



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**EDPAC**

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="2018"/>	<input type="text" value="39723.88"/>	<input type="text" value="39723.88"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="15765.01"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="59000.00"/>	<input type="text" value="81500.00"/>
(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="74765.01"/>	<input type="text" value="121223.88"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="46007.58"/>	<input type="text" value="92466.45"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="28757.43"/>	<input type="text" value="28757.43"/>
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

**EDPAC**

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).....	10000.00	10000.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	10000.00	10000.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	49000.00	71500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	59000.00	81500.00
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)).....▶	59000.00	81500.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	59000.00	81500.00

**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 .....	7007.58	11966.45
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	7007.58	11966.45
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	37000.00	78500.00
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).....	2000.00	2000.00
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)) ..	46007.58	92466.45
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	46007.58	92466.45

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

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) .....	59000.00	81500.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	59000.00	81500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	7007.58	11966.45
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	7007.58	11966.45



**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 28  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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

NAME OF COMMITTEE (In Full)  
**EDPAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
CUNA MUTUAL HOLDING COMPANY POLITICAL ACTION COMMITTEE (CUNA MUTUAL PAC)

Mailing Address 5910 MINERAL POINT RD, PO BOX 747  
MAIL STOP 5910 4 A2

City MADISON State WI Zip Code 53701

FEC ID number of contributing federal political committee. **C** C00402107

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2018

**Transaction ID : SA11C.5847**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
ERNST & YOUNG POLITICAL ACTION COMMITTEE

Mailing Address 1101 NEW YORK AVENUE, NW

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00227744

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  
 05 / 29 / 2018

**Transaction ID : SA11C.5848**

Amount of Each Receipt this Period  
5000.00

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
FAA MANAGERS ASSOCIATION INC. PAC

Mailing Address 1015 ATLANTIC BLVD.  
SUITE 245

City ATLANTIC BEACH State FL Zip Code 32233

FEC ID number of contributing federal political committee. **C** C00366070

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 31 / 2018

**Transaction ID : SA11C.5853**

Amount of Each Receipt this Period  
1000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 7000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 28
<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)  
**EDPAC**

**A. FMR LLC POLITICAL ACTION COMMITTEE - FEDERAL (FIDELITY PAC)**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 200 SEAPORT BOULEVARD, V9B  
 City BOSTON State MA Zip Code 02210  
 FEC ID number of contributing federal political committee. **C** C00380550  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **05 / 10 / 2018**  
**Transaction ID : SA11C.5845**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. INTERNATIONAL ASSOCIATION OF FIREFIGHTERS INTERESTED IN REGISTRATION AND EDUCATION PAC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1750 NEW YORK AVENUE, NW  
 City WASHINGTON State DC Zip Code 20006  
 FEC ID number of contributing federal political committee. **C** C00029447  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **05 / 29 / 2018**  
**Transaction ID : SA11C.5846**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**C. INVESTMENT COMPANY INSTITUTE POLITICAL ACTION COMMITTEE (ICI PAC)**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1401 H STREET NW SUITE 1200  
 City WASHINGTON State DC Zip Code 20005  
 FEC ID number of contributing federal political committee. **C** C00105981  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **06 / 28 / 2018**  
**Transaction ID : SA11C.5856**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	11000.00
<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 28
<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)  
**EDPAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**MASSACHUSETTS MUTUAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address **1295 STATE STREET**

City <b>SPRINGFIELD</b>	State <b>MA</b>	Zip Code <b>01111</b>
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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 ▼  
**2500.00**

Date of Receipt  
**05 / 31 / 2018**

**Transaction ID : SA11C.5855**

Amount of Each Receipt this Period  
**2500.00**

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**MORTGAGE BANKERS ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address **1717 RHODE ISLAND AVE NW  
SUITE 400**

City <b>WASHINGTON</b>	State <b>DC</b>	Zip Code <b>20036</b>
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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 ▼  
**1000.00**

Date of Receipt  
**05 / 29 / 2018**

**Transaction ID : SA11C.5849**

Amount of Each Receipt this Period  
**1000.00**

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**NATIONAL ASSOCIATION OF REAL ESTATE INVESTMENT TRUSTS, INC. POLITICAL ACTION COMMITTEE**

Mailing Address **1875 I STREET, NW  
SUITE 600**

City <b>WASHINGTON</b>	State <b>DC</b>	Zip Code <b>20006</b>
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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 ▼  
**2500.00**

Date of Receipt  
**06 / 28 / 2018**

**Transaction ID : SA11C.5857**

Amount of Each Receipt this Period  
**2500.00**

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>6000.00</b>
<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 10 OF 28
<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)  
**EDPAC**

**A. NATIONAL MULTI HOUSING COUNCIL POLITICAL ACTION COMMITTEE**

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

Mailing Address 1850 M STREET, NW  
SUITE 540

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00130773

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
05 / 29 / 2018

**Transaction ID : SA11C.5851**

Amount of Each Receipt this Period  
2500.00

Memo Item

**B. NELNET INC PAC (NELNET PAC)**

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

Mailing Address 1050 CONNECTICUT AVENUE, NW  
10TH FLOOR

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00370015

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
05 / 29 / 2018

**Transaction ID : SA11C.5850**

Amount of Each Receipt this Period  
5000.00

Memo Item

**C. RAYTHEON COMPANY POLITICAL ACTION COMMITTEE**

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

Mailing Address 1100 Wilson Blvd  
Suite 1500

City Arlington State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00097568

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
04 / 26 / 2018

**Transaction ID : SA11C.5843**

Amount of Each Receipt this Period  
5000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	12500.00
<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 11 OF 28
<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)  
**EDPAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
SHEET METAL WORKER'S INTERNATIONAL ASSOCIATION POLITICAL ACTION LEAGUE PAL

Mailing Address 1750 NEW YORK AVE NW

City WASHINGTON	State DC	Zip Code 20006
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FEC ID number of contributing federal political committee. **C** C70001136

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
04		26		2018

**Transaction ID : SA11C.5844**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
UBS AMERICAS INC. POLITICAL ACTION COMMITTEE (UBS PAC)

Mailing Address 400 ATLANTIC STREET  
C/O PER DYRVIK

City STAMFORD	State CT	Zip Code 06901
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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 ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		29		2018

**Transaction ID : SA11C.5852**

Amount of Each Receipt this Period  
5000.00

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
UNITED SERVICES AUTOMOBILE ASSOCIATION EMPLOYEE PAC - USAA EMPLOYEE PAC

Mailing Address 9800 FREDERICKSBURG ROAD

City SAN ANTONIO	State TX	Zip Code 78288
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FEC ID number of contributing federal political committee. **C** C00164145

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		28		2018

**Transaction ID : SA11C.5858**

Amount of Each Receipt this Period  
2500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	12500.00
<b>TOTAL</b> This Period (last page this line number only).....	49000.00

**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)  
**EDPAC**

Full Name (Last, First, Middle Initial) <b>A. Angerholzer Broz Consulting</b>			Date of Disbursement MM / DD / YYYY 04 / 10 / 2018	
Mailing Address 499 S. Capitol St. SW Suite 422			FEC Identification Number C [ ] <b>Transaction ID : SB21B.5828</b>	
City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period [ ] 1250.00	
Purpose of Disbursement Fundraising and Consulting Fee		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>B. Angerholzer Broz Consulting</b>			Date of Disbursement MM / DD / YYYY 04 / 10 / 2018	
Mailing Address 499 S. Capitol St. SW Suite 422			FEC Identification Number C [ ] <b>Transaction ID : SB21B.5831</b>	
City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period [ ] 3.29	
Purpose of Disbursement Postage		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. Angerholzer Broz Consulting</b>			Date of Disbursement MM / DD / YYYY 04 / 10 / 2018	
Mailing Address 499 S. Capitol St. SW Suite 422			FEC Identification Number C [ ] <b>Transaction ID : SB21B.5834</b>	
City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period [ ] 279.00	
Purpose of Disbursement Travel Expense		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).....▶	[ ] 1532.29
<b>TOTAL</b> 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)  
**EDPAC**

Full Name (Last, First, Middle Initial) <b>A. Angerholzer Broz Consulting</b>		Date of Disbursement MM / DD / YYYY 04 / 10 / 2018
Mailing Address 499 S. Capitol St. SW Suite 422		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5835</b> Amount of Each Disbursement this Period [ ] 235.30
City Washington	State DC	Zip Code 20003
Purpose of Disbursement Travel Expense		Category/ Type [ ]
Candidate Name		
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>B. Angerholzer Broz Consulting</b>		Date of Disbursement MM / DD / YYYY 04 / 10 / 2018
Mailing Address 499 S. Capitol St. SW Suite 422		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5836</b> Amount of Each Disbursement this Period [ ] 49.00
City Washington	State DC	Zip Code 20003
Purpose of Disbursement Travel Expense		Category/ Type [ ]
Candidate Name		
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. Angerholzer Broz Consulting</b>		Date of Disbursement MM / DD / YYYY 04 / 10 / 2018
Mailing Address 499 S. Capitol St. SW Suite 422		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5837</b> Amount of Each Disbursement this Period [ ] 45.00
City Washington	State DC	Zip Code 20003
Purpose of Disbursement Travel Expense		Category/ Type [ ]
Candidate Name		
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).....▶	[ ] 329.30
<b>TOTAL</b> 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)  
**EDPAC**

Full Name (Last, First, Middle Initial) <b>A. Angerholzer Broz Consulting</b>		Date of Disbursement MM / DD / YYYY 05 / 15 / 2018	
Mailing Address 499 S. Capitol St. SW Suite 422		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.5829</b> Amount of Each Disbursement this Period 1250.00	
City Washington	State DC	Zip Code 20003	Category/ Type
Purpose of Disbursement		Memo Item <input type="checkbox"/>	
Candidate Name			
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:			

Full Name (Last, First, Middle Initial) <b>B. Angerholzer Broz Consulting</b>		Date of Disbursement MM / DD / YYYY 06 / 21 / 2018	
Mailing Address 499 S. Capitol St. SW Suite 422		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.5826</b> Amount of Each Disbursement this Period 975.00	
City Washington	State DC	Zip Code 20003	Category/ Type
Purpose of Disbursement Event Catering		Memo Item <input type="checkbox"/>	
Candidate Name			
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:			

Full Name (Last, First, Middle Initial) <b>C. Angerholzer Broz Consulting</b>		Date of Disbursement MM / DD / YYYY 06 / 21 / 2018	
Mailing Address 499 S. Capitol St. SW Suite 422		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.5830</b> Amount of Each Disbursement this Period 1250.00	
City Washington	State DC	Zip Code 20003	Category/ Type
Purpose of Disbursement Fundraising and Consulting Fees		Memo Item <input type="checkbox"/>	
Candidate Name			
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:			

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

3475.00

**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 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)  
**EDPAC**

Full Name (Last, First, Middle Initial) <b>A. Angerholzer Broz Consulting</b>		Date of Disbursement MM / DD / YYYY 06 / 21 / 2018	
Mailing Address 499 S. Capitol St. SW Suite 422		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5832</b> Amount of Each Disbursement this Period [ ] 6.55	
City Washington	State DC	Zip Code 20003	Category/ Type [ ]
Purpose of Disbursement Postage			
Candidate Name		Memo Item <input type="checkbox"/>	
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:			

Full Name (Last, First, Middle Initial) <b>B. Angerholzer Broz Consulting</b>		Date of Disbursement MM / DD / YYYY 06 / 21 / 2018	
Mailing Address 499 S. Capitol St. SW Suite 422		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5833</b> Amount of Each Disbursement this Period [ ] 1.41	
City Washington	State DC	Zip Code 20003	Category/ Type [ ]
Purpose of Disbursement Postage			
Candidate Name		Memo Item <input type="checkbox"/>	
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:			

Full Name (Last, First, Middle Initial) <b>C. Angerholzer Broz Consulting</b>		Date of Disbursement MM / DD / YYYY 06 / 21 / 2018	
Mailing Address 499 S. Capitol St. SW Suite 422		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5838</b> Amount of Each Disbursement this Period [ ] 5.91	
City Washington	State DC	Zip Code 20003	Category/ Type [ ]
Purpose of Disbursement Travel Expense			
Candidate Name		Memo Item <input type="checkbox"/>	
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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 13.87
<b>TOTAL</b> 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)  
**EDPAC**

Full Name (Last, First, Middle Initial) <b>A. Perlmutter, Ed, , ,</b>		Date of Disbursement MM / DD / YYYY 05 / 29 / 2018	
Mailing Address 499 South Capitol Street, SW Suite 422		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5840</b> Amount of Each Disbursement this Period [ ] 389.56	
City Washington	State DC	Zip Code 20003	Category/ Type [ ]
Purpose of Disbursement Travel Reimbursement		Candidate Name	
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>B. Perlmutter, Ed, , ,</b>		Date of Disbursement MM / DD / YYYY 05 / 31 / 2018	
Mailing Address 499 South Capitol Street, SW Suite 422		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5842</b> Amount of Each Disbursement this Period [ ] 1258.56	
City Washington	State DC	Zip Code 20003	Category/ Type [ ]
Purpose of Disbursement Travel Reimbursement		Candidate Name	
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 [ ] Amount of Each Disbursement this Period [ ]	
City	State	Zip Code	Category/ Type [ ]
Purpose of Disbursement		Candidate Name	
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		

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

[ ] 1648.12

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

[ ] 6998.58



**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)  
**EDPAC**

Full Name (Last, First, Middle Initial) <b>A. AFTAB FOR OHIO</b>		Date of Disbursement MM / DD / YYYY 06 / 28 / 2018
Mailing Address PO BOX 713		FEC Identification Number C 00667519 <b>Transaction ID : SB23.5778</b>
City CINCINNATI	State OH	Zip Code 45201
Purpose of Disbursement Political Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name <b>PUREVAL, AFTAB, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH	District: 01	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. ANGIE CRAIG FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 06 / 28 / 2018
Mailing Address PO BOX 22116		FEC Identification Number C H6MN02131 <b>Transaction ID : SB23.5803</b>
City EAGAN	State MN	Zip Code 55122
Purpose of Disbursement Political Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name <b>CRAIG, ANGELA DAWN, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MN	District: 02	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. BRAD ASHFORD FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2018
Mailing Address PO BOX 24023		FEC Identification Number C C00557181 <b>Transaction ID : SB23.5741</b>
City OMAHA	State NE	Zip Code 68124
Purpose of Disbursement Political Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name <b>ASHFORD, BRAD, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NE	District: 02	<input type="checkbox"/> Memo Item

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

3000.00

**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)  
**EDPAC**

Full Name (Last, First, Middle Initial) <b>A. BRENDAN KELLY FOR SOUTHERN ILLINOIS</b>		Date of Disbursement MM / DD / YYYY 06 / 28 / 2018
Mailing Address PO BOX 736		FEC Identification Number C 000649558 <b>Transaction ID : SB23.5802</b>
City BELLEVILLE	State IL	Zip Code 62222
Purpose of Disbursement Political Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name <b>KELLY, BRENDAN, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: IL	District: 12	

Full Name (Last, First, Middle Initial) <b>B. CAPUANO FOR CONGRESS COMMITTEE</b>		Date of Disbursement MM / DD / YYYY 04 / 26 / 2018
Mailing Address PO BOX 440305		FEC Identification Number C 000336388 <b>Transaction ID : SB23.5746</b>
City SOMERVILLE	State MA	Zip Code 02144
Purpose of Disbursement Political Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name <b>CAPUANO, MICHAEL E, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item
State: MA	District: 07	

Full Name (Last, First, Middle Initial) <b>C. CAPUANO FOR CONGRESS COMMITTEE</b>		Date of Disbursement MM / DD / YYYY 06 / 28 / 2018
Mailing Address PO BOX 440305		FEC Identification Number C 000336388 <b>Transaction ID : SB23.5816</b>
City SOMERVILLE	State MA	Zip Code 02144
Purpose of Disbursement Political Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name <b>CAPUANO, MICHAEL E, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: MA	District: 07	

**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)  
**EDPAC**

**A. CASTEN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address 928 WARREN AVE.

City DOWNERS GROVE State IL Zip Code 60515

Purpose of Disbursement  
Political Contribution

Candidate Name  
**CASTEN, SEAN, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼  
State: IL District: 06

Date of Disbursement

MM / DD / YYYY  
06 / 14 / 2018

FEC Identification Number

**C** C00648493

**Transaction ID : SB23.5774**

Amount of Each Disbursement this Period

1000.00

Memo Item

**B. CHARLIE CRIST FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1547

City ST. PETERSBURG State FL Zip Code 33731

Purpose of Disbursement  
Political Contribution

Candidate Name  
**CRIST, CHARLIE JOSEPH, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼  
State: FL District: 13

Date of Disbursement

MM / DD / YYYY  
06 / 28 / 2018

FEC Identification Number

**C** C00590067

**Transaction ID : SB23.5794**

Amount of Each Disbursement this Period

1000.00

Memo Item

**C. CONOR LAMB FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 10381

City PITTSBURGH State PA Zip Code 15234

Purpose of Disbursement  
Political Contribution

Candidate Name  
**LAMB, CONOR, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼  
State: PA District: 17

Date of Disbursement

MM / DD / YYYY  
06 / 28 / 2018

FEC Identification Number

**C** C00657411

**Transaction ID : SB23.5809**

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)  
**EDPAC**

**A. DARREN SOTO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address P.O. BOX 420239

M M M	/	D D D	/	Y Y Y Y Y
06		28		2018

City KISSIMMEE State FL Zip Code 34742

FEC Identification Number

Purpose of Disbursement  
Political Contribution

C	C00581074
---	-----------

Candidate Name  
**SOTO, DARREN, , ,**

Category/  
Type

**Transaction ID : SB23.5781**

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President  
State: FL District: 09

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

1000.00
---------

Memo Item

**B. DONNELLY FOR INDIANA**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1050 17TH ST NW STE 590

M M M	/	D D D	/	Y Y Y Y Y
06		28		2018

City WASHINGTON State DC Zip Code 20036

FEC Identification Number

Purpose of Disbursement  
Political Contribution

C	C00393652
---	-----------

Candidate Name  
**DONNELLY, JOSEPH S, , ,**

Category/  
Type

**Transaction ID : SB23.5813**

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President  
State: IN District: 00

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

2000.00
---------

Memo Item

**C. EGGMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 3220 WEST MONTE VISTA BOULEVARD  
#169

M M M	/	D D D	/	Y Y Y Y Y
05		08		2018

City TURLOCK State CA Zip Code 95380

FEC Identification Number

Purpose of Disbursement  
Political Contribution

C	C00543843
---	-----------

Candidate Name  
**EGGMAN, MICHAEL RAY, , ,**

Category/  
Type

**Transaction ID : SB23.5747**

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President  
State: CA District: 10

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

1000.00
---------

Memo Item

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

4000.00
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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)  
**EDPAC**

**A. FINKENAUER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address P.O. BOX 598

M M M	/	D D D	/	Y Y Y Y Y
06		28		2018

City DUBUQUE State IA Zip Code 52004

FEC Identification Number

Purpose of Disbursement  
Political Contribution

C	C00637074
---	-----------

Candidate Name  
**FINKENAUER, ABBY, , ,**

Category/  
Type

**Transaction ID : SB23.5788**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼  
State: IA District: 01

1000.00
---------

Memo Item

**B. FRIENDS OF DAN FEEHAN**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 1844

M M M	/	D D D	/	Y Y Y Y Y
06		28		2018

City NORTH MANKATO State MN Zip Code 56002

FEC Identification Number

Purpose of Disbursement  
Political Contribution

C	C00649327
---	-----------

Candidate Name  
**FEEHAN, DANIEL, , ,**

Category/  
Type

**Transaction ID : SB23.5782**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼  
State: MN District: 01

1000.00
---------

Memo Item

**C. GALLEGO FOR ARIZONA**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 1710

M M M	/	D D D	/	Y Y Y Y Y
06		28		2018

City PHOENIX State AZ Zip Code 85001

FEC Identification Number

Purpose of Disbursement  
Political Contribution

C	C00558627
---	-----------

Candidate Name  
**GALLEGO, PETE, , ,**

Category/  
Type

**Transaction ID : SB23.5814**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼  
State: TX District: 23

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)  
**EDPAC**

**A. GINA ORTIZ JONES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 769186

City SAN ANTONIO State TX Zip Code 78245

Purpose of Disbursement  
Political Contribution

Candidate Name  
**GINA ORTIZ JONES FOR CONGRESS**

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼

State: TX District: 23

Date of Disbursement

MM / DD / YYYY  
06 / 28 / 2018

FEC Identification Number

**C** C00652297

**Transaction ID : SB23.5785**

Amount of Each Disbursement this Period

1000.00

Memo Item

**B. HARLEY ROUDA FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address 120 NEWPORT CENTER DR  
OFFICE 28

City NEWPORT BEACH State CA Zip Code 92660

Purpose of Disbursement  
Political Contribution

Candidate Name  
**ROUDA, HARLEY E JR, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify)

State: CA District: 48

Date of Disbursement

MM / DD / YYYY  
06 / 04 / 2018

FEC Identification Number

**C** C00633982

**Transaction ID : SB23.5751**

Amount of Each Disbursement this Period

1000.00

Memo Item

**C. JASON CROW FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 32145

City AURORA State CO Zip Code 80041

Purpose of Disbursement  
Political Contribution

Candidate Name  
**CROW, JASON, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼

State: CO District: 06

Date of Disbursement

MM / DD / YYYY  
05 / 31 / 2018

FEC Identification Number

**C** C00637363

**Transaction ID : SB23.5750**

Amount of Each Disbursement this Period

2000.00

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)  
**EDPAC**

**A. JOE NEGUSE FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 7142

M M M	/	D D D	/	Y Y Y Y Y
06		21		2018

City BOULDER State CO Zip Code 80306

FEC Identification Number

Purpose of Disbursement  
Political Contribution

C	C00648253
---	-----------

Candidate Name  
**NEGUSE, JOSEPH, , ,**

Category/  
Type

**Transaction ID : SB23.5777**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
State: CO District: 02

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

2000.00
---------

Memo Item

**B. JOSH HARDER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 4426

M M M	/	D D D	/	Y Y Y Y Y
06		12		2018

City MODESTO State CA Zip Code 95352

FEC Identification Number

Purpose of Disbursement  
Political Contribution

C	C00639146
---	-----------

Candidate Name  
**HARDER, JOSH, , ,**

Category/  
Type

**Transaction ID : SB23.5759**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
State: CA District: 10

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

1000.00
---------

Memo Item

**C. KATHY MANNING FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 41197

M M M	/	D D D	/	Y Y Y Y Y
06		28		2018

City GREENSBORO State NC Zip Code 27404

FEC Identification Number

Purpose of Disbursement  
Political Contribution

C	C00662577
---	-----------

Candidate Name  
**MANNING, KATHY, , ,**

Category/  
Type

**Transaction ID : SB23.5807**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
State: NC District: 13

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

1000.00
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Memo Item

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

4000.00
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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)  
**EDPAC**

Full Name (Last, First, Middle Initial) <b>A. KATIE HILL FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 06 / 12 / 2018	
Mailing Address 6681 SWEETCLOVER LANE			
City CARLSBAD	State CA	Zip Code 92011	
Purpose of Disbursement Political Contributions		FEC Identification Number C00634212 <b>Transaction ID : SB23.5764</b>	
Candidate Name HILL, KATHERINE LAUREN, , ,		Amount of Each Disbursement this Period 1000.00	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA District: 25	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>B. KATIE PORTER FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 06 / 12 / 2018	
Mailing Address 777 S. FIGUEROA ST., SUITE 4050			
City LOS ANGELES	State CA	Zip Code 90017	
Purpose of Disbursement Political Contribution		FEC Identification Number C00636571 <b>Transaction ID : SB23.5771</b>	
Candidate Name PORTER, KATHERINE, , ,		Amount of Each Disbursement this Period 1000.00	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA District: 45	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>C. KIRKPATRICK FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 06 / 28 / 2018	
Mailing Address PO BOX 3015			
City TUCSON	State AZ	Zip Code 85702	
Purpose of Disbursement Political Contribution		FEC Identification Number C00651042 <b>Transaction ID : SB23.5789</b>	
Candidate Name KIRKPATRICK, ANN, , ,		Amount of Each Disbursement this Period 1000.00	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: AZ District: 02	<input type="checkbox"/> 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)  
**EDPAC**

**A. LISA BROWN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 154

City SPOKANE State WA Zip Code 99210

Purpose of Disbursement  
Political Contribution

Candidate Name  
**BROWN, LISA, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼  
State: WA District: 05

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
05 / 03 / 2018

FEC Identification Number

**C** C00654400

**Transaction ID : SB23.5742**

Amount of Each Disbursement this Period

1000.00

Memo Item

**B. MCCREADY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 78855

City CHARLOTTE State NC Zip Code 28277

Purpose of Disbursement  
Political Contribution

Candidate Name  
**MCCREADY, DANIEL, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼  
State: NC District: 09

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 28 / 2018

FEC Identification Number

**C** C00641381

**Transaction ID : SB23.5804**

Amount of Each Disbursement this Period

1000.00

Memo Item

**C. MIKE LEVIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address 555 CAPITOL MALL, SUITE 400

City SACRAMENTO State CA Zip Code 95814

Purpose of Disbursement  
Political Contribution

Candidate Name  
**LEVIN, MIKE, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼  
State: CA District: 49

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 12 / 2018

FEC Identification Number

**C** C00634253

**Transaction ID : SB23.5768**

Amount of Each Disbursement this Period

1000.00

Memo Item

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

3000.00

**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)  
**EDPAC**

Full Name (Last, First, Middle Initial) <b>A. PAUL DAVIS FOR KANSAS</b>		Date of Disbursement MM / DD / YYYY 06 / 28 / 2018
Mailing Address PO BOX 944		FEC Identification Number <b>C</b> C00653121 <b>Transaction ID : SB23.5801</b> Amount of Each Disbursement this Period 1000.00
City LAWRENCE	State KS	
Zip Code 66044	Purpose of Disbursement Political Contribution	Category/ Type
Candidate Name <b>DAVIS, PAUL T, , ,</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: KS District: 02	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. ROSEN FOR NEVADA</b>		Date of Disbursement MM / DD / YYYY 06 / 28 / 2018
Mailing Address PO BOX 27195		FEC Identification Number <b>C</b> C00606939 <b>Transaction ID : SB23.5790</b> Amount of Each Disbursement this Period 2000.00
City LAS VEGAS	State NV	
Zip Code 89126	Purpose of Disbursement Political Contribution	Category/ Type
Candidate Name <b>ROSEN, JACKY, , ,</b>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NV District: 00	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. STEPHANIE MURPHY FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 06 / 28 / 2018
Mailing Address PO BOX 205		FEC Identification Number <b>C</b> C00620443 <b>Transaction ID : SB23.5793</b> Amount of Each Disbursement this Period 1000.00
City WINTER PARK	State FL	
Zip Code 32790	Purpose of Disbursement Political Contribution	Category/ Type
Candidate Name <b>MURPHY, STEPHANIE, , ,</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: FL District: 07	<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4000.00
<b>TOTAL</b> 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)  
**EDPAC**

**A. SUSAN WILD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1636 N CEDAR CREST BLVD  
#183

M M M	/	D D D	/	Y Y Y Y Y
06		28		2018

City ALLENTOWN State PA Zip Code 18104

FEC Identification Number

Purpose of Disbursement  
Political Contribution

C	C00658567
---	-----------

Candidate Name

**WILD, SUSAN, , ,**

Category/  
Type

**Transaction ID : SB23.5797**

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President  
State: PA District: 15

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

1000.00
---------

Memo Item

**B. SUSIE LEE FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 5130 S FORT APACHE RD  
STE. 215-382

M M M	/	D D D	/	Y Y Y Y Y
06		28		2018

City LAS VEGAS State NV Zip Code 89148

FEC Identification Number

Purpose of Disbursement  
Political Contribution

C	C00655613
---	-----------

Candidate Name

**LEE, SUSIE, , ,**

Category/  
Type

**Transaction ID : SB23.5808**

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President  
State: NV District: 04

Disbursement For: 2018  
 Primary  General  
 Other (specify)

1000.00
---------

Memo Item

**C. TJ COX FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 804

M M M	/	D D D	/	Y Y Y Y Y
06		12		2018

City SELMA State CA Zip Code 93662

FEC Identification Number

Purpose of Disbursement  
Political Contribution

C	C00648956
---	-----------

Candidate Name

**TJ COX FOR CONGRESS**

Category/  
Type

**Transaction ID : SB23.5755**

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President  
State: CA District: 21

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

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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37000.00
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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 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)  
**EDPAC**

**A. Congressional Sports for Charity**

Full Name (Last, First, Middle Initial)

Mailing Address 104 Hume Avenue

City Alexandria State VA Zip Code 22301

Purpose of Disbursement Donation

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 21 / 2018

FEC Identification Number: C

Transaction ID : SB29.5819

Amount of Each Disbursement this Period: 1000.00

Memo Item

**B. Congressional Women's Softball Game, Inc**

Full Name (Last, First, Middle Initial)

Mailing Address 1514 D Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement Donation

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 14 / 2018

FEC Identification Number: C

Transaction ID : SB29.5818

Amount of Each Disbursement this Period: 1000.00

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2000.00

**TOTAL** This Period (last page this line number only)..... ▶ 2000.00