

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.

Rooted in Community Leadership PAC

ADDRESS (number and street)

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

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:
- | | | | |
|--------------------------------------|---|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input checked="" type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on / / in the State of

- (d) 30-Day POST-Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on / / in the State of

5. Covering Period / / through / /

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

Mubarak, Rasha, , ,

Type or Print Name of Treasurer

Signature of Treasurer Mubarak, Rasha, , , [Electronically Filed] Date / /

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

Office Use Only									
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Rooted in Community Leadership 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"/>		120377.04
(b) Cash on Hand at Beginning of Reporting Period.....	104980.79	
(c) Total Receipts (from Line 19)	280.00	24137.88
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	105260.79	144514.92
7. Total Disbursements (from Line 31).....	7532.17	46786.30
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	97728.62	97728.62
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	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

Rooted in Community Leadership 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).....	0.00	2436.00
(ii) Unitemized	280.00	6701.88
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	280.00	9137.88
(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)	280.00	9137.88
12. Transfers From Affiliated/Other Party Committees.....	0.00	15000.00
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)).....▶	280.00	24137.88
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	280.00	24137.88

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	6532.17	32117.99
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	6532.17	32117.99
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	500.00	5500.00
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	25.00
(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	25.00
29. Other Disbursements (Including Non-Federal Donations).....	500.00	9143.31
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)) ..	7532.17	46786.30
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7532.17	46786.30

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)	280.00	9137.88
34. Total Contribution Refunds (from Line 28(d))	0.00	25.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	280.00	9112.88
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	6532.17	32117.99
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	6532.17	32117.99

**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

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)
Rooted in Community Leadership PAC

Full Name (Last, First, Middle Initial)

A. Summit Campaign Strategies

Mailing Address 87 Summit Cir

City Shelburne State VT Zip Code 05482-6753

Purpose of Disbursement
Digital Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 12 / 2022

FEC Identification Number

C

Transaction ID : 500153401

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Unbought Power, LLC

Mailing Address 5219 Timberview Ter

City Orlando State FL Zip Code 32819-3924

Purpose of Disbursement
Fundraising Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 12 / 2022

FEC Identification Number

C

Transaction ID : 500153402

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address 14 Arrow St

City Cambridge State MA Zip Code 02138-5106

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 21 / 2022

FEC Identification Number

C

Transaction ID : 500154172

Amount of Each Disbursement this Period

2.23

Memo Item

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

4002.23

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)
Rooted in Community Leadership PAC

A. Hart, Alexis, Duling, ,

Full Name (Last, First, Middle Initial)

Mailing Address 100 Orndorf Dr
Unit 866

City Brighton State MI Zip Code 48116-7037

Purpose of Disbursement Speaker Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 08 / 2022

FEC Identification Number: C

Transaction ID : 500153403

Amount of Each Disbursement this Period: 250.00

Memo Item

B. MBA Consulting Group

Full Name (Last, First, Middle Initial)

Mailing Address 611 Pennsylvania Ave SE
Ste 143

City Washington State DC Zip Code 20003-4303

Purpose of Disbursement Compliance Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 27 / 2022

FEC Identification Number: C

Transaction ID : 500154464

Amount of Each Disbursement this Period: 250.00

Memo Item

C. North Arrow Consulting, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 5541 Yorkshire Rd

City Detroit State MI Zip Code 48224-2140

Purpose of Disbursement Management Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 12 / 2022

FEC Identification Number: C

Transaction ID : 500153425

Amount of Each Disbursement this Period: 2000.00

Memo Item

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

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 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)

Rooted in Community Leadership PAC

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address 14 Arrow St

City
Cambridge

State
MA

Zip Code
02138-5106

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	2	2

FEC Identification Number

C []

Transaction ID : 500152965

Amount of Each Disbursement this Period

[] 0.60

Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address 14 Arrow St

City
Cambridge

State
MA

Zip Code
02138-5106

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	2	2

FEC Identification Number

C []

Transaction ID : 500155136

Amount of Each Disbursement this Period

[] 1.72

Memo Item

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address 14 Arrow St

City
Cambridge

State
MA

Zip Code
02138-5106

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	2	2

FEC Identification Number

C []

Transaction ID : 500155137

Amount of Each Disbursement this Period

[] 3.46

Memo Item

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

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

[] 5.78

[]

**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)
Rooted in Community Leadership PAC

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 04 / 14 / 2022	
Mailing Address 14 Arrow St		FEC Identification Number C [] Transaction ID : 500153447	
City Cambridge	State MA	Zip Code 02138-5106	Amount of Each Disbursement this Period [] 3.16
Purpose of Disbursement Credit Card Processing Fee		Category/Type []	
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.		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C []	
City	State	Zip Code	Amount of Each Disbursement this Period []
Purpose of Disbursement		Category/Type []	
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) C.		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C []	
City	State	Zip Code	Amount of Each Disbursement this Period []
Purpose of Disbursement		Category/Type []	
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:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 3.16
TOTAL This Period (last page this line number only).....▶	[] 6511.17

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)

Rooted in Community Leadership PAC

Full Name (Last, First, Middle Initial)

A. Summer Lee for Congress

Mailing Address PO Box 82620

City
Pittsburgh

State
PA

Zip Code
15218-0620

Purpose of Disbursement
Contribution to Federal Committee

Candidate Name

Lee, Summer, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2022
 Primary General
 Other (specify) ▼

State: PA District: 12

Date of Disbursement

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

FEC Identification Number

C C00791780

Transaction ID : 500154260

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

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	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

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	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

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

500.00

500.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Rooted in Community Leadership PAC

Full Name (Last, First, Middle Initial)

A. Committee to Elect Roslyn Ogburn for State Representative

Mailing Address PO Box 28028

City
Detroit

State
MI

Zip Code
48228-0028

Purpose of Disbursement
Contribution to Non-Federal Committee

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:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : 500154261

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

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

500.00

500.00