

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**
TEAM [TEAMSTERS EDUCATION AND MOBILIZATION]

ADDRESS (number and street) **25 Louisiana Avenue, N.W.**
Check if different than previously reported. (ACC) **Washington DC 20001**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00526269 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 / / 2021 through / / 2021

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

Signature of Treasurer *Hall, Ken, , ,* [Electronically Filed] Date / / 2022

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

TEAM [TEAMSTERS EDUCATION AND MOBILIZATION]

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="2021"/>	<input type="text" value="7018.44"/>	<input type="text" value="7018.44"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="10811.04"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="9853.52"/>	<input type="text" value="76028.60"/>
(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="20664.56"/>	<input type="text" value="83047.04"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="352.90"/>	<input type="text" value="62735.38"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="20311.66"/>	<input type="text" value="20311.66"/>
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

Write or Type Committee Name

TEAM [TEAMSTERS EDUCATION AND MOBILIZATION]

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).....	695.94	1251.82
(ii) Unitemized	9157.58	25169.37
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	9853.52	26421.19
(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)	9853.52	26421.19
12. Transfers From Affiliated/Other Party Committees.....	0.00	49607.41
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)).....▶	9853.52	76028.60
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	9853.52	76028.60

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	0.00	8.48
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	8.48
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
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	232.50	508.52
(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)).....	232.50	508.52
29. Other Disbursements (Including Non-Federal Donations).....	120.40	62218.38
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)) ..	352.90	62735.38
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	352.90	62735.38

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)	9853.52	26421.19
34. Total Contribution Refunds (from Line 28(d))	232.50	508.52
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	9621.02	25912.67
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	8.48
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	8.48

**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 9
	(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)
TEAM [TEAMSTERS EDUCATION AND MOBILIZATION]

A. GERDES, EHREN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6233 Spy Glass Run

City Fort Wayne	State IN	Zip Code 46804-4229
--------------------	-------------	------------------------

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

Name of Employer (for Individual) TEAM LU 414	Occupation (for Individual) BUSINESS AGENT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
238.30

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		02		2021

Transaction ID : 61045706

Amount of Each Receipt this Period
23.70

Memo Item

CONTRIBUTION

B. GERDES, EHREN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6233 Spy Glass Run

City Fort Wayne	State IN	Zip Code 46804-4229
--------------------	-------------	------------------------

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

Name of Employer (for Individual) TEAM LU 414	Occupation (for Individual) BUSINESS AGENT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
262.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		30		2021

Transaction ID : 61045707

Amount of Each Receipt this Period
23.70

Memo Item

CONTRIBUTION

C. PINTACUDA, TOMMY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 45 SARDIS RD

City ASHEVILLE	State NC	Zip Code 28806-9545
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TEAM LU 61	Occupation (for Individual) VP
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
248.67

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		13		2021

Transaction ID : 61264726

Amount of Each Receipt this Period
37.03

Memo Item

TEAM FUND WEBSTORE

SUBTOTAL of Receipts This Page (optional).....	84.43
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:	PAGE 7 OF 9
	(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

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NAME OF COMMITTEE (In Full)
TEAM [TEAMSTERS EDUCATION AND MOBILIZATION]

A. CROUSE, X, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17127 PARKER LANE

City HAMMOND	State LA	Zip Code 70403-6366
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MEDIA SERVICES	Occupation (for Individual) DRIVER
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
393.28

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2021
Transaction ID : 61265199

Amount of Each Receipt this Period
 393.28

Memo Item

TEAM FUND WEBSTORE

B. WARNER, BRETT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 919 Quail Lane

City Newark	State DE	Zip Code 19711-2684
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
110.84

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2021
Transaction ID : 61265220

Amount of Each Receipt this Period
 110.84

Memo Item

TEAM FUND WEBSTORE

C. WARNER, BRETT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 919 Quail Lane

City Newark	State DE	Zip Code 19711-2684
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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 ▼
218.23

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2021
Transaction ID : 61265224

Amount of Each Receipt this Period
 107.39

Memo Item

TEAM FUND WEBSTORE

SUBTOTAL of Receipts This Page (optional).....	611.51
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 8 OF 9
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TEAM [TEAMSTERS EDUCATION AND MOBILIZATION]

A. RIGGLE, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 182 WIGGLEVILLE ROAD

City BROOKS	State KY	Zip Code 40109-5241
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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 ▼
- 4.42

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	16	/	2021

Transaction ID : 61298255

Amount of Each Receipt this Period

0.00

Memo Item

Refund(s) on Schedule B Totaling \$142.21 This changes the YTD Total to \$-4.42

B. PERSAUD, ROGER, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 177-30 WEXFORD TERRACE, APT 404

City JAMAICA	State NY	Zip Code 11432-2924
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JACK COOPER TRANSPORT	Occupation (for Individual) AUTO HANDLER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
- 90.29

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	23	/	2021

Transaction ID : 61298256

Amount of Each Receipt this Period

0.00

Memo Item

Refund(s) on Schedule B Totaling \$90.29 This changes the YTD Total to \$-90.29

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)
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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
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Amount of Each Receipt this Period

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Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	695.94

**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)
TEAM [TEAMSTERS EDUCATION AND MOBILIZATION]

Full Name (Last, First, Middle Initial)

A. FINANCIAL INNOVATIONS

Mailing Address ONE WEINGEROFF BLVD.

City CRANSTON State RI Zip Code 02910

Purpose of Disbursement
OCT 2021 WEBSTORE SALES

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
M M / D D / Y Y Y Y Y Y
12 / 07 / 2021

FEC Identification Number

Transaction ID : 61030944
Amount of Each Disbursement this Period

OCT 2021 WEBSTORE SALES
 Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
M M / D D / Y Y Y Y Y Y

FEC Identification Number

Amount of Each Disbursement this Period

 Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
M M / D D / Y Y Y Y Y Y

FEC Identification Number

Amount of Each Disbursement this Period

 Memo Item

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

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