

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED FEC MAIL CENTER 2022 FEB -3 AM 10:07 Office Use Only

1 NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5

AFOGNAK NATIVE CORPORATION - ALUTIIQ PAC

ADDRESS (number and street) 3909 ARCTIC BVD.

SUITE 500 ANCHORAGE AK 99503

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C 00443937

3. IS THIS REPORT NEW OR AMENDED

4. TYPE OF REPORT (Choose One)

- (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31, Termination Report

- (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31

- (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special

Election on MM/DD/YYYY in the State of

- (d) 30-Day POST-Election Report for the: General, Runoff, Special

Election on MM/DD/YYYY in the State of

5 Covering Period 07/01/2021 through 12/31/2021

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 Amy J. Shimek

Signature of Treasurer [Handwritten Signature] Date 01/25/2022

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

NON-PROFIT CORPORATION

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

AFOGNAK NATIVE CORPORATION - ALUTIIQ 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="2021"/> | | 40,450.14 |
| (b) Cash on Hand at Beginning of Reporting Period..... | 41,400.14 | |
| (c) Total Receipts (from Line 19)..... | 900.00 | 1,850.00 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | 42,300.14 | 42,300.14 |
| 7. Total Disbursements (from Line 31)..... | 0.00 | 0.00 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | 42,300.14 | 42,300.14 |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)..... | 0 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)..... | 25.00 | |

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

For further information contact:

Federal Election Commission
1050 First Street, N.E.
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

AFOGNAK NATIVE CORPORATION - ALUTIIQ PAC

Report Covering the Period: From: **07** / **01** / **2021** To: **12** / **31** / **2021**

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)..... | 900.00 | 1,850.00 |
| (ii) Unitemized | 0 | 0 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶ | 900.00 | 1,850.00 |
| (b) Political Party Committees | 0 | 0 |
| (c) Other Political Committees (such as PACs)..... | 0 | 0 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) | 900.00 | 1,850.00 |
| 12. Transfers From Affiliated/Other Party Committees..... | 0 | 0 |
| 13. All Loans Received..... | 0 | 0 |
| 14. Loan Repayments Received..... | 0 | 0 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 0 | 0 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... | 0 | 0 |
| 17. Other Federal Receipts (Dividends, Interest, etc.)..... | 0 | 0 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3)..... | 0 | 0 |
| (b) Levin Funds (from Schedule H5)..... | 0 | 0 |
| (c) Total Transfers (add 18(a) and 18(b)).. | 0 | 0 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶ | 900.00 | 1,850.00 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶ | 900.00 | 1,850.00 |

NON-FEDERAL RECEIPTS

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 | 0 |
| (ii) Non-Federal Share..... | 0 | 0 |
| (b) Other Federal Operating Expenditures | 0 | 0 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 0 | 0 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0 | 0 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 0 | 0 |
| 24. Independent Expenditures (use Schedule E) | 0 | 0 |
| 25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)..... | 0 | 0 |
| 26. Loan Repayments Made..... | 0 | 0 |
| 27. Loans Made..... | 0 | 0 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 0 | 0 |
| (b) Political Party Committees | 0 | 0 |
| (c) Other Political Committees (such as PACs)..... | 0 | 0 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... | 0 | 0 |
| 29. Other Disbursements (Including Non-Federal Donations)..... | 0 | 0 |
| 30. Federal Election Activity (52 U.S.C. § 30101(20)) | | |
| (a) Allocated Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 0 | 0 |
| (ii) "Levin" Share..... | 0 | 0 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0 | 0 |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))..... | 0 | 0 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. | 0 | 0 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 0 | 0 |

NON-FEDERAL DISBURSEMENTS

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

| . III. Net Contributions/ Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans) (from Line 11(d), page 3) | 900.00 | 1,850.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0 | 0 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 0 | 0 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 0 | 0 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | 0 | 0 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 0 | 0 |

NONCONFIDENTIAL

**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 1 OF 1 | |
| | <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"/> 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)
AFOGNAK NATIVE CORPORATION - ALUTIIQ PAC

| | | | | | |
|---|--------------------|---|--|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Hines, Allen | | | Date of Receipt MM / DD / YYYY | | |
| Mailing Address 10101 Road 2611 | | | | | |
| City Philadelphia | State MS | Zip Code 39350 | Amount of Each Receipt this Period 300.00 | | |
| FEC ID number of contributing federal political committee. C | | | <input type="checkbox"/> Memo Item | | |
| Name of Employer (for Individual) ALUTIIQ, LLC | | Occupation (for Individual) Chief Operating Officer | *\$25 payroll deduction 7/9, 7/23, 8/10, 8/25, 9/10, 9/24, 10/8, 10/25, 11/10, 11/24, 12/10, 12/23 | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 600.00 | | | |

| | | | | | |
|---|--------------------|---|--|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Hambright, Greg | | | Date of Receipt MM / DD / YYYY | | |
| Mailing Address 4982 Cape Seville | | | | | |
| City Anchorage | State AK | Zip Code 99516 | Amount of Each Receipt this Period 600.00 | | |
| FEC ID number of contributing federal political committee. C | | | <input type="checkbox"/> Memo Item | | |
| Name of Employer (for Individual) Afognak Native Corporation | | Occupation (for Individual) President/CEO | *\$50 payroll deduction 7/9, 7/23, 8/10, 8/25, 9/10, 9/24, 10/8, 10/25, 11/10, 11/24, 12/10, 12/23 | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 1,200.00 | | | |

| | | | | | |
|---|-------|-----------------------------|------------------------------------|--|--|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. | | | Date of Receipt MM / DD / YYYY | | |
| Mailing Address | | | | | |
| City | State | Zip Code | Amount of Each Receipt this Period | | |
| FEC ID number of contributing federal political committee. C | | | <input type="checkbox"/> Memo Item | | |
| Name of Employer (for Individual) | | Occupation (for Individual) | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | Aggregate Year-to-Date ▼ | | | |

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 900.00 |
| TOTAL This Period (last page this line number only).....▶ | 900.00 |

LAWSON CONSULTING CORPORATION

SCHEDULE D (FEC Form 3X)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
 AFOGNAK NATIVE CORPORATION - ALUTIIQ PAC

| | | | |
|--|-------------|-------------------|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Drabek, Alisha | | | Nature of Debt (Purpose): Duplicate withdrawal of standard contribution. |
| Mailing Address 1522 E. Kouskov St. | | | |
| City Kodiak | State AK | Zip Code 99615 | |

| | | | |
|--|-------------------------------------|-----------------------------|--|
| Outstanding Balance Beginning This Period 25.00 | Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 25.00 |
|--|-------------------------------------|-----------------------------|--|

| | | | |
|--|-------|----------|---------------------------|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor | | | Nature of Debt (Purpose): |
| Mailing Address | | | |
| City | State | Zip Code | |

| | | | |
|---|-----------------------------|---------------------|---|
| Outstanding Balance Beginning This Period | Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
|---|-----------------------------|---------------------|---|

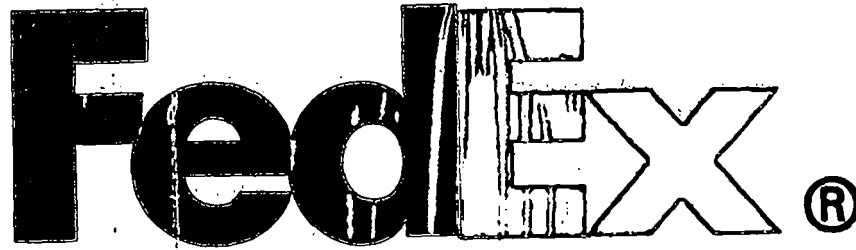
| | | | |
|--|-------|----------|---------------------------|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor | | | Nature of Debt (Purpose): |
| Mailing Address | | | |
| City | State | Zip Code | |

| | | | |
|---|-----------------------------|---------------------|---|
| Outstanding Balance Beginning This Period | Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
|---|-----------------------------|---------------------|---|

| | |
|--|-------|
| 1) SUBTOTALS This Period This Page (optional).....▶ | 25.00 |
| 2) TOTALS This Period (last page this line number only).....▶ | 25.00 |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....▶ | 0.00 |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)▶ | 25.00 |

NONDISCRIMINATION NOTICE

RECEIVED
EC MAP CENTER
22 FEB -3 AM 10:07



ORIGIN ID: CYMA (907) 762-9415
TINA FISHER

SHIP DATE: 27 JAN 22
ACTWGT: 1.00 LB
CAD: 101570928/NET4460

3909 ARCTIC BLVD., STE. 500

ANCHORAGE, AK 99503
UNITED STATES US

BILL SENDER

TO

FEDERAL ELECTION COMMISSION
1050 FIRST STREET, NE

WASHINGTON DC 20002

(800) 424-9530

REF. PAC YEAR END REPORT

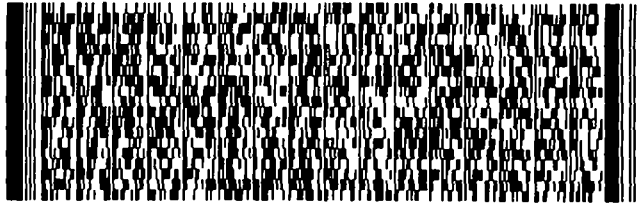
INV

DEPT

PO

56DJMF289FE4A

edEx Ship Manager - Print Your Label(s)



FedEx

TRK# 7758 9530 4139
0201

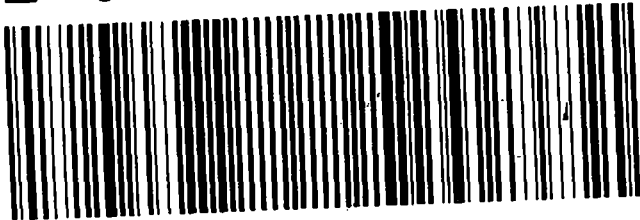
XE JPNA

MON - 31 JAN AA
STANDARD OVERNIGHT

20002
DC-US
IAD

FRI - 28 JAN 4:30P
IDARD OVERNIGHT

20002
DC-US IAD



2
16:30

4139
01.31

585857 28Jan2022 ANCA 56064/F289/1823

1/27/22, 2:25 PM

NON INFORMATION

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

| | |
|--|--|
| <input type="checkbox"/> Hand Delivered | Date of Receipt |
| <input type="checkbox"/> USPS First Class Mail | Date of Receipt |
| <input type="checkbox"/> USPS Registered/Certified | Postmarked (R/C) |
| <input type="checkbox"/> USPS Priority Mail | Postmarked |
| <input type="checkbox"/> USPS Priority Mail Express | Postmarked |
| <input type="checkbox"/> Postmark Illegible | |
| <input type="checkbox"/> No Postmark | |
| <input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>FedEx</i> | Shipping Date <i>1/27/22</i> |
| | Next Business Day Delivery <input checked="" type="checkbox"/> |
| <input type="checkbox"/> Received from House Records & Registration Office | Date of Receipt |
| <input type="checkbox"/> Received from Senate Public Records Office | Date of Receipt |
| <input type="checkbox"/> Received from Electronic Filing Office | Date of Receipt |
| <input type="checkbox"/> Other (Specify): | Date of Receipt or Postmarked |

PREPARER *SPM* DATE PREPARED *2/7/22*

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