PAGE 1 / 9

FEC

REPORT OF RECEIPTS AND DISBURSEMENTS

FURINI 3A	For Other Than An A	Authorized Committee	Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
Career Education (Colleges and Universi	ties Political Action Comm	nittee
ADDRESS (number and stree	Suite 1050 Arlington		VA 22209 —
2. FEC IDENTIFICATION	N NUMBER ▼	CITY ▲	STATE ▲ ZIP CODE ▲
C C00213066	3	B. IS THIS NEW (N) OF	AMENDED (A)
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report July 15 Quarterly Report Quarterly Report January 31 Year-End Report April 15 Quarterly Report Quarterly Report Temporary 31 Year-End Report (Non-eyear Only) (Mitter) Termination Refore (TER)	PREPORT Due On: (c) 12-Day PRE-Election Report for th ort (Q2) ort (YE) Pear lection Y) POST-Electic Report for th	e: Convention (12C) ection on General (30G)	Sep 20 (M9) Sep 20 (M9) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
5. Covering Period	10 15 20	20 through 11	M / D D / Y Y Y Y Y 2020
I certify that I have examine Type or Print Name of Trea	Lynch, Lynelle, , ,	st of my knowledge and belief it is	true, correct and complete.
Signature of Treasurer	Lynch, Lynelle, , ,	[Electronically Filed]	Date 12 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of false,	erroneous, or incomplete inform	nation may subject the person signing	this Report to the penalties of 52 U.S.C. § 30109
Office Use			FEC FORM 3X Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016) Page 2

Write or Type Committee Name

Career Education Colleges and Universities Political Action Committee

10 15 2020 11 23 2020 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 48936.20 January 1, 2020 (b) Cash on Hand at 39388.84 Beginning of Reporting Period..... 2000.00 35500.00 Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 84436.20 41388.84 6(a) and 6(c) for Column B)..... 3527.93 46575.29 7. Total Disbursements (from Line 31)..... Cash on Hand at Close of 8. Reporting Period 37860.91 37860.91 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016) Page 3

Write or Type Committee Name

Career Education Colleges and Universities Political Action Committee

2020 23 2020 11 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 2000.00 34000.00 (i) Itemized (use Schedule A)..... 0.00 0.00 (ii) Unitemized (iii) TOTAL (add 34000.00 2000.00 Lines 11(a)(i) and (ii).....▶ 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 0.00 (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 34000.00 2000.00 Totals to Line 33, page 5)▶ 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees..... 0.00 0.00 13. All Loans Received..... 0.00 0.00 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other 1500.00 0.00 Political Committees..... 17. Other Federal Receipts 0.00 (Dividends, Interest, etc.)..... 0.00 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 (from Schedule H3)..... 0.00 0.00 0.00 (b) Levin Funds (from Schedule H5) (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 35500.00 20. Total Federal Receipts 2000.00 35500.00 (subtract Line 18(c) from Line 19)▶

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
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	27.93	275.29		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	27.93	275.29		
2. Transfers to Affiliated/Other Party Committees	0.00	7000.00		
Contributions to Federal Candidates/Committees and Other Political Committees	3500.00	39300.00		
I. Independent Expenditures	4 4 4			
(use Schedule E)	0.00	0.00		
(use Schedule F)	0.00	0.00		
S. Loan Repayments Made	0.00	0.00		
Loans Made Refunds of Contributions To: (a) Individuals/Persons Other	0.00	0.00		
Than Political Committees	0.00	0.00		
(b) Political Party Committees	0.00	0.00		
(such as PACs)	0.00	0.00		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00		
Other Disbursements (Including				
Non-Federal Donations)	0.00	0.00		
 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(b) Federal Election Activity Paid	0.00	0.00		
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		
Total Disbursements (add Lines 21(c), 22,				
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	3527.93	46575.29		
. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)				
from Line 31)	3527.93	46575.29		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

		3		
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)	2000.00	34000.00		
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	34000.00		
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	27.93	275.29		
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00		
38. Net Operating Expenditures (subtract Line 37 from Line 36)	27.93	275.29		

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)									
	X	11a		11b		11c	12	2	
		13		14		15	16	6	17

	the name and address of any political committee	
NAME OF COMMITTEE (In Full) Career Education Colleges a	and Universities Political Action Con	nmittee
Full Name of Individual (Last, First, Middle Girnun, Arnie, , , Mailing Address 13091 SW 78th Avenue	e Initial) or Full Organization Name	Date of Receipt
City Miami	State Zip Code FL 33156	Transaction ID : SA11AI.10625 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2000.00
Name of Employer (for Individual) FVI School of Nursing Receipt For: Primary General	Occupation (for Individual) Executive Aggregate Year-to-Date ▼	Memo Item CECUPAC Contribution
Other (specify) ▼ Full Name of Individual (Last, First, Middle	2000.00 e Initial) or Full Organization Name	
Mailing Address		Date of Receipt
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	Momo Itom
Name of Employer (for Individual) Receipt For:	Occupation (for Individual)	Memo Item
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name of Individual (Last, First, Middle	e Initial) or Full Organization Name	Date of Receipt
Mailing Address City	State Zip Code	M = M / D = D / Y = Y = Y
FEC ID number of contributing	C Zip Code	Amount of Each Receipt this Period
federal political committee. Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional	l) >	2000.00
TOTAL This Period (last page this line num	ber only)	2000.00

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SCHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 7 OF				
ITEMIZED DISBURSEMENTS		Use separate schedule(s) (ch		FOR LINE NUMBER: PAGE 7 OF 9 check only one)			
		category of the Summary Page	X 21b	22 23 26 27			
	Dotalloa	ary rago	28a	28b 28c 29 30b			
Any information copied from such Reports and State or for commercial purposes, other than using the national state of the							
NAME OF COMMITTEE (In Full)							
Career Education Colleges and U	niversities	S Political A	ction Comr	mittee			
Full Name (Last, First, Middle Initial)				Data of Dishara and			
A. Suntrust Bank				Date of Disbursement			
Mailing Address 1445 New York Ave. NW				10 21 2020			
City	State DC	Zip Code		FEC Identification Number			
Washington Purpose of Disbursement	DC	20005					
Bank Service Charge				C			
Candidate Name			Category/	Transaction ID : SB21B.10650 Amount of Each Disbursement this Period			
			Type				
	ment For:			27.93			
Senate President	Primary Other (spec	General					
State: District:	Office (Spec	''y <i>)</i> ▼		Memo Item			
Full Name (Last, First, Middle Initial)							
В.				Date of Disbursement			
				M = M / D = D / Y = Y = Y			
Mailing Address							
City	State	Zip Code		FEC Identification Number			
Purpose of Disbursement	C						
·	O , , , , , , , ,						
Candidate Name	Amount of Each Disbursement this Period						
Office Cought	Туре						
Office Sought: House Disburse Senate	nent For: Primary General			4 4			
President	Other (specify)			T			
State: District:		Memo Item					
Full Name (Last, First, Middle Initial)							
C.				Date of Disbursement			
Mailing Address				M M / D D / Y Y Y Y			
City	State	Zip Code		FEC Identification Number			
Purpose of Disbursement	С						
Candidate Name	Amount of Each Disbursement this Period						
Office Sought: House Disburse	ment For:		Type				
Senate Primary General							
President Other (specify) ▼				Memo Item			
State: District:							
SUBTOTAL of Disbursements This Page (optional).				27.93			
COLIGINE OF BISBURGOTHORIS THIS Tage (optional).							
TOTAL This Period (last page this line number only	·)			27.93			

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 8 OF 9		
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(Clieck Offin			
	Detailed Summary Page	21b 28a	22 x 23 26 27 28b 28c 29 30b		
Any information copied from such Reports and Statem	ents may not be sold or us				
or for commercial purposes, other than using the nam					
NAME OF COMMITTEE (In Full)					
Career Education Colleges and Uni	iversities Political A	ction Comr	mittee		
/ Full Name (Last, First, Middle Initial)					
A. ANTHONY BROWN FOR CONGRI	ESS		Date of Disbursement		
			M M / D D / Y Y Y Y		
Mailing Address 12138 CENTRAL AVE #671			10 20 2020		
City	State Zip Code				
-	MD 20721		FEC Identification Number		
Purpose of Disbursement General Election Contribution			С Н6МD04209		
Candidate Name			Transaction ID : SB23.10630		
BROWN, ANTHONY, , ,		Category/ Type	Amount of Each Disbursement this Period		
	nent For: 2020	Турс	500.00		
Senate	Primary X General				
	Other (specify) ▼		Memo Item		
State: MD District: 04 Full Name (Last, First, Middle Initial)					
B. ANTHONY BROWN FOR CONGR	FSS		Date of Disbursement		
			M = M / D = D / Y = Y = Y		
Mailing Address 12138 CENTRAL AVE #671	10 20 2020				
City	State Zip Code				
•	MD 20721		FEC Identification Number		
Purpose of Disbursement General Election Contribution	С н6мD04209				
Candidate Name			Transaction ID : SB23.10637		
BROWN, ANTHONY, , ,		Category/ Type	Amount of Each Disbursement this Period		
	nent For: 2020	.) -	1000.00		
	Primary x General				
State: MD District: 04	Other (specify)		Memo Item		
Full Name (Last, First, Middle Initial)			_		
C. COLLINS FOR SENATOR			Date of Disbursement		
			M M / D D / Y Y Y Y		
Mailing Address PO BOX 1096			10 20 2020		
City	State Zip Code		FEC Identification Number		
2,110011	ME 04402				
Purpose of Disbursement General Election Contribution			C S6ME00159		
Candidate Name		Catagony	Transaction ID: SB23.10627 Amount of Each Disbursement this Period		
COLLINS, SUSAN M., , ,		Category/ Type	Amount of Each Disbursement this Fellou		
\vdash	nent For: 2020 Primary 🗶 General		1000.00		
State: ME District: 00	Other (specify) ▼		Memo Item		
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SUBTOTAL of Disbursements This Page (optional)		·····•	2500.00		
TOTAL This Period (last page this line number only).					

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Use separate schedule(s) for each category of the Detailed Summary Page State Primary Page Page Primary Page Primary Page	SCHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 9 OF			
Detailed Summary Page 286 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280 280	ITEMIZED DISBURSEMENTS	for each	Use separate schedule(s) (check for each category of the		only one)		
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) Career Education Colleges and Universities Political Action Committee Full Name (Last, First, Middle Initial) A. THOM TILLIS COMMITTEE Mailing Address PO BOX 97396 City State Purpose of Disbursement Candidate Name Candidate Name City State Purpose of Disbursement Candidate Name City State Disbursement City State Purpose of Disbursement Candidate Name City State Disbursement City State Disbursement Candidate Name City State Disbursement Candidate Name City State Disbursement City State Disbursement City Amount of Each Disbursement this Period Amount of Each Disbursement this Period City Amount of Each Disbursement this Period Memo Item Memo Item Memo Item		Detailed :	Summary Page	28a	28b 28c 29 30b		
Career Education Colleges and Universities Political Action Committee Full Name (Last, First, Middle Initial) A. THOM TILLIS COMMITTEE Mailing Address PO BOX 97396 City State Zp Code NC 27624 Purpose of Disbursement General Election Contribution Candidate Name Tillis, Thom,, Office Sought: House Primary Address City State: District: Full Name (Last, First, Middle Initial) B. Mailing Address City State: District: Full Name (Last, First, Middle Initial) Candidate Name Office Sought: House President Other (specify) Office Sought: Disbursement For: Senate Primary General Other (specify) Feel Other (specify) Office Sought: District: Full Name (Last, First, Middle Initial) Candidate Name Office Sought: District: Full Name (Last, First, Middle Initial) Candidate Name Office Sought: President Other (specify) Office Sought: President Other (specify) Office Sought: Sanate Primary General Other (specify) Office Sought: Sanate Primary General Other (specify) Feel Initiation Number Category' Type Office Sought: Sanate Primary General Other (specify) Feel Condidate Name Category' Type Mamo Item State: District: State: District: Modele Initial) Category' Type Mamo Item State: Mamount of Each Disbursement this Period							
Full Name (Last, First, Middle Initial) A. THOM TILLIS COMMITTEE Mailing Address PO BOX 97396 City RALEIGH	NAME OF COMMITTEE (In Full)						
A. THOM TILLIS COMMITTEE Mailing Address PO BOX 97396 City RALEICH Purpose of Disbursement General Election Contribution Candidate Name Tillis, Thom, Office Sought: President State: NC District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Disbursement For: Senate President Category Office Sought: State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State: District: Senate President Candidate Name Category Type Category Type Category Type Amount of Each Disbursement this Period Category Type Category Type Amount of Each Disbursement this Period Category Type Category Type Amount of Each Disbursement this Period Category Type Category Type Category Type Memo Item State: District: Senate President Candidate Name Category Type Category Type Amount of Each Disbursement this Period Memo Item SubstotAL of Disbursements This Page (optional)	Career Education Colleges and Ur	niversitie	s Political A	ction Comr	mittee		
Mailing Address PO BOX 97396 City RALEICH RALEICH Purpose of Disbursement General Election Contribution Candidate Name Tillis, Thom,, Office Sought: Full Name (Last, First, Middle Initial) B. Mailing Address City Purpose of Disbursement Candidate Name Tillis, Thom, City Purpose of Disbursement Candidate Name City Purpose of Disbursement Candidate Name City Purpose of Disbursement Candidate Name City State: Senate President State: Senate President Other (specify) State City State					Data of Dishursament		
Amount of Each Disbursement this Period City State: District: Senate President Candidate Name Condidate Na	A. THOM TILLIS COMMITTEE						
RALEICH Purpose of Disbursement General Election Contribution Candidate Name Tillis, Thom,, Office Sought: House Senate Priesident State: Disbursement For: 2020 Purpose of Disbursement Category/ Type Disbursement Other (specify) ▼ State Zip Code Primary General Disbursement this Period FEC Identification Number Category/ Type Date of Disbursement FEC Identification Number Category/ Type Transaction ID: \$823.10645 Amount of Each Disbursement this Period Date of Disbursement FEC Identification Number Category/ Type FEC Identification Number Category/ Type There is the complete of Disbursement this Period FEC Identification Number Category/ Type Transaction ID: \$823.10645 Amount of Each Disbursement FEC Identification Number Category/ Type There is the complete of Disbursement this Period There is the complete of Disbursement Category/ Type Transaction ID: \$823.10645 Amount of Each Disbursement Category/ Type Transaction ID: \$823.10645 Amount of Each Disbursement Category/ Type Transaction ID: \$823.10645 Amount of Each Disbursement this Period FEC Identification Number Category/ Type Transaction ID: \$823.10645 Amount of Each Disbursement this Period There is the complete of Disburse	Mailing Address PO BOX 97396						
Purpose of Disbursement General Election Contribution Candidate Name Tillis, Thorn, Office Sought:	•				FEC Identification Number		
General Election Contribution Candidate Name Tillis, Thom, , Office Sought:		NC	27624				
Candidate Name Tillis, Thom, , Office Sought:	•						
Tillis, Thom, , , Office Sought:				Category/			
Senate President Other (specify) ▼ State: NC District: Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Office Sought: House President Other (specify) State: District: Full Name (Last, First, Middle Initial) Date of Disbursement Category/ Amount of Each Disbursement this Period Office Sought: Other (specify) Memo Item Date of Disbursement this Period FEC Identification Number Category/ Type Office Sought: Other (specify) Memo Item State: District: Category/ Type Office Sought: House Disbursement For: Category/ Type Office Sought: House Disbursement For: Category/ Type Office Sought: House Disbursement For: Category/ Type Office Sought: House President Disbursement For: Category/ Type Office Sought: House President Disbursement For: Memo Item State: District: Memo Item Subtotal of Disbursement this Period Type Office Sought: House President Disbursement For: Memo Item Subtotal of Disbursements This Page (optional)							
State: NC District: Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Candidate Name Disbursement For: Senate President State: District: Full Name (Last, First, Middle Initial) Candidate Name Candidate Name Category/ Type		1			1000.00		
State: NC District: Full Name (Last, First, Middle Initial) B. Mailing Address City		_					
Mailing Address City State Zip Code FEC Identification Number Candidate Name Candidate Name Disbursement For: Senate President Primary General Other (specify) Ct. Mailing Address City State Zip Code Full Name (Last, First, Middle Initial) Ct. Mailing Address City State Zip Code Purpose of Disbursement For: Category/ Type Category/ Type Category/ Type Category/ Type Category/ Type Category/ Category/ Type Condidate Name Candidate Name Candidate Name City State Zip Code Primary General Category/ Category/ Type Cher (specify) Memo Item State: Disbursement For: Senate Primary General Other (specify) Memo Item Substract Substract Substract Substract Amount of Each Disbursement this Period Memo Item		Other (spec	∑iiy) ▼		Memo Item		
Mailing Address City	Full Name (Last, First, Middle Initial)						
City Purpose of Disbursement Candidate Name Category/ Office Sought: House Senate Primary General Other (specify) FEC Identification Number Category/ Type Memo Item Date of Disbursement City Purpose of Disbursement City State City State City State City State Disbursement Candidate Name City Purpose of Disbursement Candidate Name City Date of Disbursement Category/ Type FEC Identification Number Category/ Type FEC Identification Number Category/ Type Memo Item State: District: Memo Item Substrate: District: Memo Item Substrate: Disbursements This Page (optional)	B.				Date of Disbursement		
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Purpose of Disbursement Candidate Name Category/ Office Sought:	Mailing Address						
Candidate Name Category/ Type	City	State	Zip Code		FEC Identification Number		
Candidate Name Office Sought: House Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) City State Zip Code FEC Identification Number Candidate Name Category/ Type Date of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) Office Sought: House Senate Primary General Other (specify) State: District: Memo Item Substitute President State: District: Memo Item Substitute Primary General Other (specify) Memo Item Substitute District: Memo Item Substitute Disbursements This Page (optional) Memo Item	Purpose of Disbursement	C					
Office Sought: House Senate President State: District: Date of Disbursement For: Mailing Address Disbursement For: Date of Disbursement Date of D							
Office Sought:	Candidate Name	Amount of Each Disbursement this Period					
Senate Primary General Other (specify) State: District: C. Full Name (Last, First, Middle Initial) City State Zip Code Purpose of Disbursement Candidate Name Office Sought: House Primary General Other (specify) Senate Primary General Memo Item Date of Disbursement Category/ Type Office Sought: House Primary General Other (specify) Senate Primary General Other (specify) State: District: SUBTOTAL of Disbursements This Page (optional)				Туре			
State: District: Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Candidate Name Office Sought: House Senate President State: District: Memo Item Date of Disbursement FEC Identification Number Category/ Type Amount of Each Disbursement this Period Memo Item Substrotal of Disbursements This Page (optional)			General		<u> </u>		
State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City Purpose of Disbursement Candidate Name Category/ Office Sought: House Senate Primary General President State: District: Substotal of Disbursements This Page (optional)	President	Other (spec	cify)		Memo Item		
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Mailing Address City State Zip Code FEC Identification Number Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General President Other (specify) ▼ State: District: Subtrotal of Disbursements This Page (optional)	, , , , , , , , , , , , , , , , , , , ,				Date of Dishursement		
City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General President State: District: Subtrotal of Disbursements This Page (optional)	.						
Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General President Other (specify) ▼ Subtrotal of Disbursements This Page (optional)	Mailing Address						
Candidate Name Category/ Type Office Sought: House Senate Primary General President Other (specify) ▼ State: District: Memo Item Substruction Total President State: Disbursements This Page (optional)	City	State	Zip Code		FEC Identification Number		
Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ State: District: Substruct: Memo Item 1000.00	Purpose of Disbursement	C					
Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District: Substruct: Memo Item							
State: District: Primary General Other (specify) ▼ Memo Item SUBTOTAL of Disbursements This Page (optional)	Candidate Name				Amount of Each Disbursement this Period		
State: District: Other (specify) ▼ Memo Item SUBTOTAL of Disbursements This Page (optional)		1					
State: District: Memo Item SUBTOTAL of Disbursements This Page (optional)		,			_		
SUBTOTAL of Disbursements This Page (optional)					Memo Item		
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3500.00	SUBTOTAL of Disbursements This Page (optional).				1000.00		
					3500.00		