31)	24927.92	139703.72
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	43280.07	43280.07
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
This committee has qualified as a multical	andidate committee. (see FEC FORM 1M)	
	For further information contact:	
	Federal Election Commission 999 E Street, NW Washington, DC 20463	
	Toll Free 800-424-9530 Local 202-694-1100	

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Middle Resolution Federal PAC Inc.

R		10 / 15 / 2020 To:	11 23 2020		
I. Receipts		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
11.	Contributions (other than loans) From:				
	(a) Individuals/Persons Other				
	Than Political Committees	3500.00	400450.00		
	(i) Itemized (use Schedule A)	2500.00	168150.00		
	(ii) Unitemized	100.00	2225.00		
	(iii) TOTAL (add	100.00	2 223.00		
	Lines 11(a)(i) and (ii)	2600.00	170375.00		
			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	(b) Political Party Committees	0.00	0.00		
	(c) Other Political Committees	5000.00			
	(such as PACs)	5000.00	6250.00		
	(d) Total Contributions (add Lines				
	11(a)(iii), (b), and (c)) (Carry	7600.00	176625.00		
10	Totals to Line 33, page 5)	7000.00	110020100		
12.	Transfers From Affiliated/Other Party Committees	0.00	0.00		
	Tarty Committees	3.00	4 4		
13.	All Loans Received	0.00	0.00		
		4 4	4 4		
14.	Loan Repayments Received	0.00	0.00		
	Offsets To Operating Expenditures	4 4			
	(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		0.00		
10	(Dividends, Interest, etc.) Transfers from Non-Federal and Levin Funds	0.00	0.00		
10.	(a) Non-Federal Account				
	(from Schedule H3)	0.00	0.00		
	(4 4	4 4		
	(b) Levin Funds (from Schedule H5)	0.00	0.00		
	(b) Leviii i unus (iioiii ooneaule 115)	4 4	4 4		
	(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00		
19.	Total Receipts (add Lines 11(d),		1700F 00		
	12, 13, 14, 15, 16, 17, and 18(c))▶	7600.00	176625.00		
20	Total Federal Receipts				
_ U.	(subtract Line 18(c) from Line 19)	7600.00	176625.00		
	(7 7 7	4 4		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements		Total This Period		
Operating Expenditu (a) Allocated Feder	al/Non-Federal		Calendar Year-to-Date	
Activity (from S	are	0.00	0.00	
(i) Federal Sh	are	45 45 45		
` '	al Share	0.00	0.00	
(b) Other Federal (Expenditures		2621.76	15905.54	
(c) Total Operating	Expenditures)(ii), and (b))	2621.76	15905.54	
. Transfers to Affiliate		2 202 0		
		0.00	0.00	
Federal Candidates/	Committees Committees	0.00	0.00	
Independent Expend		45220.00		
Coordinated Party E (52 U.S.C. § 30116)	d))	15320.00	36893.38	
(use Schedule F)		0.00	0.00	
. Loan Repayments M	lade	0.00	0.00	
. Loans Made . Refunds of Contribu		0.00	0.00	
(a) Individuals/Pers		0.00	0.00	
(b) Dolitical Double	Committees	7 7 7		
(b) Political Party C (c) Other Political C	Committees	0.00	0.00	
` '		0.00	0.00	
(d) Total Contribution	on Refunds), (b), and (c))	200	0.00	
(add Lilles 20(a	<i>J</i> , (<i>b</i>), and (<i>c</i>))	0.00	0.00	
Other Disbursement	,			
Non-Federal Donatio	ns)	6986.16	86904.80	
	ivity (52 U.S.C. § 30101(20))			
(a) Allocated Feder (from Schedule	•			
	e	0.00	0.00	
(ii) "Levin" Shar	e	0.00	0.00	
(b) Federal Election	Activity Paid	0.00		
	ederal Fundsection Activity (add	0.00	0.00	
	30(a)(ii) and 30(b))	0.00	0.00	
Total Disbursements	(add Lines 21(c), 22,			
	28(d), 29 and 30(c))	24927.92	139703.72	
Total Federal Disbur				
(subtract Line 21(a)(
HOIH LINE 31)	······	24927.92	139703.72	

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)		Page 5
III. Net Contributions/ Operating Expenditures		
33. Total Contributions (other than loans) (from Line 11(d), page 3)	7600.00	176625.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7600.00	176625.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	2621.76	15905.54
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2621.76	15905.54

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: **PAGE** Use separate schedule(s) (check only one) **X** 11a 11b 11c

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6 OF

for each category of the 12 Detailed Summary Page 13 14 15 16 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) Middle Resolution Federal PAC Inc. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Abington, William, , , Date of Receipt Mailing Address 234 West Cook Ave 2020 16 City Zip Code State Transaction ID: SA11AI.7497 IL Libertyville 60048 Amount of Each Receipt this Period FEC ID number of contributing C 2000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) President Global Ops Medline Industries Inc. Contribution Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Clingman, Ed, , , Jr. Date of Receipt Mailing Address 7371 Beulah Church Rd 10 2020 City State Zip Code Transaction ID: SA11AI.7505 VA Mechanicsville 23111 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Self Employed Contribution CPA Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 500.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 2500.00 SUBTOTAL of Receipts This Page (optional)..... 2500.00 TOTAL This Period (last page this line number only).....

S 17

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 7 OF 38			
IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17			
	ny information copied from such Reports and State for commercial purposes, other than using the			erson for the purpose of soliciting contributions			
	NAME OF COMMITTEE (In Full) Middle Resolution Federal PAC	Inc.					
A .	Full Name of Individual (Last, First, Middle Initi FRIENDS OF DAVE BRAT INC.	al) or Full C	Organization Name	Date of Receipt			
	Mailing Address PO BOX 5094			10 23 2020			
	City GLEN ALLEN	State VA	Zip Code 23058	Transaction ID : SA11C.7503 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C co	0554949	5000.00			
	Name of Employer (for Individual)	Occ	cupation (for Individual)	Memo Item Contribution			
	Receipt For: Primary General Other (specify) ▼						
— В.	Full Name of Individual (Last, First, Middle Initi	Date of Receipt					
	Mailing Address			M = M / D = D / Y = Y = Y			
	City	State	Zip Code	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С					
	Name of Employer (for Individual)	Occ	cupation (for Individual)	Memo Item			
	Receipt For: Primary General Other (specify) ▼	Year-to-Date ▼					
— С.	Full Name of Individual (Last, First, Middle Initia	al) or Full C	Organization Name	Date of Receipt			
О.	Mailing Address			M M / D D / Y Y Y Y Y			
	City	State	Zip Code	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee. Name of Employer (for Individual)		С					
		Occ	cupation (for Individual)	Memo Item			
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼				
5	SUBTOTAL of Receipts This Page (optional)			5000.00			

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

5000.00

17

SCHEDULE B (FEC Form 3X)	lles com	wata ach saluls (1)		NUMBER:		PAGE 8 OF 38	
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	(check on		□] oc	
	Detailed S	Summary Page	X 21b 28a		23 28c	26 27 29 30b	
Any information copied from such Reports and Statem	l nents may r	not he sold or use					
or for commercial purposes, other than using the nam	e and addr	ess of any politic	al committee	to solicit cont	ributions fro	om such committee.	
NAME OF COMMITTEE (In Full)							
Middle Resolution Federal PAC Inc) .						
Full Name (Last, First, Middle Initial)				Deta of l	Diahura	nt	
A. Anedot					Disburseme	ent	
Mailing Address 10821 Rosebud Ct				10	20	2020	
,	State	Zip Code		FEC Ide	ntification N	lumber	
Baton Rouge Purpose of Disbursement	LA	70815					
Credit Card Processing				C			
Candidate Name			Category/			: SB21B.7495 sbursement this Period	
			Type		, 210		
Office Sought: House Disbursen	nent For: Primary				7	80.30	
	General						
State: District:	Other (spec	,y) ▼		Mem	o Item		
Full Name (Last, First, Middle Initial)				†			
B. i360, LLC				Date of I	Disburseme	ent	
				11 13 2020			
Mailing Address 29734 Network Place					13	2020	
City Chicago	State IL	Zip Code 60673		FEC Idea	ntification N	lumber	
Purpose of Disbursement		00073	C				
IT Services				Transaction ID : SB21B.7494			
Candidate Name			Category/			sbursement this Period	
Office Sought: House Disbursen	nent For		Type			758.18	
	Primary	General			7	4- 14-	
	Other (spec	cify)		Mem	o Item		
State: District:				I I IVIGII	O ILOITI		
Full Name (Last, First, Middle Initial)				Deta of l	Nobure	nt	
C. Lindsey, lan, , ,					Disburseme		
Mailing Address 815 N Almon St				11	10	2020	
City	State	Zip Code		FFC Ide	ntification N	lumber	
Moscow Dispussed of Dispussement	ID	83843		J	Gallon N		
Purpose of Disbursement Travel Expense: Mileage			· · · · ·	C			
Candidate Name		Category/ Type	1		: SB21B.7493 sbursement this Period		
Office Sought: House Disbursen	nent For:		- 7,77	1 [[1771.28	
Senate	Primary	General			7	-9	
	Other (spec	cify) 🔻		Mem	o Item		
State: District:							
SUPTOTAL of Dichurcomente This Bose (antional)						2609.76	
SUBTOTAL of Disbursements This Page (optional)			······		7	45	
TOTAL This Period (last page this line number only).						2609.76	

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 9 OF 38 (check only one)			
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		22 23 26 27 28b 28c x 29 30b		
Any information copied from such Reports and Statem or for commercial purposes, other than using the name					
NAME OF COMMITTEE (In Full) Middle Resolution Federal PAC Inc					
Full Name (Last, First, Middle Initial)					
Moms For America Action Mailing Address 125 Castle Pine Dr		Date of Disbursement 10 23 2020			
Mailing Address 123 Castle Fine Di			10 23 2020		
City Papillion Purpose of Disbursement	State Zip Code NE 68133		FEC Identification Number		
Transfer Candidate Name		October	Transaction ID : SB29.7415		
		Category/ Type	Amount of Each Disbursement this Period		
	nent For: Primary General Other (specify)		2533.23		
State: District:	Circl (Specify)		Memo Item		
Full Name (Last, First, Middle Initial) 3. Our America Mailing Address 715 Sheridan Rd			Date of Disbursement 10 23 2020		
			10 20 2020		
City Wilmette Purpose of Disbursement	State Zip Code IL 60091		FEC Identification Number		
Transfer Candidate Name		Category/ Type	Transaction ID : SB29.7416 Amount of Each Disbursement this Period		
	nent For: Primary General Other (specify)	Турс	4452.93		
State: District:	Other (specify)		Memo Item		
Full Name (Last, First, Middle Initial)			Date of Disbursement		
Mailing Address			M M / D D / 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		
	nent For: Primary General Other (specify)	,,			
State: District:	□		Memo Item		
SUBTOTAL of Disbursements This Page (optional)			6986.16		
TOTAL This Period (last page this line number only)			6986.16		

TEMIZED INDEPENDENT EXPENDITURES				PAGE 10 OF 38
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
Middle Resolution Federal PAC Inc.				FEC IDENTIFICATION NUMBER ▼
Wildale Resolution Federal Free Inc.				C C00512335
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y = Y
Full Name of Payee		☐ Memo	Item Da	ate of Public Distribution/Dissemination
Evans, Alga, , ,				10 16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 4214 Riding Place Rd			Ar	nount
City	State	Zip Code	— Г	160.00
Henrico	VA	23223		ansaction ID : SE.7369 ate of Disbursement or Obligation
Purpose of Expenditure Phone Banking/Canvassing		Category/ Type 004		10 / 16 / 2020
Name of Federal Candidate:		✗ Support	Office Sc	ought: House District:
TRUMP, DONALD J., , ,		Oppose	l —	esident Senate State:
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	7998.71	Disburse 2020	ment For:
Full Name of Payee		Memo	Item Da	ate of Public Distribution/Dissemination
Evans, Alga, , ,				M = M / D = D / Y = Y = Y
Mailing Address				10 16 2020
4214 Riding Place Rd			Ar	nount
City	State	Zip Code	<u> —</u> Г	160.00
Henrico	VA	23223		ransaction ID : SE.7370 ate of Disbursement or Obligation
Purpose of Expenditure Phone Banking/Canvassing		Category/ Type 004		10 16 7 2020 The state of the s
Name of Federal Candidate:		x Support	Office Sc	ought: House District: 00
GADE, DANIEL, M., ,		Oppose	Pre	esident Senate State: VA
Calendar Year-To-Date Per Election for Office Sought		5293.33	Disburse	ment For: Primary X General
Tel Election for Office Sought	7 7			Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	;		· [320.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized	•		•
Bach, Catharyne, L., ,	[Electronically Fil	adl	M = M	/ D D / Y T Y T Y
Signature	пьесновисану Ен	eaj Date	12	01 2020

TEMIZED INDEPENDENT EXPENDITURES			PAGE	11 OF 38
NAME OF COMMITTEE (In Full)				NE 24 OF FORM 3X CATION NUMBER ▼
Middle Resolution Federal PAC Inc.				
			C C00512	2335
Check if 24-hour report 48-hour report	New repo	ort Amends repo	t filed on M M / D D	/ Y = Y = Y
Full Name of Payee		☐ Memo	tem Date of Public Distribu	ution/Dissemination
Evans, Alga, , ,			10 / 16	2020
Mailing Address 4214 Riding Place Rd			Amount	
City	State	Zip Code		160.00
Henrico	VA	23223	Transaction ID : SE.7 Date of Disbursement	
Purpose of Expenditure Phone Banking/Canvassing		Category/ Type 004	10 16	2020
Name of Federal Candidate:		X Support	Office Sought: X House	e District: 07
FREITAS, NICK, J., ,		Oppose	President Sena	te State: VA
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	5753.34	Disbursement For: Pri 2020 Other (specify) ▶	mary X General
Full Name of Payee		☐ Memo	tem Date of Public Distribu	ution/Dissemination
Evans, Alga, , ,			M M / D D	7 Y Y Y Y Y Y Y 2020
Mailing Address 4214 Riding Place Rd			10 00	2020
12 T T Nam g T lass Ta			Amount	
City	State	Zip Code		116.00
Henrico	VA	23223	Transaction ID : SE. Date of Disbursement	
Purpose of Expenditure Phone Banking/Canvassing		Category/ Type 004	10 / 30	2020
Name of Federal Candidate:		✗ Support	Office Sought: House	e District:
TRUMP, DONALD J., , ,		Oppose	X President Sena	te State:
Calendar Year-To-Date		9454.71		mary X General
Per Election for Office Sought	7-1-1-5-	3434.71	2020	
(a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditu			>	276.00
(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				7
(c) TOTAL Independent Expenditures			>	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Bach, Catharyne, L., ,	Electronically Fil	ed1	M M / D D / Y	Y Y Y
Signature		Date	12 01	2020

TEMIZED INDEPENDENT EXPENDITURES				PAGE 12 OF 38
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼
Middle Resolution Federal PAC Inc.				C C00512335
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		Memo	Item Da	te of Public Distribution/Dissemination
Evans, Alga, , ,				10 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 4214 Riding Place Rd	Am	nount		
City	State	Zip Code	— I	116.00
Henrico	VA	23223		ansaction ID : SE.7444 te of Disbursement or Obligation
Purpose of Expenditure Phone Banking/Canvassing		Category/ Type 004		10 30 / 2020
Name of Federal Candidate:		X Support	Office So	ught: House District: 00
GADE, DANIEL, M., ,		Oppose		sident Senate State: VA
Calendar Year-To-Date Per Election for Office Sought	7	6749.33	Disburser 2020	nent For:
Full Name of Payee		☐ Memo	Item Da	te of Public Distribution/Dissemination
Evans, Alga, , ,				10 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 4214 Riding Place Rd			۸۳	
			All	nount
City	State	Zip Code	L	116.00
Henrico	VA	23223	I	ransaction ID : SE.7445 te of Disbursement or Obligation
Purpose of Expenditure Phone Banking/Canvassing		Category/ Type 004		10 30 7 2020
Name of Federal Candidate:		✗ Support	Office So	ught: X House District: 07
FREITAS, NICK, J., ,		Oppose	Pre	sident Senate State: VA
Calendar Year-To-Date Per Election for Office Sought	T	7209.34	Disburser 2020	nent For: Primary
(a) SUBTOTAL of Itemized Independent Expenditures				232.00
(b) SUBTOTAL of Unitemized Independent Expenditure	res		•	
(c) TOTAL Independent Expenditures			• •	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•		·
Bach, Catharyne, L., ,	Electronically Fil	ledl –	M = M	/ D D / Y Y Y Y
Signature		Date	e 12	01 2020

TEMIZED INDEPENDENT EXPENDITURES				PAGE 13 OF 38 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Middle Resolution Federal PAC Inc.				C C00512335
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M " M / D " D / Y " Y " Y " Y
		7 11101140 1000		
Full Name of Payee Heller, Ruth, , ,		☐ Memo	Item Date	of Public Distribution/Dissemination
Mailing Address 5221 Largo Ct			Amo	10 16 2020 unt
Unit 101				
City	State NC	Zip Code 28409	Tran	404.00 saction ID : SE.7362
Willimington	INC	20409		of Disbursement or Obligation
Purpose of Expenditure Phone Banking		Category/ Type 004		10 / 16 / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
Name of Federal Candidate:		✗ Support	Office Soug	ght: House District:
TRUMP, DONALD J., , ,		Oppose	X Presi	dent Senate State:
Calendar Year-To-Date Per Election for Office Sought		7758.71	Disburseme	,
			1_	Other (specify) ▶
Full Name of Payee Heller, Ruth, , ,			Item Date	of Public Distribution/Dissemination
				10 16 2020
Mailing Address 5221 Largo Ct			Amo	unt
Unit 101	Ctata	Zin Code		404.00
City Wilimington	State NC	Zip Code 28409	I	nsaction ID : SE.7363 of Disbursement or Obligation
Purpose of Expenditure Phone Banking		Category/ Type 004		10 / 16 / 2020
Name of Federal Candidate:		✗ Support	Office Sou	ght: House District:00
GADE, DANIEL, M., ,		Oppose	Presi	dent Senate State: VA
Calendar Year-To-Date Per Election for Office Sought		5053.33	Disburseme	, .
,	, , , , , , , , , , , , , , , , , , , ,			Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			· [808.00
(b) SUBTOTAL of Unitemized Independent Expenditure	res		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Bach, Catharyne, L., ,	Electronically File	od1	M = M /	
Signature	ъссы описину I'Ш	Date	9 12	01 2020

TEMIZED INDEPENDENT EXPENDITURES				PAGE 14 OF 38
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼
Middle Resolution Federal PAC Inc.				
				C C00512335
Check if 24-hour report 48-hour report	New repo	ort Amends repo		*M / D *D / Y *Y *Y *Y
Full Name of Payee		☐ Memo	Item Date of	of Public Distribution/Dissemination
Heller, Ruth, , ,			IV.	10 16 / Y Y Y Y Y Y Y
Mailing Address 5221 Largo Ct			Amou	nt
Unit 101				
City	State	Zip Code	ساا	404.00
Wilimington	NC	28409		action ID : SE.7364 of Disbursement or Obligation
Purpose of Expenditure Phone Banking		Category/ Type 004		10 16 / Y Y Y Y Y Y
Name of Federal Candidate:		✗ Support	Office Sough	t: X House District:07
FREITAS, NICK, J., ,		Oppose	Preside	ent Senate State: VA
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	5513.34	Disbursemen 2020 O	t For:
Full Name of Payee		☐ Memo	Item Date of	of Public Distribution/Dissemination
Heller, Ruth, , ,			N	10 30 / Y Y Y Y Y Y Y
Mailing Address 5221 Largo Ct				10 00 2020
Unit 101			Amou	nt
City	State	Zip Code		148.00
Wilimington	NC	28409	I	saction ID : SE.7449 of Disbursement or Obligation
Purpose of Expenditure Phone Banking		Category/ Type 004		10 / 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		x Support	Office Sough	t: House District:
TRUMP, DONALD J., , ,		Oppose	X Preside	ent Senate State:
Calendar Year-To-Date		0046.74	Disbursemen	t For: Primary 🗶 General
Per Election for Office Sought	7 7	9646.71	²⁰²⁰ \square o	ther (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditure				552.00
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Bach, Catharyne, L., ,	Electronically Fil	ed1 -	M = M /	
Signature	I'	Date	12	01 2020

TEMIZED INDEPENDENT EXPENDITURES				PAGE 15 OF 38
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
Middle Resolution Federal PAC Inc.				FEC IDENTIFICATION NUMBER ▼ C. C00512335
				C C00512335
Check if 24-hour report 48-hour report	New repo	ort Amends repo		/ D D / Y H Y H Y H Y
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Heller, Ruth, , ,				10 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 5221 Largo Ct			Amou	int
Unit 101		1	, , , , ,	
City	State	Zip Code	<u> </u>	148.00
Wilimington	NC	28409		saction ID : SE.7450 of Disbursement or Obligation
Purpose of Expenditure Phone Banking		Category/ Type 004		10 30 / Y Y Y Y Y
Name of Federal Candidate:		X Support	Office Sough	ht: House District:00
GADE, DANIEL, M., ,		Oppose	Presid	
Calendar Year-To-Date		6041.23	Disbursemer	nt For: Primary General
Per Election for Office Sought	7-1-7-	6941.33	2020	Other (specify) ►
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Heller, Ruth, , ,				10 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 5221 Largo Ct				
Unit 101			Amou	nt
City	State	Zip Code	ΠL	148.00
Wilimington	NC	28409		saction ID : SE.7451 of Disbursement or Obligation
Purpose of Expenditure Phone Banking		Category/		10 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
- 1.0.0 Za.iii.ig		Type 004		10 00 2020
Name of Federal Candidate:		x Support	Office Sough	
FREITAS, NICK, J., ,		Oppose	Presid	lent Senate State: VA
Calendar Year-To-Date		7401.34	Disbursemer	nt For: Primary General
Per Election for Office Sought	7 7		2020 🗌 c	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	i			296.00
(b) SUBTOTAL of Unitemized Independent Expenditure	res			
(c) TOTAL Independent Expenditures			•	7
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•		•
Bach, Catharyne, L., ,	[Electronically File	ledl D.	M = M /	01 2020
Signature		Date	e 12	01 2020

TEMIZED INDEPENDENT EXPENDITURES				PAGE 16 OF 38
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
Middle Resolution Federal PAC Inc.				FEC IDENTIFICATION NUMBER ▼ C C00512335
				G 00012333
Check if 24-hour report 48-hour report	New repo	ort Amends repo		M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination
Hill, Jeremy, , ,				10 16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 540 Lombard St			Amo	punt
City	State	Zip Code	— г	80.00
Green River	WY	82935		nsaction ID : SE.7366
Purpose of Expenditure Phone Banking		Category/ Type 004		e of Disbursement or Obligation 10 16 2020
Name of Federal Candidate:		✗ Support	Office Sou	ght: House District:
TRUMP, DONALD J., , ,		Oppose	X Presi	
Calendar Year-To-Date			Disburseme	ent For: Primary X General
Per Election for Office Sought	7	7838.71	2020	Other (specify) ▶
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination
Hill, Jeremy, , ,				10 16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 540 Lombard St			A	
			Amo	
City	State	Zip Code	L	80.00
Green River	WY	82935		nsaction ID : SE.7367 e of Disbursement or Obligation
Purpose of Expenditure Phone Banking		Category/ Type 004		10 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		✗ Support	Office Sou	ght: House District: 00
GADE, DANIEL, M., ,		Oppose	Pres	ident Senate State: VA
Calendar Year-To-Date		5133.33	Disbursem	ent For: Primary (X) General
Per Election for Office Sought	7 7	0.00.00	2020	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	;		· [160.00
(b) SUBTOTAL of Unitemized Independent Expenditure	res		· -	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Bach, Catharyne, L., ,	[Electronically Fil	led1 _	M M M	/ D D / Y Y Y Y Y
Signature		Date	e 12	01 2020

TEMIZED INDEPENDENT EXPENDITURES				PAGE 17 OF 38
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
Middle Resolution Federal PAC Inc.				FEC IDENTIFICATION NUMBER ▼ C C00512335
				C 000312333
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination
Hill, Jeremy, , ,				10 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 540 Lombard St			Amo	ount
City	State	Zip Code	— г	80.00
Green River	WY	82935		nsaction ID : SE.7368
Purpose of Expenditure Phone Banking		Category/		e of Disbursement or Obligation
There barring		Type 004		10 16 2020
Name of Federal Candidate:		x Support	Office Sou	ght: K House District: 07
FREITAS, NICK, J., ,		Oppose	Pres	ident Senate State: VA
Calendar Year-To-Date Per Election for Office Sought		5593.34	Disbursem 2020	
Full Name of Payee	,	Memo	Itom Date	Other (specify) ▶e of Public Distribution/Dissemination
Hill, Jeremy, , ,		□ Iviemo	item Date	M M / D D / Y Y Y Y
Mailing Address				11 01 2020
540 Lombard St			Amo	ount
City	State	Zip Code		24.00
Green River	WY	82935		insaction ID : SE.7490 e of Disbursement or Obligation
Purpose of Expenditure Phone Banking		Category/ Type 004		M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
N (5) 10 E1		Туре		
Name of Federal Candidate:		✗ Support	Office Sou	
TRUMP, DONALD J., , ,		Oppose		ident Senate State:
Calendar Year-To-Date Per Election for Office Sought		9794.71	Disbursem 2020	
	1			Other (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures			. \Box	104.00
(a) SOBTOTAL OF REMIZED INDEPENDENT EXPENDITURES			•	104.00
(b) SUBTOTAL of Unitemized Independent Expenditure	res		· • [
(c) TOTAL Independent Expenditures			. 🗀	
(c) TOTAL independent Expenditures			• _	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Bach, Catharyne, L., ,	[Electronically Fil	led1 –	M M M	/ D D / Y Y Y Y
Signature		Date	e 12	01 2020

TEMIZED INDEPENDENT EXPENDITURES				PAGE 18 OF 38
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
Middle Resolution Federal PAC Inc.				FEC IDENTIFICATION NUMBER ▼ C C00512335
				0 000012000
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Da	te of Public Distribution/Dissemination
Hill, Jeremy, , ,				11 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 540 Lombard St			Am	nount
City	State	Zip Code	—г	24.00
Green River	WY	82935		ansaction ID : SE.7491
Purpose of Expenditure Phone Banking		Category/ Type 004		te of Disbursement or Obligation 11 02 2020
Name of Federal Candidate:				ught: Diavas Diatrict: 00
GADE, DANIEL, M., ,		Support Oppose	Office Sou	ught: House District: UVA sident Senate State: VA
Colordon Von To Data			Disbursen	siderit A Seriate State.
Calendar Year-To-Date Per Election for Office Sought		7756.00	2020	Other (specify)
Full Name of Payee		☐ Memo	Item Da	te of Public Distribution/Dissemination
Hill, Jeremy, , ,				11 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 540 Lombard St				
			Am	nount
City	State	Zip Code		24.00
Green River	WY	82935		ransaction ID : SE.7492 te of Disbursement or Obligation
Purpose of Expenditure Phone Banking		Category/ Type 004		11 02 / Y Y Y Y Y
Name of Federal Candidate:		✗ Support	Office Soi	ught: X House District: 07
FREITAS, NICK, J., ,		Oppose	Pre	sident Senate State: VA
Calendar Year-To-Date		7882.67	Disbursen	nent For: Primary Seneral
Per Election for Office Sought	7 7	7882.67	2020	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	i		· • _	48.00
(b) SUBTOTAL of Unitemized Independent Expenditure	ree			
(b) GOBTOTAL OF OTHER MIZE OF THE PROPERTY EXPENDICAL	103			,
(c) TOTAL Independent Expenditures			• •	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Bach, Catharyne, L., ,	[Electronically Fil	led1 -	M = M	/ D D / Y Y Y Y
Signature		Date	e 12	01 2020

TEMIZED INDEPENDENT EXPENDITURES				PAGE 19 OF 38
NAME OF COMMITTEE (In Full)			-	FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼
Middle Resolution Federal PAC Inc.				
				C C00512335
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M / D = D / Y = Y = Y = Y
Full Name of Payee		☐ Memo	Item Date of	Public Distribution/Dissemination
i360, LLC			1	0 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 29734 Network Place			Amount	
City	State	Zip Code	-	380.00
Chicago	IL	60673		ction ID : SE.7417 Disbursement or Obligation
Purpose of Expenditure Text Program		Category/ Type 004	М	1 13 / 2020
Name of Federal Candidate:		X Support	Office Sought:	House District:
TRUMP, DONALD J., , ,		Oppose	✗ Presiden	senate State:
Calendar Year-To-Date Per Election for Office Sought	7	10174.71	Disbursement 2020 Oth	For: Primary General For (specify) General
Full Name of Payee		☐ Memo	Item Date of	Public Distribution/Dissemination
i360, LLC				0 26 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 29734 Network Place			Amount	
			Amount	
City	State	Zip Code	Tuenas	460.00
Chicago	IL	60673	I	ction ID : SE.7418 Disbursement or Obligation
Purpose of Expenditure Text Program		Category/ Type 004		1 13 / Y Y Y Y Y
Name of Federal Candidate:		✗ Support	Office Sought:	House District:
TRUMP, DONALD J., , ,		Oppose	X Presiden	t Senate State:
Calendar Year-To-Date		10024.71	Disbursement	For: Primary General
Per Election for Office Sought	7	10634.71	2020 Oth	er (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	·		· []	, 840.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		-	7
(c) TOTAL Independent Expenditures			· .	7
Under penalty of perjury I certify that the independed with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized			
Bach, Catharyne, L., ,	[Electronically Fil	ed1		D D / Y Y Y Y
Signature	- Беснониану Г и	Date	12	01 2020

TEMIZED INDEPENDENT EXPENDITURES				PAGE 20 OF 38
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼
Middle Resolution Federal PAC Inc.				
				C C00512335
Check if 24-hour report 48-hour report	New repo	ort Amends repo		=M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
i360, LLC				10 27 2020
Mailing Address 29734 Network Place			Amou	int
City	State	Zip Code	$ \Gamma$	1160.00
Chicago	IL	60673		saction ID : SE.7419 of Disbursement or Obligation
Purpose of Expenditure Text Program		Category/ Type 004		11 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		✗ Support	Office Sough	ht: House District:
TRUMP, DONALD J., , ,		Oppose	X Presid	ent Senate State:
Calendar Year-To-Date Per Election for Office Sought	7 1 7	11794.71	Disbursemer 2020	nt For:
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
i360, LLC			Г	10 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 29734 Network Place			Amou	int
			Amou	
City	State	Zip Code	<u> </u>	380.00
Chicago	IL	60673		saction ID : SE.7420 of Disbursement or Obligation
Purpose of Expenditure Text Program		Category/ Type 004		11 13 2020
Name of Federal Candidate:		✗ Support	Office Sough	ht: House District:00
GADE, DANIEL, M., ,		Oppose	Presid	ent Senate State: VA
Calendar Year-To-Date		8136.00	Disbursemer	nt For: Primary 🗶 General
Per Election for Office Sought	T-1-T-		2020	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	s		· [1540.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•	
(c) TOTAL Independent Expenditures			•	7 1 7 1 7
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidaparty committee) any political party committee or its	ate or authorized			
Bach, Catharyne, L., ,	[Electronically Fil	ed1	M = M /	D D / Y Y Y Y
Signature	_г длеси описшиу Г Ш	Date	12	01 2020

TEMIZED INDEPENDENT EXPENDITURES				PAGE 21 OF 38 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Middle Resolution Federal PAC Inc.				C C00512335
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		Memo	Item Da	ate of Public Distribution/Dissemination
i360, LLC				M M / D D / Y Y Y Y
Mailing Address 29734 Network Place			Ar	10 26 2020 mount
City	State	Zip Code	— I	460.00
Chicago	IL	60673	Ti	ransaction ID : SE.7421
Purpose of Expenditure Text Program		Category/ Type 004		ate of Disbursement or Obligation M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
N (5 1 10 51)				
Name of Federal Candidate:		x Support	Office So	•
GADE, DANIEL, M., ,		Oppose	Pre	esident X Senate State: VA
Calendar Year-To-Date Per Election for Office Sought	7	8596.00	Disburse 2020	ment For: Primary
Full Name of Payee		☐ Memo	Item Da	ate of Public Distribution/Dissemination
i360, LLC				10 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 29734 Network Place				10 27 2020
23704 NetWork Flace			Ar	mount
City	State	Zip Code		1160.00
Chicago	IL	60673		ransaction ID : SE.7422 ate of Disbursement or Obligation
Purpose of Expenditure Text Program		Category/ Type 004		11 / D D / Y Y Y Y Y Y 2020
Name of Federal Candidate:		✗ Support	Office So	ought: House District: 00
GADE, DANIEL, M., ,		Oppose	Pre	esident X Senate State: VA
Calendar Year-To-Date			Disburse	ment For: Primary X General
Per Election for Office Sought	7	9756.00	2020	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			[1620.00
			_	
(b) SUBTOTAL of Unitemized Independent Expenditure	res		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Bach, Catharyne, L., ,	Electronically Fil	adl	M = M	/ D D / Y Y Y Y Y
Signature	ъесношсану Ен	eaj Date	e 12	01 2020

TEMIZED INDEPENDENT EXPENDITURES				PAGE 22 OF 38
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼
Middle Resolution Federal PAC Inc.				C C00512335
				0 0001200
Check if 24-hour report 48-hour report	New repo	ort Amends repo		M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination
i360, LLC				10 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 29734 Network Place			Amo	punt
Cib.	Ctoto	Zin Codo		100.00
City	State	Zip Code 60673	Trai	190.00 nsaction ID : SE.7423
Chicago	IL .	00073		e of Disbursement or Obligation
Purpose of Expenditure Text Program		Category/ Type 004	4	11 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		X Support	Office Sou	ght: X House District:07
FREITAS, NICK, J., ,		Oppose	Pres	ident Senate State: VA
Calendar Year-To-Date		0070.07	Disbursem	ent For: Primary X General
Per Election for Office Sought	7 7	8072.67	2020	Other (specify) ▶
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination
i360, LLC				10 26 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 29734 Network Place				· · · · · · · · · · · · · · · · · · ·
			Amo	punt
City	State	Zip Code		230.00
Chicago	IL	60673		nsaction ID : SE.7424 e of Disbursement or Obligation
Purpose of Expenditure Text Program		Category/		M M / D D / Y Y Y
Text Flogram		Type 004		11 13 2020
Name of Federal Candidate:		x Support	Office Sou	ght: X House District:07
FREITAS, NICK, J., ,		Oppose	Pres	ident Senate State: VA
Calendar Year-To-Date		8302.67	Disbursem	ent For: Primary 🗶 General
Per Election for Office Sought	7 7	0002.07	2020	Other (specify) ▶
			_	
(a) SUBTOTAL of Itemized Independent Expenditures	;		· • _	420.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		· • L	
(c) TOTAL Independent Expenditures				
(-,				
Under penalty of perjury I certify that the independed with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized			
	•			
Bach, Catharyne, L., ,	[Electronically Fil	led] Date	e 12	01 2020
Signature	-	_ · Date	12	2020

TEMIZED INDEPENDENT EXPENDITURES				PAGE 23 OF 38
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼
Middle Resolution Federal PAC Inc.				C C00512335
				G 00012333
Check if 24-hour report 48-hour report	New repo	ort Amends repo		M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination
i360, LLC				10 27 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 29734 Network Place			Amo	ount
		1		
City	State	Zip Code 60673	Tron	580.00 nsaction ID : SE.7425
Chicago	IL IL	00073		e of Disbursement or Obligation
Purpose of Expenditure Text Program		Category/ Type 004	1	11 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		X Support	Office Sou	ght: X House District:07
FREITAS, NICK, J., ,		Oppose	Presi	ident Senate State: VA
Calendar Year-To-Date		9992 67	Disburseme	ent For: Primary X General
Per Election for Office Sought	7-1-1-7-	8882.67	2020	Other (specify)
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination
i360, LLC				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 29734 Network Place			A 200	
			Amo	ont.
City	State	Zip Code		190.00
Chicago	IL	60673		nsaction ID : SE.7426 e of Disbursement or Obligation
Purpose of Expenditure Text Program		Category/ Type 004		11 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		✗ Support	Office Sou	ght: X House District: 05
GOOD, ROBERT, , ,		Oppose	Presi	ident Senate State: VA
Calendar Year-To-Date		1856.67	Disburseme	ent For: Primary Seneral
Per Election for Office Sought	7 7	1656.07	2020	Other (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures	·			770.00
(b) SUBTOTAL of Unitemized Independent Expenditure	res		· • L	
(c) TOTAL Independent Expenditures			• [
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Bach, Catharyne, L., ,	[Electronically File	led1	M = M	/ D D / Y Y Y Y Y
Signature	Lietironically Fu	Date	e 12	01 2020

TEMIZED INDEPENDENT EXPENDITURES				PAGE 24 OF 38 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Middle Resolution Federal PAC Inc.				C C00512335
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		Memo	Item Da	ate of Public Distribution/Dissemination
i360, LLC				M M / D D / Y Y Y Y Y
Mailing Address 29734 Network Place			Ar	10 26 2020 mount
City	State	Zip Code	— Г	230.00
Chicago	IL	60673	I	ransaction ID : SE.7427
Purpose of Expenditure Text Program		Category/ Type 004		ate of Disbursement or Obligation 11 13 2020
Name of Federal Candidate:		Cupport	Office Co	Nught: V House District: 05
GOOD, ROBERT, , ,		Support Oppose	Office So	bught: House District: US esident Senate State: VA
Oalandar Vara Ta Data				ment For: Primary X General
Calendar Year-To-Date Per Election for Office Sought	, , ,	2086.67	2020	Other (specify)
Full Name of Payee		☐ Memo	Item Da	ate of Public Distribution/Dissemination
i360, LLC				10 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 29734 Network Place			Ar	mount
City	State	Zip Code	— Г	580.00
Chicago	IL	60673		ransaction ID : SE.7428 ate of Disbursement or Obligation
Purpose of Expenditure Text Program		Category/ Type 004		11 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		✗ Support	Office Sc	ought: X House District: 05
GOOD, ROBERT, , ,		Oppose	Pre	esident Senate State: VA
Calendar Year-To-Date Per Election for Office Sought		2666.67	Disburse	ment For: Primary 🗶 General
To Election to Conse	7			Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				810.00
(b) SUBTOTAL of Unitemized Independent Expenditure	res			
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Bach, Catharyne, L., ,	Flactronically F21	adl	M = M	/ D D / Y Y Y Y Y
Signature	Electronically File	eaj Date	12	01 2020

TEMIZED INDEPENDENT EXPENDITURES				PAGE 25 OF 38
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼
Middle Resolution Federal PAC Inc.				
				C C00512335
Check if 24-hour report 48-hour report	New repo	ort Amends repo		M = M / D = D / Y = Y = Y = Y
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Lindsey, Fiona, , ,			[10 16 2020
Mailing Address 815 N Almon St			Amou	unt
City	State	Zip Code	$-\Gamma$	460.00
Moscow	ID	83843		saction ID : SE.7375 of Disbursement or Obligation
Purpose of Expenditure Canvassing		Category/ Type 004	— I I	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		X Support	Office Soug	ht: House District:
TRUMP, DONALD J., , ,		Oppose	X Presid	lent Senate State:
Calendar Year-To-Date Per Election for Office Sought	7	8698.71	Disburseme 2020	nt For: Primary
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Lindsey, Fiona, , ,			l r	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 815 N Almon St				10 16 2020
OTS WAIIION SC			Amou	unt
City	State	Zip Code	- П.	460.00
Moscow	ID	83843	Tran	saction ID : SE.7376 of Disbursement or Obligation
Purpose of Expenditure Canvassing		Category/ Type 004		10 16 7 2020
Name of Federal Candidate:		x Support	Office Soug	ht: House District: 00
GADE, DANIEL, M., ,		Oppose	Presid	dent Senate State: VA
Calendar Year-To-Date Per Election for Office Sought		5993.33	Disburseme 2020	
Ter Election for Office Sought	7 7			Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	i		· [920.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•	7 7 7
(c) TOTAL Independent Expenditures			· -	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized			
Bach, Catharyne, L., ,	Electronically Fil	ed1	M = M /	D D / Y Y Y Y
Signature	Laces omeany 1'll	Date	e 12	01 2020

TEMIZED INDEPENDENT EXPENDITURES				PAGE 26 OF 38
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼
Middle Resolution Federal PAC Inc.				
				C C00512335
Check if 24-hour report 48-hour report	New repo	ort Amends repo		*M / D *D / Y *Y *Y *Y
Full Name of Payee		☐ Memo	Item Date of	of Public Distribution/Dissemination
Lindsey, Fiona, , ,				10 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 815 N Almon St			Amou	nt
City	State	Zip Code	─ [:	460.00
Moscow	ID	83843		action ID : SE.7377 If Disbursement or Obligation
Purpose of Expenditure Canvassing		Category/ Type 004	- N	10 16 7 2020
Name of Federal Candidate:		✗ Support	Office Sough	t: Nouse District: 07
FREITAS, NICK, J., ,		Oppose	Preside	ent Senate State: VA
Calendar Year-To-Date Per Election for Office Sought	7	6453.34	Disbursemen 2020 O	t For:
Full Name of Payee		☐ Memo	Item Date of	of Public Distribution/Dissemination
Lindsey, Fiona, , ,			M	10 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 815 N Almon St				10 00 2020
			Amour	nt
City	State	Zip Code		40.00
Moscow	ID	83843	I	saction ID : SE.7455 of Disbursement or Obligation
Purpose of Expenditure Canvassing		Category/ Type 004		10 / 30 / Y Y Y Y Y Y Y
Name of Federal Candidate:		x Support	Office Sough	t: House District:
TRUMP, DONALD J., , ,		Oppose	X Preside	ent Senate State:
Calendar Year-To-Date		9766.71	Disbursemen	t For: Primary 🗶 General
Per Election for Office Sought	7-1-1-7-	3700.71	²⁰²⁰ o	ther (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditu				500.00
(S) SSETSTAL OF STREETINGS INDEPENDENT EXPONDING				
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Bach, Catharyne, L., ,	Electronically Fil	ed1	M = M /	
Signature	дыснопиши РШ	Date	12	01 2020

FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ Middle Resolution Federal PAC Inc. C00512335 Check if 24-hour report 48-hour report Amends report filed on New report Date of Public Distribution/Dissemination Full Name of Payee Lindsey, Fiona, , , 30 2020 Mailing Address 815 N Almon St Amount State Zip Code 40.00 City ID 83843 Transaction ID: SE.7456 Moscow Date of Disbursement or Obligation Purpose of Expenditure Category/ Canvassing 004 10 30 2020 Type Name of Federal Candidate: 00 **X** Support Office Sought: House District: GADE, DANIEL, M.,, VA Oppose President **x** Senate State: Disbursement For: Primary **X** General Calendar Year-To-Date 7061.33 2020 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Memo Item Lindsey, Fiona, , , 2020 30 10 Mailing Address 815 N Almon St Amount 40.00 City State Zip Code Transaction ID: SE.7457 Moscow ID 83843 Date of Disbursement or Obligation Purpose of Expenditure Category/ Canvassing 004 30 2020 10 Type Name of Federal Candidate: 07 x Support Office Sought: **X** House District: FREITAS, NICK, J.,, VA Oppose President Senate State: **X** General Disbursement For: Primary Calendar Year-To-Date 7521.34 2020 Per Election for Office Sought Other (specify) ▶ 80.00 (a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Bach, Catharyne, L.,, [Electronically Filed] 01 2020 Date Signature

PAGE

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OF

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TEMIZED INDEPENDENT EXPENDITURES				PAGE 28 OF 38 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Middle Resolution Federal PAC Inc.				
				C C00512335
Check if 24-hour report 48-hour report	New repo	ort Amends repo		=M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Lindsey, Ian, , ,			[10 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 815 N Almon St			Amou	int
City	State	Zip Code	— F.	460.00
Moscow	ID	83843		saction ID : SE.7379 of Disbursement or Obligation
Purpose of Expenditure Canvassing		Category/ Type 004		10 16 / Y Y Y Y Y
Name of Federal Candidate:		✗ Support	Office Sough	ht: House District:
TRUMP, DONALD J., , ,		Oppose	✗ Presid	ent Senate State:
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	9158.71	Disbursemei 2020	nt For:
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Lindsey, lan, , ,				10 16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 815 N Almon St				10 10 2020
o to trainion of			Amou	int
City	State	Zip Code	— I I :	460.00
Moscow	ID	83843	Tran	saction ID : SE.7380 of Disbursement or Obligation
Purpose of Expenditure Canvassing		Category/ Type 004		10 16 7 2020
Name of Federal Candidate:		x Support	Office Sough	ht: House District:00
GADE, DANIEL, M., ,		Oppose	Presid	ent Senate State: VA
Calendar Year-To-Date Per Election for Office Sought		6453.33	Disbursemer	nt For: Primary General
Tel Election for Office Sought	7 7			Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	·			920.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•	7
(c) TOTAL Independent Expenditures			•	7 1 7 1 7
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidaparty committee) any political party committee or its	ate or authorized			
Bach, Catharyne, L., ,	Electronically Fil	edl -	M = M /	D D / Y Y Y Y
Signature		Date	12	01 2020

TEMIZED INDEPENDENT EXPENDITURES				PAGE 29 OF 38
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
Middle Resolution Federal PAC Inc.				FEC IDENTIFICATION NUMBER ▼ C C00512335
				O coorda
Check if 24-hour report 48-hour report	New repo	ort Amends repo		M / D D / Y Y Y
Full Name of Payee		☐ Memo	Item Date of	of Public Distribution/Dissemination
Lindsey, lan, , ,			N	10 16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 815 N Almon St			Amou	nt
City	State	Zip Code	— r	460.00
Moscow	ID	83843		action ID : SE.7381
Purpose of Expenditure Canvassing		Category/ Type 004	N	of Disbursement or Obligation 10 16 2020
Name of Federal Candidate:		✗ Support	Office Sough	nt: X House District: 07
FREITAS, NICK, J., ,		Oppose	Preside	
Calendar Year-To-Date			Disbursemen	
Per Election for Office Sought	7 7	6913.34	²⁰²⁰	ther (specify) ▶
Full Name of Payee		☐ Memo	Item Date of	of Public Distribution/Dissemination
Lindsey, Ian, , ,			N	10 30 / Y Y Y Y Y Y Y Y
Mailing Address 815 N Almon St			Amou	ot
			Allioui	
City Moscow	State	Zip Code	Trans	4.00 saction ID : SE.7459
Purpose of Expenditure	ID	83843		of Disbursement or Obligation
Canvassing		Category/ Type 004		10 30 7 2020
Name of Federal Candidate:		✗ Support	Office Sough	it: House District:
TRUMP, DONALD J., , ,		Oppose	X Preside	ent Senate State:
Calendar Year-To-Date		9770.71	Disbursemen	t For: Primary General
Per Election for Office Sought	7 1 7		O	ther (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	j			464.00
(b) SUBTOTAL of Unitemized Independent Expenditure	res		· .	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Bach, Catharyne, L., ,	[Electronically File	ledl D	M = M /	01 / 7 7 7 7
Signature		Date	9 12	01 2020

TEMIZED INDEPENDENT EXPENDITURES				PAGE 30 OF 38
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼
Middle Resolution Federal PAC Inc.				
				C C00512335
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y = Y
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Lindsey, Ian, , ,			[10 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 815 N Almon St			Amo	unt
City	State	Zip Code	-	4.00
Moscow	ID	83843		saction ID : SE.7460 of Disbursement or Obligation
Purpose of Expenditure Canvassing		Category/ Type 004		M 10 / 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		X Support	Office Soug	ht: House District: 00
GADE, DANIEL, M., ,		Oppose	Presid	dent Senate State: VA
Calendar Year-To-Date Per Election for Office Sought	7	7065.33	Disburseme	ont For: Primary General Other (specify)
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Lindsey, lan, , ,			1	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 815 N Almon St				10 00 2020
			Amoi	unt
City	State	Zip Code		4.00
Moscow	ID	83843		nsaction ID : SE.7461 of Disbursement or Obligation
Purpose of Expenditure Canvassing		Category/ Type 004		10 / 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		x Support	Office Soug	ht: K House District: 07
FREITAS, NICK, J., ,		Oppose	Presid	dent Senate State: VA
Calendar Year-To-Date		7525.34	Disburseme	ent For: Primary General
Per Election for Office Sought	7 7		2020	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	·		. [8.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		· •	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidar party committee) any political party committee or its	ate or authorized			
Bach, Catharyne, L., ,	Electronically Fil	ed1	M = M /	
Signature	Гистопишиу Ги	Date	e 12	01 2020

TEMIZED INDEPENDENT EXPENDITURES				PAGE 31 OF 38
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
Middle Resolution Federal PAC Inc.				FEC IDENTIFICATION NUMBER ▼ C C00512335
				C 000312303
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Dat	te of Public Distribution/Dissemination
Pegram, David, , ,				10 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 6101 Glenway Ct			Am	ount
City	Ctoto	Zin Codo	— г	240.00
City Richmond	State	Zip Code 23225	Tra	ansaction ID : SE.7372
Purpose of Expenditure		20220		te of Disbursement or Obligation
Phone Banking		Category/ Type 004	4	10 16 / 2020
Name of Federal Candidate:		X Support	Office So	ught: House District:
TRUMP, DONALD J., , ,		Oppose	X Pres	sident Senate State:
Calendar Year-To-Date Per Election for Office Sought	7	8238.71	Disbursen 2020	nent For: Primary X General Other (specify) ▶
Full Name of Payee		Memo	Item Dat	te of Public Distribution/Dissemination
Pegram, David, , ,		_ Wellie	itom = s	M M / D D / Y Y Y Y
Mailing Address				10 16 2020
6101 Glenway Ct			Am	ount
City	State	Zip Code	$-\Gamma$	240.00
Richmond	VA	23225		ansaction ID : SE.7373 te of Disbursement or Obligation
Purpose of Expenditure Phone Banking		Category/		M M / D D / Y Y Y Y
Filone banking		Type 004		10 16 2020
Name of Federal Candidate:		✗ Support	Office So	ught: House District: 00
GADE, DANIEL, M., ,		Oppose	Pres	sident Senate State: VA
Calendar Year-To-Date		5533.33	Disbursen	nent For: Primary Seneral
Per Election for Office Sought	7 7	555.55	2020	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	i		. •	480.00
(b) SUBTOTAL of Unitemized Independent Expenditure	ros		, [
(b) 000101AE of officernized independent Experiation	100			
(c) TOTAL Independent Expenditures			• •	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Bach, Catharyne, L., ,	[Electronically Fil	led1 –	M = M	/ D D / Y Y Y Y
Signature	Electronically 1 ii	Date	e 12	01 2020

TEMIZED INDEPENDENT EXPENDITURES				PAGE 32 OF 38
NAME OF COMMITTEE (In Full)			-	FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼
Middle Resolution Federal PAC Inc.				
				C C00512335
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Date of	Public Distribution/Dissemination
Pegram, David, , ,				0 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 6101 Glenway Ct			Amount	
City	State	Zip Code		240.00
Richmond	VA	23225		ction ID : SE.7374 Disbursement or Obligation
Purpose of Expenditure Phone Banking		Category/ Type 004	М	0 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		X Support	Office Sought:	₩ House District:07
FREITAS, NICK, J., ,		Oppose	Presiden	Senate State: VA
Calendar Year-To-Date Per Election for Office Sought	<u>, , , , , , , , , , , , , , , , , , , </u>	5993.34	Disbursement 2020 Oth	For: Primary General er (specify) ►
Full Name of Payee		☐ Memo	Item Date of	Public Distribution/Dissemination
Pegram, David, , ,				0 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 6101 Glenway Ct			Amount	
			/ tillodin	
City Richmond	State	Zip Code 23225		80.00 Iction ID : SE.7452
Purpose of Expenditure				Disbursement or Obligation
Phone Banking		Category/ Type 004		M / 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		x Support	Office Sought:	House District:
TRUMP, DONALD J., , ,		Oppose	X Presiden	nt Senate State:
Calendar Year-To-Date		9726.71	Disbursement	For: Primary X General
Per Election for Office Sought	7 7	9720.71	2020 Oth	ner (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditu				320.00
(-,				7
(c) TOTAL Independent Expenditures			·	7
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Bach, Catharyne, L., ,	(Electronically Fil	adl		D D / Y Y Y Y Y
Signature	ъссновисану Е и	<i>eaj</i> Date	12	01 2020

TEMIZED INDEPENDENT EXPENDITURES				PAGE 33 OF 38 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Middle Resolution Federal PAC Inc.				C C00512335
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination
Pegram, David, , ,				10 30 / Y Y Y Y Y Y
Mailing Address 6101 Glenway Ct			Amo	ount
City	State	Zip Code	-	80.00
Richmond	VA	23225		nsaction ID : SE.7453
Purpose of Expenditure Phone Banking		Category/ Type 004		10 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		X Support	Office Sou	ght: House District: 00
GADE, DANIEL, M., ,		Oppose	Pres	ident Senate State: VA
Calendar Year-To-Date Per Election for Office Sought		7021.33	Disburseme	
,				Other (specify)
Full Name of Payee Pegram, David, , ,		∐ Memo	Item Date	e of Public Distribution/Dissemination
Mailing Address				10 30 2020
6101 Glenway Ct			Amo	punt
City	State	Zip Code		80.00
Richmond	VA	23225		nsaction ID : SE.7454 e of Disbursement or Obligation
Purpose of Expenditure Phone Banking		Category/ Type 004		10 30 / Y 2020
Name of Federal Candidate:		x Support	Office Sou	ght: 🗶 House District:07
FREITAS, NICK, J., ,		Oppose	Pres	ident Senate State: VA
Calendar Year-To-Date Per Election for Office Sought	7 L L 7	7481.34	Disburseme	ent For: Primary X General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			→ [160.00
(b) SUBTOTAL of Unitemized Independent Expenditure	es		· • [
(c) TOTAL Independent Expenditures			•	7
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Bach, Catharyne, L., ,	Electronically Fil	ed1 -	M = M	/ D D / Y Y Y Y
Signature		Date	12	01 2020

TEMIZED INDEPENDENT EXPENDITURES				PAGE 34 OF 38 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Middle Resolution Federal PAC Inc.				C C00512335
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
E-II Manager of Brown			u Doto	of Public Distribution/Dissemination
Full Name of Payee Ross, Britton, , ,		Memo	Item Date	10 30 2020
Mailing Address 805 W Cary St			Amo	
Unit 224	04-4-	7:- 01-		000.07
City Richmond	State VA	Zip Code 23220	Tran	666.67 saction ID : SE.7462
Purpose of Expenditure GOTV Consulting		Category/ Type 004		of Disbursement or Obligation M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		✗ Support	Office Soud	ht: House District:
TRUMP, DONALD J., , ,		Oppose	resid	, <u> </u>
Calendar Year-To-Date Per Election for Office Sought		9770.71	Disburseme	,
,	7			Other (specify)
Full Name of Payee Ross, Britton, , ,		Memo	Item Date	of Public Distribution/Dissemination
Mailing Address			<u> </u>	10 30 2020
805 W Cary St Unit 224			Amo	unt
City	State	Zip Code		666.67
Richmond	VA	23220		nsaction ID : SE.7464 of Disbursement or Obligation
Purpose of Expenditure GOTV Consulting		Category/ Type 004		M M M / 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		✗ Support	Office Soug	ht: House District: 00
GADE, DANIEL, M., ,		Oppose	Presid	dent Senate State: VA
Calendar Year-To-Date Per Election for Office Sought	<u> </u>	7732.00	Disburseme	ent For:
(a) SUBTOTAL of Itemized Independent Expenditures			· • [1333.34
(I) OUDTOTAL of Heits spined by deeperd at 5 many line				
(b) SUBTOTAL of Unitemized Independent Expenditure	res		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Bach, Catharyne, L., ,	Electronically File	ed1 -	M M /	D D / Y Y Y Y Y
Signature	I mounty I m	Date	12	01 2020

TEMIZED INDEPENDENT EXPENDITURES				PAGE 35 OF 38 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Middle Resolution Federal PAC Inc.				C C00512335
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	/ I M / D I D / Y I Y I Y I Y
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Ross, Britton, , ,		□ Memo	Item Bato	10 30 2020
Mailing Address 805 W Cary St			Amou	
Unit 224	04-4-	7:- 0-1-		222.22
City Richmond	State VA	Zip Code 23220		333.33 saction ID : SE.7465
Purpose of Expenditure GOTV Consulting		Category/ Type 004		of Disbursement or Obligation
Name of Federal Candidate:		✗ Support	Office Soug	ht: K House District: 07
FREITAS, NICK, J., ,		Oppose	Presid	
Calendar Year-To-Date Per Election for Office Sought	7-1-4	7858.67	Disburseme	nt For:
Full Name of Payee	,	□ Mama		of Public Distribution/Dissemination
Ross, Britton, , ,		∐ Memo	itom	10 30 2020
Mailing Address 805 W Cary St			Amai	
Unit 224			Amou	ant
City Richmond	State VA	Zip Code 23220		333.33 saction ID : SE.7466
Purpose of Expenditure GOTV Consulting	1	Category/ Type 004		of Disbursement or Obligation M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		✗ Support	Office Soug	ht: X House District: 05
GOOD, ROBERT, , ,		Oppose	Presid	dent Senate State: VA
Calendar Year-To-Date Per Election for Office Sought	7 7	1666.67	Disburseme	nt For: Primary
() () () () () () () () () () () () () (200.00
(a) SUBTOTAL of Itemized Independent Expenditures			•	666.66
(b) SUBTOTAL of Unitemized Independent Expenditure	res		· •	
(c) TOTAL Independent Expenditures			· [
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Bach, Catharyne, L., ,	Electronically File	ed]	M = M /	01 2020
Signature	· · · · · · · · · · · · · · · · · · ·	Date	12	2020

TEMIZED INDEPENDENT EXPENDITURES				PAGE 36 OF 38 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Middle Resolution Federal PAC Inc.				
				C C00512335
Check if 24-hour report 48-hour report	New repo	ort Amends repo		1 = M / D = D / Y = Y = Y = Y
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Walls, Benjamin, , ,			[10 16 2020
Mailing Address 1909 Colgate Ave			Amou	ınt
City	State	Zip Code	— I [180.00
Richmond	VA	23226		saction ID : SE.7382 of Disbursement or Obligation
Purpose of Expenditure Canvassing		Category/ Type 004	— I г	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		✗ Support	Office Soug	ht: House District:
TRUMP, DONALD J., , ,		Oppose	x Presid	dent Senate State:
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	9338.71	Disburseme 2020	nt For:
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Walls, Benjamin, , ,			_ I _ r	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1909 Colgate Ave				
			Amou	unt
City	State	Zip Code		180.00
Richmond	VA	23226	I	saction ID : SE.7384 of Disbursement or Obligation
Purpose of Expenditure Canvassing		Category/ Type 004		10 16 7 2020
Name of Federal Candidate:		x Support	Office Soug	ht: House District: 00
GADE, DANIEL, M., ,		Oppose	Presid	dent Senate State: VA
Calendar Year-To-Date		6633.33	Disburseme	nt For: Primary Seneral
Per Election for Office Sought	T-1-T-		2020 (Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	·		· [360.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		· •	
(c) TOTAL Independent Expenditures			· [7
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidar party committee) any political party committee or its	ate or authorized			
Bach, Catharyne, L., ,	[Electronically Fil	ed1	M = M /	D D / Y Y Y Y
Signature	- Беснониану Г и	Date	12	01 2020

PAGE 37 OF 38 FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ Middle Resolution Federal PAC Inc. C00512335 Check if 24-hour report 48-hour report New report Amends report filed on Date of Public Distribution/Dissemination Full Name of Payee Walls, Benjamin, , , 16 2020 Mailing Address 1909 Colgate Ave Amount City State Zip Code 180.00 23226 Transaction ID: SE.7385 Richmond VA Date of Disbursement or Obligation Purpose of Expenditure Category/ Canvassing 004 10 16 2020 Type Name of Federal Candidate: 07 **X** Support Office Sought: **X** House District: FREITAS, NICK, J.,, VA Oppose President State: Senate Disbursement For: Primary **X** General Calendar Year-To-Date 7093.34 2020 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Memo Item Walls, Benjamin, , , 30 2020 10 Mailing Address 1909 Colgate Ave Amount 44.00 City State Zip Code Richmond Transaction ID: SE.7446 VA 23226 Date of Disbursement or Obligation Purpose of Expenditure Category/ Canvassing 004 30 2020 10 Type Name of Federal Candidate: x Support Office Sought: House District: TRUMP, DONALD J., , , Oppose **X** President Senate State: **X** General Disbursement For: Primary Calendar Year-To-Date 9498.71 2020 Per Election for Office Sought Other (specify) ▶ 224.00 (a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Bach, Catharyne, L.,, [Electronically Filed] 01 2020 Date Signature

TEMIZED INDEPENDENT EXPENDITURES				PAGE 38 OF 38
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼
Middle Resolution Federal PAC Inc.				
				C C00512335
Check if 24-hour report 48-hour report	New repo	ort Amends repo		=M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Walls, Benjamin, , ,			[10 30 7 2020
Mailing Address 1909 Colgate Ave			Amou	int
City	State	Zip Code		44.00
Richmond	VA	23226		saction ID : SE.7447 of Disbursement or Obligation
Purpose of Expenditure Canvassing		Category/ Type 004		10 30 / Y Y Y Y Y
Name of Federal Candidate:		✗ Support	Office Sough	nt: House District: 00
GADE, DANIEL, M., ,		Oppose	Presid	ent Senate State: VA
Calendar Year-To-Date Per Election for Office Sought	7 7	6793.33	Disbursemer 2020	nt For: Primary
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Walls, Benjamin, , ,			Г	10 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1909 Colgate Ave				للنب لتا لت
			Amou	ınt
City	State	Zip Code		44.00
Richmond	VA	23226		saction ID : SE.7448 of Disbursement or Obligation
Purpose of Expenditure Canvassing		Category/ Type 004		10 30 7 2020
Name of Federal Candidate:		x Support	Office Sough	ht: X House District: 07
FREITAS, NICK, J., ,		Oppose	Presid	ent Senate State: VA
Calendar Year-To-Date Per Election for Office Sought		7253.34	Disbursemer	nt For: Primary General
Per Election for Office Sought	T T		2020	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures				88.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•	
(c) TOTAL Independent Expenditures			•	15320.00
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Bach, Catharyne, L., ,	[Electronically Fil	adl	M = M /	DID / YIYIY
Signature	пиши Ги	_ Date	12	01 2020