

# 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**  
**LEE PAC**

ADDRESS (number and street) **47 FLINTLOCK DRIVE**  
 Check if different than previously reported. (ACC) **SHIRLEY NY 11967**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00573626** 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period  /  /  2020 through  /  /  2020

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

Signature of Treasurer *Marks, Nancy, , ,* [Electronically Filed] Date  /  /  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**

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Page 2

Write or Type Committee Name

**LEE 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="39398.94"/>	<input type="text" value="39398.94"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="27086.34"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="28910.00"/>	<input type="text" value="52885.00"/>
(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="55996.34"/>	<input type="text" value="92283.94"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="39134.19"/>	<input type="text" value="75421.79"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="16862.15"/>	<input type="text" value="16862.15"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**LEE 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).....	11400.00	11400.00
(ii) Unitemized .....	10.00	10.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	11410.00	11410.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	7500.00	18500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	18910.00	29910.00
12. Transfers From Affiliated/Other Party Committees.....	10000.00	22475.00
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	500.00
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)).....▶	28910.00	52885.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	28910.00	52885.00

**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 .....	3134.19	12321.79
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	3134.19	12321.79
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	36000.00	63100.00
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)) ..	39134.19	75421.79
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	39134.19	75421.79

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	18910.00	29910.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	18910.00	29910.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	3134.19	12321.79
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	3134.19	12321.79

**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 15
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**LEE PAC**

**A. Chintu, Patel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7 Evergreen Way  
 City Glen Head State NY Zip Code 11545  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amneal Pharmaceuticals Occupation (for Individual) CEO CO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 23 / 2020  
**Transaction ID : SA11AI.5400**  
 Amount of Each Receipt this Period  
 1400.00  
 Memo Item

**B. Loria, Jeffrey, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 19 E 72nd Street  
 City New York State NY Zip Code 10021  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Jeffrey H Loria & Co, Inc. Occupation (for Individual) Art Dealer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2020  
**Transaction ID : SA11AI.5396**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

**C. Weinstein, Adam, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 205 E 85th St  
 City New York State NY Zip Code 10028  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) New Mountain Capital Occupation (for Individual) Managing Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 16 / 2020  
**Transaction ID : SA11AI.5398**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	11400.00
<b>TOTAL</b> This Period (last page this line number only).....▶	11400.00

**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 7 OF 15
<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)  
**LEE PAC**

**A. KOCH INDUSTRIES, INC. POLITICAL ACTION COMMITTEE (KOCHPAC)**

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

Mailing Address 600 14TH STREET, NW  
SUITE 800

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00236489

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 22 / 2020

**Transaction ID : SA11C.5404**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B. MORTGAGE BANKERS ASSOCIATION POLITICAL ACTION COMMITTEE (MORPAC)**

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

Mailing Address 1919 M STREET, NW  
5TH FLOOR

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00004812

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 29 / 2020

**Transaction ID : SA11C.5405**

Amount of Each Receipt this Period  
2500.00

Memo Item

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	7500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	7500.00

**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 15
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**LEE PAC**

**A. ZELDIN 2020**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 47 FLINTLOCK DRIVE

City SHIRLEY	State NY	Zip Code 11967
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00573683

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 24 / 2020  
**Transaction ID : SA12.5391**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B. Ghalili, Babak, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 630 1st Ave #27C

City New York	State NY	Zip Code 10016
------------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)  
Midtown Dental Oral Surgeon

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 24 / 2020  
**Transaction ID : SA12.5391.0**

Amount of Each Receipt this Period  
5000.00

Memo Item

**C. ZELDIN VICTORY COMMITTEE 2020**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 47 FLINTLOCK DRIVE

City SHIRLEY	State NY	Zip Code 11967
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FEC ID number of contributing federal political committee. **C** C00579920

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
17475.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 25 / 2020  
**Transaction ID : SA12.5393**

Amount of Each Receipt this Period  
5000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10000.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Schwimmer, Larry, , ,</b>		Date of Receipt MM / DD / YYYY 06 / 22 / 2020
Mailing Address 530 Park Avenue Apt. 5D		<b>Transaction ID : SA12.5393.0</b>
City New York	State NY	Zip Code 10065
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2800.00
Name of Employer (for Individual) Swim Line Corp.	Occupation (for Individual) CEO/President	<input checked="" type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2800.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Nespola, Richard, , ,</b>		Date of Receipt MM / DD / YYYY 06 / 11 / 2020
Mailing Address PO Box 1230		<b>Transaction ID : SA12.5393.1</b>
City Bridgehampton	State NY	Zip Code 11932
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2200.00
Name of Employer (for Individual) Quimby Ventures LLC	Occupation (for Individual) Partner	<input checked="" type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C.</b>		Date of Receipt MM / DD / YYYY
Mailing Address		
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer (for Individual)	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 ▼	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	10000.00

**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)  
**LEE PAC**

Full Name (Last, First, Middle Initial) <b>A. American Airlines</b>			Date of Disbursement MM / DD / YYYY 06 / 18 / 2020	
Mailing Address 4333 Amon Carter Blvd				
City Fort Worth	State TX	Zip Code 76155	FEC Identification Number C00573626 <b>Transaction ID : SB21B.5430</b>	
Purpose of Disbursement Air Fare			Amount of Each Disbursement this Period 128.10	
Candidate Name <b>LEE PAC</b>			Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State: _____	District: _____			

Full Name (Last, First, Middle Initial) <b>B. American Airlines</b>			Date of Disbursement MM / DD / YYYY 06 / 18 / 2020	
Mailing Address 4333 Amon Carter Blvd				
City Fort Worth	State TX	Zip Code 76155	FEC Identification Number C00573626 <b>Transaction ID : SB21B.5431</b>	
Purpose of Disbursement Air Fare			Amount of Each Disbursement this Period 496.40	
Candidate Name <b>LEE PAC</b>			Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State: _____	District: _____			

Full Name (Last, First, Middle Initial) <b>C. American Airlines</b>			Date of Disbursement MM / DD / YYYY 06 / 19 / 2020	
Mailing Address 4333 Amon Carter Blvd				
City Fort Worth	State TX	Zip Code 76155	FEC Identification Number C00573626 <b>Transaction ID : SB21B.5427</b>	
Purpose of Disbursement Air Fare			Amount of Each Disbursement this Period 496.40	
Candidate Name <b>LEE PAC</b>			Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State: _____	District: _____			

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

1120.90

**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)  
**LEE PAC**

Full Name (Last, First, Middle Initial) <b>A. American Airlines</b>			Date of Disbursement MM / DD / YYYY 06 / 19 / 2020	
Mailing Address 4333 Amon Carter Blvd				
City Fort Worth	State TX	Zip Code 76155	FEC Identification Number C00573626 <b>Transaction ID : SB21B.5428</b>	
Purpose of Disbursement Early Check In			Amount of Each Disbursement this Period 64.80	
Candidate Name <b>LEE PAC</b>			Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) <b>B. American Airlines</b>			Date of Disbursement MM / DD / YYYY 06 / 19 / 2020	
Mailing Address 4333 Amon Carter Blvd				
City Fort Worth	State TX	Zip Code 76155	FEC Identification Number C00573626 <b>Transaction ID : SB21B.5429</b>	
Purpose of Disbursement Air Fare			Amount of Each Disbursement this Period 744.60	
Candidate Name <b>LEE PAC</b>			Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) <b>C. Avis</b>			Date of Disbursement MM / DD / YYYY 06 / 19 / 2020	
Mailing Address 100 Arrival Avenue				
City Ronkonkoma	State NY	Zip Code 11779	FEC Identification Number C00573626 <b>Transaction ID : SB21B.5426</b>	
Purpose of Disbursement Car Rental			Amount of Each Disbursement this Period 405.28	
Candidate Name <b>LEE PAC</b>			Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: _____	District: _____			

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

1214.68

**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)  
**LEE PAC**

<p><b>A. Stripe</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 165 Jessie Street #2</p> <p>City San Francisco State CA Zip Code 94105</p> <p>Purpose of Disbursement Credit Card Fees</p> <p>Candidate Name <b>LEE PAC</b></p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>		<p>Date of Disbursement</p> <p>MM / DD / YYYY 06 / 30 / 2020</p>
<p>Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>FEC Identification Number</p> <p><b>C</b> C00573626 <b>Transaction ID : SB21B.5433</b></p> <p>Amount of Each Disbursement this Period</p> <p>635.51</p> <p><input type="checkbox"/> Memo Item</p>	
<p>Category/Type</p> <p>003</p>		

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	635.51
<b>TOTAL</b> This Period (last page this line number only).....▶	2971.09





**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)  
**LEE PAC**

**A. STEVE CHABOT FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address 220 FINDLAY ST

City CINCINNATI State OH Zip Code 45202

Purpose of Disbursement  012 Category/Type

Candidate Name **LEE PAC**

Office Sought:  House  Senate  President

Disbursement For: 2020  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 29 / 2020

FEC Identification Number: **C** C00573626

**Transaction ID : SB23.5411**

Amount of Each Disbursement this Period: 5000.00

Memo Item

**B. TOM REED FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 10847

City ROCHESTER State NY Zip Code 14610

Purpose of Disbursement  012 Category/Type

Candidate Name **LEE PAC**

Office Sought:  House  Senate  President

Disbursement For: 2020  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 26 / 2020

FEC Identification Number: **C** C00573626

**Transaction ID : SB23.5414**

Amount of Each Disbursement this Period: 5000.00

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement  Category/Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: / /

FEC Identification Number: **C**

Amount of Each Disbursement this Period:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	10000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	36000.00