

# 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

Making a Difference PAC

ADDRESS (number and street) 499 S. Capitol Street, SW  
Suite 420  
 Check if different than previously reported. (ACC) Washington DC 20003

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

C C00757344

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 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 checked="" type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S)            |                                       |

Election on 10 / 19 / 2022 in the State of DC

- (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 10 / 01 / 2022 through 10 / 19 / 2022

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 Angerholzer, Lindsay, F., ,

Signature of Treasurer Angerholzer, Lindsay, F., , [Electronically Filed] Date 10 / 25 / 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**

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Page 2

Write or Type Committee Name

**Making a Difference 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"/>	<input type="text" value="44029.65"/>	<input type="text" value="44029.65"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="15237.94"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="2000.00"/>	<input type="text" value="66250.00"/>
(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="17237.94"/>	<input type="text" value="110279.65"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="15079.00"/>	<input type="text" value="108120.71"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="2158.94"/>	<input type="text" value="2158.94"/>
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

**Making a Difference 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).....	2000.00	17250.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	2000.00	17250.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	49000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	2000.00	66250.00
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)).....▶	2000.00	66250.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	2000.00	66250.00

**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 .....	79.00	6320.71
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	79.00	6320.71
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	15000.00	101800.00
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)) ..	15079.00	108120.71
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	15079.00	108120.71

**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) .....	2000.00	66250.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	2000.00	66250.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	79.00	6320.71
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	79.00	6320.71

**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 11  
(check only one)

<input checked="" 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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<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)  
**Making a Difference PAC**

**A. Kamen, Al, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 425 E 58Th St

City New York	State NY	Zip Code 10022-2300
------------------	-------------	------------------------

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

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		12		2022

**Transaction ID : 16095367**

Amount of Each Receipt this Period  
2000.00

Memo Item

\* Earmarked Contribution: See Below

**B. ActBlue Technical Services**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 382110

City Cambridge	State MA	Zip Code 02238-2110
-------------------	-------------	------------------------

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

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
-----------------------------------	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		12		2022

**Transaction ID : 16095367E**

Amount of Each Receipt this Period  
2000.00

Memo Item

Note: Above Contribution earmarked through this organization.

**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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2000.00
<b>TOTAL</b> This Period (last page this line number only).....	2000.00

**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

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NAME OF COMMITTEE (In Full)  
**Making a Difference PAC**

**A. CHRISTY SMITH FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 24307 Magic Mountain Pkwy

M M M	/	D D D	/	Y Y Y Y Y
10		19		2022

City Valencia State CA Zip Code 91355-3402

FEC Identification Number

Purpose of Disbursement  
Political Contribution

C	C00725101
---	-----------

Candidate Name  
**SMITH, CHRISTY, , ,**

Category/  
Type

**Transaction ID : 500433884**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify) ▼  
State: CA District: 27

1000.00
---------

Memo Item

**B. Dr. Kim Schrier For Congress**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 2728

M M M	/	D D D	/	Y Y Y Y Y
10		01		2022

City Issaquah State WA Zip Code 98027-0125

FEC Identification Number

Purpose of Disbursement  
Political Contribution

C	C00652628
---	-----------

Candidate Name  
**SCHRIER, KIM, DR., ,**

Category/  
Type

**Transaction ID : 500433877**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify) ▼  
State: WA District: 08

1000.00
---------

Memo Item

**C. ENGEL FOR ARIZONA**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 40721

M M M	/	D D D	/	Y Y Y Y Y
10		19		2022

City Tucson State AZ Zip Code 85717-0721

FEC Identification Number

Purpose of Disbursement  
Political Contribution

C	C00773820
---	-----------

Candidate Name  
**ENGEL, KIRSTEN, , ,**

Category/  
Type

**Transaction ID : 500433885**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify) ▼  
State: AZ District: 06

1000.00
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Memo Item

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

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

3000.00
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**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)  
**Making a Difference PAC**

**A. Gillen For Congress**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 774

City: Rockville Centre, State: NY, Zip Code: 11571-0774

Purpose of Disbursement: Political Contribution

Candidate Name: **GILLEN, LAURA, , ,**

Office Sought:  House,  Senate,  President  
State: NY, District: 04

Disbursement For: 2022  
 Primary,  General,  Other (specify) ▼

Date of Disbursement: 10 / 13 / 2022

FEC Identification Number: **C00806547**  
**Transaction ID : 500433882**  
Amount of Each Disbursement this Period: 1000.00

Memo Item

**B. JARED MOSKOWITZ FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 8784

City: Coral Springs, State: FL, Zip Code: 33075-8784

Purpose of Disbursement: Political Contribution

Candidate Name: **MOSKOWITZ, JARED, , ,**

Office Sought:  House,  Senate,  President  
State: FL, District: 23

Disbursement For: 2022  
 Primary,  General,  Other (specify) ▼

Date of Disbursement: 10 / 19 / 2022

FEC Identification Number: **C00807628**  
**Transaction ID : 500433888**  
Amount of Each Disbursement this Period: 1000.00

Memo Item

**C. JONATHAN JACKSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 15333

City: Chicago, State: IL, Zip Code: 60615-5143

Purpose of Disbursement: Political Contribution

Candidate Name: **JACKSON, JONATHAN, , ,**

Office Sought:  House,  Senate,  President  
State: IL, District: 01

Disbursement For: 2022  
 Primary,  General,  Other (specify) ▼

Date of Disbursement: 10 / 19 / 2022

FEC Identification Number: **C00802603**  
**Transaction ID : 500433883**  
Amount of Each Disbursement this Period: 1000.00

Memo Item

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

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

3000.00



**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

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NAME OF COMMITTEE (In Full)  
**Making a Difference PAC**

Full Name (Last, First, Middle Initial)  
**A. KUSTER FOR CONGRESS, INC**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			13			2022			

Mailing Address PO Box 1498

City Concord State NH Zip Code 03302-1498

FEC Identification Number

**C** C00462861

**Transaction ID : 500433879**  
Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement  
Political Contribution

Category/Type

Candidate Name

**KUSTER, ANN MCLANE, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify) ▼

State: NH District: 02

Memo Item

Full Name (Last, First, Middle Initial)  
**B. MAGAZINER FOR CONGRESS**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			13			2022			

Mailing Address 150 Lavan St

City Warwick State RI Zip Code 02888-1059

FEC Identification Number

**C** C00802504

**Transaction ID : 500433881**  
Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement  
Political Contribution

Category/Type

Candidate Name

**MAGAZINER, SETH, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify) ▼

State: RI District: 02

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Mary Peltola For Alaska**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			19			2022			

Mailing Address PO Box 210014

City Anchorage State AK Zip Code 99521-0014

FEC Identification Number

**C** C00812388

**Transaction ID : 500433886**  
Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement  
Political Contribution

Category/Type

Candidate Name

**PELTOLA, MARY, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify) ▼

State: AK District: 00

Memo Item

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

4000.00

**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 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)  
**Making a Difference PAC**

**A. Matt Castelli For Congress**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 2451

M M M	/	D D D	/	Y Y Y Y Y
10		07		2022

City: Glens Falls State: NY Zip Code: 12801-6451

FEC Identification Number

Purpose of Disbursement  
Political Contribution

C	C00788869
---	-----------

Candidate Name  
**CASTELLI, MATT, , ,**

Category/  
Type

**Transaction ID : 500433878**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
State: NY District: 21  
Disbursement For: 2022  
 Primary  General  
 Other (specify) ▼

1000.00
---------

Memo Item

**B. MAXWELL ALEJANDRO FROST FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 772671

M M M	/	D D D	/	Y Y Y Y Y
10		19		2022

City: Orlando State: FL Zip Code: 32877-2671

FEC Identification Number

Purpose of Disbursement  
Political Contribution

C	C00786822
---	-----------

Candidate Name  
**FROST, MAXWELL, ALEJANDRO, ,**

Category/  
Type

**Transaction ID : 500433887**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
State: FL District: 10  
Disbursement For: 2022  
 Primary  General  
 Other (specify) ▼

1000.00
---------

Memo Item

**C. Tokuda For Hawaii**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 792

M M M	/	D D D	/	Y Y Y Y Y
10		19		2022

City: Kaneohe State: HI Zip Code: 96744-0792

FEC Identification Number

Purpose of Disbursement  
Political Contribution

C	C00813758
---	-----------

Candidate Name  
**TOKUDA, JILL, NAOMI, ,**

Category/  
Type

**Transaction ID : 500433889**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
State: HI District: 02  
Disbursement For: 2022  
 Primary  General  
 Other (specify) ▼

1000.00
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Memo Item

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

3000.00
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**TOTAL** This Period (last page this line number only).....▶

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# 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)  
**Making a Difference PAC**

Full Name (Last, First, Middle Initial) <b>A. Zimmerman For Congress</b>		Date of Disbursement MM / DD / YYYY 10 / 13 / 2022
Mailing Address 5 Vista Dr		FEC Identification Number C 000151217 <b>Transaction ID : 500433880</b>
City Great Neck	State NY	Zip Code 11021-1716
Purpose of Disbursement Political Contribution		Amount of Each Disbursement this Period 2000.00
Candidate Name <b>ZIMMERMAN, ROBERT, PETER, ,</b>		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NY	District: 04	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
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:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
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:	<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	15000.00