

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines. **12FE4M5**

TRIDENT PAC

ADDRESS (number and street) **PO BOX 1284**

Check if different than previously reported. (ACC) **VIRGINIA BEACH VA 23451**

2. **FEC IDENTIFICATION NUMBER** **C** **C00627133**

3. IS THIS REPORT **NEW (N)** OR **AMENDED (A)**

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

- Feb 20 (M2)
- Mar 20 (M3)
- Apr 20 (M4)
- May 20 (M5)
- Jun 20 (M6)
- Jul 20 (M7)
- Aug 20 (M8)
- Sep 20 (M9)
- Oct 20 (M10)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (YE)

(c) 12-Day **PRE-Election** Report for the:

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

Election on M M / D D / Y Y Y Y Y Y in the State of

(d) 30-Day **POST-Election** Report for the:

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

Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y Y Y through M M / D D / Y Y Y Y Y Y

10 15 2020 through 11 23 2020

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

Type or Print Name of Treasurer **GLAZE, KAYLA, , ,**

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

12 03 2020

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

TRIDENT PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>	<input type="text" value="9433.40"/>	<input type="text" value="9433.40"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="2689.15"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="19500.00"/>	<input type="text" value="67900.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="22189.15"/>	<input type="text" value="77333.40"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="13643.40"/>	<input type="text" value="68787.65"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="8545.75"/>	<input type="text" value="8545.75"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

TRIDENT PAC

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 15 / 2020 To: M M / D D / Y Y Y Y 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		
(i) Itemized (use Schedule A).....	19500.00	67900.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	19500.00	67900.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	19500.00	67900.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	19500.00	67900.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	19500.00	67900.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	5843.40	42667.65
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	5843.40	42667.65
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	7800.00	25120.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	1000.00
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)) ..	13643.40	68787.65
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	13643.40	68787.65

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	19500.00	67900.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	19500.00	67900.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	5843.40	42667.65
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	5843.40	42667.65

**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 10
	<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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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
TRIDENT PAC

A. BALLARD, S, B, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2828 SHIPPS CORNER RD
 City VIRGINIA BEACH State VA Zip Code 23453
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SB BALLARD CONSTRUCTION Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 29 / 2020
Transaction ID : SA11AI.4842
 Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

B. DAVENPORT, JASON, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10206 FINCHLEY DR
 City BAKERSFIELD State CA Zip Code 93311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALLIED POTATO Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 10 / 20 / 2020
Transaction ID : SA11AI.4836
 Amount of Each Receipt this Period 2500.00
 Memo Item
CONTRIBUTION

C. SLONE, JORDAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 535 FAIRFAX AVENUE
 City NORFOLK State VA Zip Code 23507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HARBOR GROUP INTERNATIONAL Occupation (for Individual) CHAIRMAN & CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 4500.00

Date of Receipt 11 / 02 / 2020
Transaction ID : SA11AI.4844
 Amount of Each Receipt this Period 2000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	9500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 10
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
TRIDENT PAC

A. WALTZ, JESSE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1808 NORTH ALANTON DRIVE
 City VIRGINIA BEACH State VA Zip Code 23454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JES Occupation (for Individual) FOUNDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 26 / 2020
Transaction ID : SA11AI.4838
 Amount of Each Receipt this Period
 5000.00
 Memo Item
CONTRIBUTION

B. WATLZ, STELLA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1808 NORTH ALANTON DRIVE
 City VIRGINIA BEACH State VA Zip Code 23454
 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 ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 26 / 2020
Transaction ID : SA11AI.4840
 Amount of Each Receipt this Period
 5000.00
 Memo Item
CONTRIBUTION

C.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	10000.00
TOTAL This Period (last page this line number only).....▶	19500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
TRIDENT PAC

Full Name (Last, First, Middle Initial) A. ANEDOT, INC.		Date of Disbursement MM / DD / YYYY 10 / 20 / 2020
Mailing Address 1340 POYDRAS STREET SUITE 1770		FEC Identification Number C Transaction ID : SB21B.4847 Amount of Each Disbursement this Period 100.30
City NEW ORLEANS	State LA	
Zip Code 70112	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
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. ANEDOT, INC.		Date of Disbursement MM / DD / YYYY 10 / 26 / 2020
Mailing Address 1340 POYDRAS STREET SUITE 1770		FEC Identification Number C Transaction ID : SB21B.4848 Amount of Each Disbursement this Period 400.60
City NEW ORLEANS	State LA	
Zip Code 70112	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. BELLIS, KELLY, , ,		Date of Disbursement MM / DD / YYYY 11 / 04 / 2020
Mailing Address 8502 ALTANTIC AVENUE UNIT B		FEC Identification Number C Transaction ID : SB21B.4850 Amount of Each Disbursement this Period 1790.00
City VIRGINIA BEACH	State VA	
Zip Code 23541	Purpose of Disbursement FUNDRAISING CONSULTING	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

2290.90

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
TRIDENT PAC

A. CROSBY OTTENHOFF GROUP

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 611 PENNSYLVANIA AVE
STE #267

M M M	/	D D D	/	Y Y Y Y Y
11		04		2020

City WASHINGTON State DC Zip Code 20003

FEC Identification Number

Purpose of Disbursement
COMPLIANCE CONSULTING

C []

Transaction ID : SB21B.4846

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

[] 1012.50

State: District:

Memo Item

B. PPG CONSULTING LLC

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 3401 13TH STREET SOUTH

M M M	/	D D D	/	Y Y Y Y Y
10		22		2020

City ARLINGTON State VA Zip Code 22204

FEC Identification Number

Purpose of Disbursement
FUNDRAISING CONSULTING

C []

Transaction ID : SB21B.4849

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

[] 2500.00

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

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).....▶

[] 3512.50

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

[] 5803.40

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
TRIDENT PAC

A. DALE CRAFTS FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 236

M M M	/	D D D	/	Y Y Y Y Y
11		02		2020

City
LISBON

State
ME

Zip Code
04250

FEC Identification Number

Purpose of Disbursement
CONTRIBUTION

C	C00722454
---	-----------

Candidate Name

Category/
Type

Transaction ID : SB23.4854

Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

Amount of Each Disbursement this Period	2800.00
-----------------------------------------	---------

State: ME District: 02

Memo Item

B. MCCAUL FOR CONGRESS, INC

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 815-A BRAZOS ST
PMB 230

M M M	/	D D D	/	Y Y Y Y Y
11		02		2020

City
AUSTIN

State
TX

Zip Code
78701

FEC Identification Number

Purpose of Disbursement
CONTRIBUTION

C	C00392688
---	-----------

Candidate Name

Category/
Type

Transaction ID : SB23.4852

Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify)

Amount of Each Disbursement this Period	5000.00
-----------------------------------------	---------

State: TX District: 10

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

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) ▼

Amount of Each Disbursement this Period	
-----------------------------------------	--

State: District:

Memo Item

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

7800.00

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

7800.00
