

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 Innovation Political Action Committee

ADDRESS (number and street) 228 S. Washington St. Ste. 115 Alexandria VA 22314 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00540187 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 10 / 01 / 2023 through 10 / 31 / 2023

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 Lisker, Lisa, , ,

Signature of Treasurer Lisker, Lisa, , , Date 11 / 20 / 2023

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

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Innovation Political Action Committee

Report Covering the Period: From: 10 / 01 / 2023 To: 10 / 31 / 2023

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2023		827456.60
(b) Cash on Hand at Beginning of Reporting Period.....	1152130.73	
(c) Total Receipts (from Line 19)	13190.44	835577.39
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	1165321.17	1663033.99
7. Total Disbursements (from Line 31).....	54291.03	552003.85
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	1111030.14	1111030.14
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 the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Innovation Political Action Committee

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).....	6832.00	396470.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	6832.00	396470.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	6000.00	346500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	12832.00	742970.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	92248.95
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.).....	358.44	358.44
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)).....▶	13190.44	835577.39
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	13190.44	835577.39

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	29291.03	174503.85
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	29291.03	174503.85
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	25000.00	377500.00
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	0.00
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)) ..	54291.03	552003.85
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	54291.03	552003.85

DETAILED SUMMARY PAGE
of Disbursements

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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)	12832.00	742970.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	12832.00	742970.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	29291.03	174503.85
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	29291.03	174503.85

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 OF 13
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Innovation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. BLASS, DALIA, , ,

Mailing Address **6410 SHADOW ROAD**

City **CHEVY CHASE** State **MD** Zip Code **20815-6654**

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

Name of Employer (for Individual) **SULLIVAN & CROMWELL** Occupation (for Individual) **PARTNER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
10 / 08 / 2023

Transaction ID : SA11A.46757

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. HUNT, RICHARD, , ,

Mailing Address **312 NORTH FAIRFAX STREET**

City **ALEXANDRIA** State **VA** Zip Code **22314-2652**

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

Name of Employer (for Individual) **ELECTRONIC PAYMENTS COALITION** Occupation (for Individual) **EXECUTIVE CHAIR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt
10 / 18 / 2023

Transaction ID : SA11A.46754

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

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

Mailing Address **4424 45TH ST NW**

City **WASHINGTON** State **DC** Zip Code **20016-2053**

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

Name of Employer (for Individual) **CROSSROADS STRATEGIES** Occupation (for Individual) **CEO**

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **4160.00**

Date of Receipt
10 / 06 / 2023

Transaction ID : SA11A.46758

Amount of Each Receipt this Period
416.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **3416.00**

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 13
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Innovation Political Action Committee

A. LAVET, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7887 JONES BRANCH DRIVE
 1803
 City MCLEAN State VA Zip Code 22102-3484
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOFI TECHNOLOGIES, INC. Occupation (for Individual) GENERAL COUNSEL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 17 / 2023
Transaction ID : SA11A.46755
 Amount of Each Receipt this Period 1000.00
 Memo Item
CONTRIBUTION

B. MURRAY, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12750 39TH AVE NE
 City SEATTLE State WA Zip Code 98125-4612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MONUMENT ADVOCACY Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4160.00

Date of Receipt 10 / 11 / 2023
Transaction ID : SA11A.46756
 Amount of Each Receipt this Period 416.00
 Memo Item
CONTRIBUTION

C. WOOD, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 13TH ST NW
 City WASHINGTON State DC Zip Code 20005-3807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BGR GROUP Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 4000.00

Date of Receipt 10 / 26 / 2023
Transaction ID : SA11A.46843
 Amount of Each Receipt this Period 2000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3416.00
TOTAL This Period (last page this line number only).....	6832.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 13
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Innovation Political Action Committee

A. CENTENE CORPORATION POLITICAL ACTION COMMITTEE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7700 FORSYTH BLVD
 City SAINT LOUIS State MO Zip Code 63105-1810
 FEC ID number of contributing federal political committee. **C** C00397851
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 10 / 30 / 2023
Transaction ID : SA11C.46763
 Amount of Each Receipt this Period: 1000.00
 Memo Item
CONTRIBUTION

B. VISA, INC. PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 7TH ST NW STE 800
 City WASHINGTON State DC Zip Code 20004-2801
 FEC ID number of contributing federal political committee. **C** C00365122
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 10 / 13 / 2023
Transaction ID : SA11C.46746
 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: / /
 Amount of Each Receipt this Period:
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	6000.00
TOTAL This Period (last page this line number only).....	6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 13
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Innovation Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. BB&T/TRUIST		Date of Receipt
Mailing Address 1909 K ST., NW		<input type="text"/> M M M / <input type="text"/> D D D / <input type="text"/> Y Y Y Y Y Y
City WASHINGTON	State DC	Zip Code 20006
FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>		Transaction ID : SA17.23321
Name of Employer (for Individual)		Amount of Each Receipt this Period
Occupation (for Individual)		<input type="text"/> 358.44
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="checkbox"/> Memo Item
<input type="text"/> 358.44		INTEREST INC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B.		Date of Receipt
Mailing Address		<input type="text"/> M M M / <input type="text"/> D D D / <input type="text"/> Y Y Y Y Y Y
City	State	Zip Code
FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer (for Individual)		<input type="text"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C.		Date of Receipt
Mailing Address		<input type="text"/> M M M / <input type="text"/> D D D / <input type="text"/> Y Y Y Y Y Y
City	State	Zip Code
FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer (for Individual)		<input type="text"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼	
<input type="text"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text"/> 358.44
TOTAL This Period (last page this line number only).....▶	<input type="text"/> 358.44

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)
Innovation Political Action Committee

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address PO BOX 84314
SUITE 2105

City BATON ROUGE State LA Zip Code 70884-1821

Purpose of Disbursement
ONLINE PROCESSING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement
MM / DD / YYYY
10 / 31 / 2023

FEC Identification Number
C
Transaction ID : SB21B.I2332f
Amount of Each Disbursement this Period
275.08

Memo Item

Full Name (Last, First, Middle Initial)

B. BREAKWALL, LLC

Mailing Address 233 SUNSET COURT

City BUFFALO State NY Zip Code 14228

Purpose of Disbursement
COMMUNICATIONS CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement
MM / DD / YYYY
10 / 10 / 2023

FEC Identification Number
C
Transaction ID : SB21B.I2332f
Amount of Each Disbursement this Period
15000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CMDI

Mailing Address 1593 SPRING HILL RD., STE. 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement
SOFTWARE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement
MM / DD / YYYY
10 / 25 / 2023

FEC Identification Number
C
Transaction ID : SB21B.I2332
Amount of Each Disbursement this Period
250.00

Memo Item

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

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

15525.08

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Innovation Political Action Committee

Full Name (Last, First, Middle Initial)

A. OORBEEK MEMMOTT GROUP

Mailing Address 3905 N. DUMBARTON ST.

City
ARLINGTON

State
VA

Zip Code
22207

Purpose of Disbursement
EVENT CATERING

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			16			2023			

FEC Identification Number

C []

Transaction ID : SB21B.I23324

Amount of Each Disbursement this Period

[] 7765.95

Memo Item

Full Name (Last, First, Middle Initial)

B. OORBEEK MEMMOTT GROUP

Mailing Address 3905 N. DUMBARTON ST.

City
ARLINGTON

State
VA

Zip Code
22207

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			01			2023			

FEC Identification Number

C []

Transaction ID : SB21B.I23325

Amount of Each Disbursement this Period

[] 6000.00

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 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)..... ▶

[] 13765.95

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

[] 29291.03

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)

Form for line numbers 21b-30b with checkboxes, where 23 is checked.

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NAME OF COMMITTEE (In Full)
Innovation Political Action Committee

Full Name (Last, First, Middle Initial)

A. DAVIDSON FOR CONGRESS

Mailing Address 1790 GREENBRIAR DR

City TROY State OH Zip Code 45373

Purpose of Disbursement POLITICAL CONTRIBUTION

Candidate Name DAVIDSON, WARREN, , ,

Office Sought: [X] House [] Senate [] President
State: OH District: 08

Disbursement For: 2024
[X] Primary [] General
[] Other (specify) v

Date of Disbursement

Date of Disbursement form: 10 / 16 / 2023

FEC Identification Number

C00600718

Transaction ID : SB23.I23331

Amount of Each Disbursement this Period

Amount of Each Disbursement this Period: 5000.00

[] Memo Item

Full Name (Last, First, Middle Initial)

B. FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Mailing Address PO BOX 1131

City GREENVILLE State NC Zip Code 27835

Purpose of Disbursement POLITICAL CONTRIBUTION

Candidate Name MURPHY, GREGORY, FRANCIS, DR,

Office Sought: [X] House [] Senate [] President
State: NC District: 03

Disbursement For: 2024
[] Primary [X] General
[] Other (specify) v

Date of Disbursement

Date of Disbursement form: 10 / 16 / 2023

FEC Identification Number

C00697649

Transaction ID : SB23.I23329

Amount of Each Disbursement this Period

Amount of Each Disbursement this Period: 5000.00

[] Memo Item

Full Name (Last, First, Middle Initial)

C. HUDSON FOR CONGRESS

Mailing Address PO BOX 5053

City CONCORD State NC Zip Code 28027-1500

Purpose of Disbursement POLITICAL CONTRIBUTION

Candidate Name HUDSON, RICHARD, L., , JR.

Office Sought: [X] House [] Senate [] President
State: NC District: 09

Disbursement For: 2024
[] Primary [X] General
[] Other (specify) v

Date of Disbursement

Date of Disbursement form: 10 / 16 / 2023

FEC Identification Number

C00504522

Transaction ID : SB23.I23330

Amount of Each Disbursement this Period

Amount of Each Disbursement this Period: 5000.00

[] Memo Item

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

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

Subtotal form: 15000.00

Total form: 15000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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)

Innovation Political Action Committee

Full Name (Last, First, Middle Initial)

A. JASON SMITH FOR CONGRESS

Mailing Address PO BOX 1324

City
CAPE GIRARDEAU

State
MO

Zip Code
63702-1324

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name

SMITH, JASON, T, ,

Office Sought: House
 Senate
 President

Disbursement For: 2024
 Primary General
 Other (specify) ▼

State: MO District: 08

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			16			2023			

FEC Identification Number

C C00541862

Transaction ID : SB23.I23328

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. MAX MILLER FOR CONGRESS

Mailing Address 19525 HILLIARD BLVD #16010

City
ROCKY RIVER

State
OH

Zip Code
44116

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name

MILLER, MAX, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2024
 Primary General
 Other (specify) ▼

State: OH District: 07

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			16			2023			

FEC Identification Number

C C00770818

Transaction ID : SB23.I23327

Amount of Each Disbursement this Period

5000.00

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

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

10000.00

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

25000.00