



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

GE HealthCare Technologies Inc. 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="2024"/>	<input type="text" value="49132.41"/>	<input type="text" value="49132.41"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="62278.41"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="12552.00"/>	<input type="text" value="25698.00"/>
(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="74830.41"/>	<input type="text" value="74830.41"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="19500.00"/>	<input type="text" value="19500.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="55330.41"/>	<input type="text" value="55330.41"/>
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 the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov)**

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**GE HealthCare Technologies Inc. PAC**

Report Covering the Period: From:  /  /  To:  /  /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	7235.00	13279.00
(ii) Unitemized .....	5317.00	12003.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	12552.00	25282.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	12552.00	25282.00
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	416.00
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)).....▶	12552.00	25698.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	12552.00	25698.00

**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 .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	19500.00	19500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	19500.00	19500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	19500.00	19500.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	12552.00	25282.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	12552.00	25282.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

**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 6 OF 20
	<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)  
**GE HealthCare Technologies Inc. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Arduini, Peter, J, ,</b>		Date of Receipt
Mailing Address 500 West Monroe Street		<input type="text" value="02"/> / <input type="text" value="23"/> / <input type="text" value="2024"/>
City Chicago	State IL	Zip Code 60661
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 0FDA643A422D40669546</b>
Name of Employer (for Individual) GE Healthcare		Amount of Each Receipt this Period <input type="text" value="416.00"/>
Occupation (for Individual) President & CEO, GE Healthcare		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="832.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Biscotti, Larry, , ,</b>		Date of Receipt
Mailing Address 500 West Monroe Street		<input type="text" value="02"/> / <input type="text" value="23"/> / <input type="text" value="2024"/>
City Chicago	State IL	Zip Code 60661
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 7C22D26363A34BC5BC4B</b>
Name of Employer (for Individual) GE Healthcare		Amount of Each Receipt this Period <input type="text" value="208.00"/>
Occupation (for Individual) South Region President		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="416.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Cubbin, Renae, , ,</b>		Date of Receipt
Mailing Address 500 West Monroe Street		<input type="text" value="02"/> / <input type="text" value="23"/> / <input type="text" value="2024"/>
City Chicago	State IL	Zip Code 60661
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 34D906B2DC6D4D1484A6</b>
Name of Employer (for Individual) GE Healthcare		Amount of Each Receipt this Period <input type="text" value="200.00"/>
Occupation (for Individual) Vice President and Senior Tax Counsel		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="400.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="824.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 7 OF 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**GE HealthCare Technologies Inc. PAC**

**A. Donohoe, Michael, Patrick, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 500 West Monroe Street  
 City Chicago State IL Zip Code 60661  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Lean & Transformation Leader  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt  
 02 / 23 / 2024  
**Transaction ID : F33DD9358AC4443084EB**  
 Amount of Each Receipt this Period 208.00  
 Memo Item

**B. El-Demerdash, Mohamed, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 500 West Monroe Street  
 City Chicago State IL Zip Code 60661  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) USCAN Service Leader  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 02 / 23 / 2024  
**Transaction ID : 5E72EBEE3D1C4C169665**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

**C. Epiane-Osuala, Abigail, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 500 West Monroe Street  
 City Chicago State IL Zip Code 60661  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Diversity Equity & Inclusion Off  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 02 / 23 / 2024  
**Transaction ID : 304DA084B06B4E4FB218**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	608.00
<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 8 OF 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**GE HealthCare Technologies Inc. PAC**

**A. Gilbreath, Rachel, D, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 500 West Monroe Street  
 City Chicago State IL Zip Code 60661  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) North East Region President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt  
 02 / 23 / 2024  
**Transaction ID : 639C9410F714443EABAE**  
 Amount of Each Receipt this Period 208.00  
 Memo Item

**B. Gurney, Laila, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 500 West Monroe Street  
 City Chicago State IL Zip Code 60661  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Quality & Regulatory Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 832.00

Date of Receipt  
 02 / 23 / 2024  
**Transaction ID : 804B5E4D0E83465588FB**  
 Amount of Each Receipt this Period 416.00  
 Memo Item

**C. Halstrom, Danielle, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 500 West Monroe Street  
 City Chicago State IL Zip Code 60661  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Communications Officer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt  
 02 / 23 / 2024  
**Transaction ID : 9FB9E185BEB148D3A730**  
 Amount of Each Receipt this Period 208.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	832.00
<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 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**GE HealthCare Technologies Inc. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Hill, John, C, ,</b>		Date of Receipt MM / DD / YYYY 02 / 23 / 2024
Mailing Address 500 West Monroe Street		Transaction ID : <b>D2C92DA34ACE4E3BBBE</b>
City Chicago	State IL	
Zip Code 60661	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 220.00
Name of Employer (for Individual) GE Healthcare	Occupation (for Individual) VP, Advanced Technology	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Jendusa Orrico, Jennifer, Marie, ,</b>		Date of Receipt MM / DD / YYYY 02 / 23 / 2024
Mailing Address 500 West Monroe Street		Transaction ID : <b>1555BB67913B401F8E71</b>
City Chicago	State IL	
Zip Code 60661	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 208.00
Name of Employer (for Individual) GE Healthcare	Occupation (for Individual) Chief Compliance Officer	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 416.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Jimenez, Frank, Ruben, ,</b>		Date of Receipt MM / DD / YYYY 02 / 23 / 2024
Mailing Address 500 West Monroe Street		Transaction ID : <b>4E2B32B3E94D4F871F8</b>
City Chicago	State IL	
Zip Code 60661	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 416.00
Name of Employer (for Individual) GE Healthcare	Occupation (for Individual) General Counsel, GE Healthcare	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 832.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	844.00
<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 10 OF 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**GE HealthCare Technologies Inc. PAC**

**A. Khandaker, Jahidul, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 500 West Monroe Street  
 City Chicago State IL Zip Code 60661  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Information Officer, GE Healthca  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt  
 02 / 23 / 2024  
**Transaction ID : EAFD07EFF2124C0692C7**  
 Amount of Each Receipt this Period 208.00  
 Memo Item

**B. Kirschner, Daniel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 500 West Monroe Street  
 City Chicago State IL Zip Code 60661  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) VP, Global Real Estate  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 832.00

Date of Receipt  
 02 / 23 / 2024  
**Transaction ID : ECCE2B442F09498E9097**  
 Amount of Each Receipt this Period 416.00  
 Memo Item

**C. Kulka, John, A., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 500 West Monroe Street  
 City Chicago State IL Zip Code 60661  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Financial Officer, USCAN  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt  
 02 / 23 / 2024  
**Transaction ID : 9D5666538C304CA7B10E**  
 Amount of Each Receipt this Period 208.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	832.00
<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 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**GE HealthCare Technologies Inc. PAC**

**A. Larson, Betty, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 500 West Monroe Street  
 City Chicago State IL Zip Code 60661  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief People Officer, GE Healthcare  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 23 / 2024  
**Transaction ID : B093E258282A4189B195**  
 Amount of Each Receipt this Period 150.00  
 Memo Item

**B. Lauth, Jenny, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 500 West Monroe Street  
 City Chicago State IL Zip Code 60661  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Securities and Governance Coun  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 02 / 23 / 2024  
**Transaction ID : A8AAEFFE5F8BE4B18AFA6**  
 Amount of Each Receipt this Period 208.00  
 Memo Item

**C. Marcella, Orrin, K, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 500 West Monroe Street  
 City Chicago State IL Zip Code 60661  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Executive - Government Affairs and Pol  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 02 / 23 / 2024  
**Transaction ID : 51C79408685D40D09B08**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	558.00
<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 12 OF 20
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
**GE HealthCare Technologies Inc. PAC**

**A. Montgomery, Brian, Christopher, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 500 West Monroe Street  
 City Chicago State IL Zip Code 60661  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Strategy Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 02 / 23 / 2024  
**Transaction ID : 46FEB8F8DAA34307B485**  
 Amount of Each Receipt this Period 125.00  
 Memo Item

**B. Saccaro, James, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 500 West Monroe Street  
 City Chicago State IL Zip Code 60661  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Vice President & Chief Financial Office  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 832.00

Date of Receipt  
 02 / 23 / 2024  
**Transaction ID : C797A6C4936D49CAA2EF**  
 Amount of Each Receipt this Period 416.00  
 Memo Item

**C. Schaeffler, John, W, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 500 West Monroe Street  
 City Chicago State IL Zip Code 60661  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Executive Director - Government Affair  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 832.00

Date of Receipt  
 02 / 23 / 2024  
**Transaction ID : DF5CD2DB946C431CB3A6**  
 Amount of Each Receipt this Period 416.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	957.00
<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 13 OF 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**GE HealthCare Technologies Inc. PAC**

**A. Schmeling, John, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 500 West Monroe Street  
 City Chicago State IL Zip Code 60661  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Chief Technology Officer, Ultrasound  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 23 / 2024  
**Transaction ID : A21392CB1610482CAA34**  
 Amount of Each Receipt this Period  
 208.00  
 Memo Item

**B. Sikorski, Anthony, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 500 West Monroe Street  
 City Chicago State IL Zip Code 60661  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) MR Chief Operating Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 23 / 2024  
**Transaction ID : 398651FE89E548CF9FF7**  
 Amount of Each Receipt this Period  
 208.00  
 Memo Item

**C. Stacherski, Kenneth, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 500 West Monroe Street  
 City Chicago State IL Zip Code 60661  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) Head of Global Supply Chain and Servic  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 832.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 23 / 2024  
**Transaction ID : 786FD9868E3344B380DE**  
 Amount of Each Receipt this Period  
 416.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	832.00
<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 14 OF 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**GE HealthCare Technologies Inc. PAC**

**A. Vidonish, George, , , JR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 500 West Monroe Street  
 City Chicago State IL Zip Code 60661  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) GM, Integrated Supply Chain Programs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 232.00

Date of Receipt 02 / 23 / 2024  
**Transaction ID : E5739B6BB2D34E94AFC0**  
 Amount of Each Receipt this Period 116.00  
 Memo Item

**B. Westrick, Thomas, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 500 West Monroe Street  
 City Chicago State IL Zip Code 60661  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) President & CEO, Patient Care Solutior  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 832.00

Date of Receipt 02 / 23 / 2024  
**Transaction ID : 61EFC A769B5A41CC8C65**  
 Amount of Each Receipt this Period 416.00  
 Memo Item

**C. Zhang, Yihao, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 500 W Monroe St  
 City Chicago State IL Zip Code 60661-3671  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GE Healthcare Occupation (for Individual) President & CEO, GE Healthcare China  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 832.00

Date of Receipt 02 / 09 / 2024  
**Transaction ID : 6BB0F3F2420B45B8898B**  
 Amount of Each Receipt this Period 416.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	948.00
<b>TOTAL</b> This Period (last page this line number only).....	7235.00

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)

Form for line numbers 21b-30b with checkboxes, where 23 is checked.

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NAME OF COMMITTEE (In Full)

GE HealthCare Technologies Inc. PAC

Full Name (Last, First, Middle Initial)

A. Bob Casey For Senate Inc

Mailing Address PO Box 58746

City Philadelphia

State PA

Zip Code 19102

Purpose of Disbursement 2024 Primary

011 Category/Type

Candidate Name

Casey, Robert, P., , Jr.

Office Sought: Senate (checked)

Disbursement For: 2024 Primary (checked)

State: PA District:

Date of Disbursement

Date of Disbursement: 02 / 27 / 2024

FEC Identification Number

C00431056

Transaction ID : 89BF4BB20B

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Bonamici For Congress

Mailing Address PO Box 1632

City Beaverton

State OR

Zip Code 97075

Purpose of Disbursement 2024 Primary

011 Category/Type

Candidate Name

Bonamici, Suzanne, Marie, ,

Office Sought: House (checked)

Disbursement For: 2024 Primary (checked)

State: OR District: 01

Date of Disbursement

Date of Disbursement: 02 / 27 / 2024

FEC Identification Number

C00500421

Transaction ID : BFC72D4F51'

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Chrissy Houlahan For Congress

Mailing Address PO Box 222

City Devon

State PA

Zip Code 19333

Purpose of Disbursement 2024 Primary

011 Category/Type

Candidate Name

Houlahan, Christina, J., ,

Office Sought: House (checked)

Disbursement For: 2024 Primary (checked)

State: PA District: 06

Date of Disbursement

Date of Disbursement: 02 / 27 / 2024

FEC Identification Number

C00637371

Transaction ID : 42BB1B261E

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)

**GE HealthCare Technologies Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Davis For Congress/Friends Of Davis**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		27		2024

Mailing Address 5956 W Race Ave

City Chicago	State IL	Zip Code 60644
-----------------	-------------	-------------------

FEC Identification Number

C	C00172619
---	-----------

Purpose of Disbursement  
2024 Primary

011
-----

**Transaction ID : 66FE1DD51D**

Candidate Name

Amount of Each Disbursement this Period

Davis, Danny, K., ,

1000.00
---------

Office Sought:  House  
 Senate  
 President

State: IL District: 07

Disbursement For: 2024

Primary  General  
 Other (specify) ▼

Memo Item

Full Name (Last, First, Middle Initial)

**B. Dr John Joyce For Congress**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		27		2024

Mailing Address 1002 Logan Blvd  
Ste 114

City Altoona	State PA	Zip Code 16602
-----------------	-------------	-------------------

FEC Identification Number

C	C00674259
---	-----------

Purpose of Disbursement  
2024 Primary

011
-----

**Transaction ID : BB9E76D9CE**

Candidate Name

Amount of Each Disbursement this Period

Joyce, John, , ,

1000.00
---------

Office Sought:  House  
 Senate  
 President

State: PA District: 13

Disbursement For: 2024

Primary  General  
 Other (specify) ▼

Memo Item

Full Name (Last, First, Middle Initial)

**C. Elizabeth Pannill Fletcher For Congress**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		27		2024

Mailing Address 3262 Westheimer Rd  
# 636

City Houston	State TX	Zip Code 77098
-----------------	-------------	-------------------

FEC Identification Number

C	C00640045
---	-----------

Purpose of Disbursement  
2024 Primary

011
-----

**Transaction ID : BC1EFCE161**

Candidate Name

Amount of Each Disbursement this Period

Fletcher, Elizabeth, Pannill, ,

1000.00
---------

Office Sought:  House  
 Senate  
 President

State: TX District: 07

Disbursement For: 2024

Primary  General  
 Other (specify) ▼

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)

Grid for line numbers 21b-30b with checkboxes, where 23 is checked.

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NAME OF COMMITTEE (In Full)

GE HealthCare Technologies Inc. PAC

Full Name (Last, First, Middle Initial)

A. Friends of Rosa DeLauro

Mailing Address 340 ORANGE STREET

City NEW HAVEN

State CT

Zip Code 06511

Purpose of Disbursement 2024 Convention

011

Candidate Name

DeLauro, Rosa, L.,

Office Sought: [X] House [ ] Senate [ ] President
State: CT District: 03

Disbursement For: 2024
[ ] Primary [ ] General
[X] Other (specify) Convention

Date of Disbursement

Date selection grid: MM/DD/YYYY = 02/27/2024

FEC Identification Number

C00238865

Transaction ID : AEA7AA71E7

Amount of Each Disbursement this Period

Amount grid: 1000.00

[ ] Memo Item

Full Name (Last, First, Middle Initial)

B. Friends Of Sherrod Brown

Mailing Address 600 Pennsylvania Ave SE
Unit 15180

City Washington

State DC

Zip Code 20003

Purpose of Disbursement 2024 Primary

011

Candidate Name

Brown, Sherrod, Campbell,

Office Sought: [ ] House [X] Senate [ ] President
State: OH District:

Disbursement For: 2024
[X] Primary [ ] General
[ ] Other (specify)

Date of Disbursement

Date selection grid: MM/DD/YYYY = 02/27/2024

FEC Identification Number

C00264697

Transaction ID : 64E18D48D0F

Amount of Each Disbursement this Period

Amount grid: 1000.00

[ ] Memo Item

Full Name (Last, First, Middle Initial)

C. Kaine For Virginia

Mailing Address 1751 Potomac Greens Dr

City Alexandria

State VA

Zip Code 22314-6233

Purpose of Disbursement 2024 Primary

011

Candidate Name

Kaine, Timothy, Michael,

Office Sought: [ ] House [X] Senate [ ] President
State: VA District:

Disbursement For: 2024
[X] Primary [ ] General
[ ] Other (specify)

Date of Disbursement

Date selection grid: MM/DD/YYYY = 02/27/2024

FEC Identification Number

C00495358

Transaction ID : F421A19D6C

Amount of Each Disbursement this Period

Amount grid: 1500.00

[ ] Memo Item

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

Amount grid: 3500.00

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

Amount grid: (blank)

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)

Form for line numbers 21b-30b with checkboxes, where 23 is selected.

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NAME OF COMMITTEE (In Full)

GE HealthCare Technologies Inc. PAC

Full Name (Last, First, Middle Initial)

A. Klobuchar For Minnesota

Mailing Address PO Box 4146

City Saint Paul

State MN

Zip Code 55104

Purpose of Disbursement 2024 Primary

011

Candidate Name

Klobuchar, Amy, Jean, ,

Category/Type

Office Sought: Senate (checked)

Disbursement For: 2024 Primary (checked)

State: MN District:

Date of Disbursement

Date field showing 02/27/2024

FEC Identification Number

C00431353

Transaction ID : 02AD202785C

Amount of Each Disbursement this Period

Amount field showing 1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Marsha For Senate

Mailing Address PO Box 3750

City Brentwood

State TN

Zip Code 37024

Purpose of Disbursement 2024 Primary

011

Candidate Name

Blackburn, Marsha, Wedgeworth, ,

Category/Type

Office Sought: Senate (checked)

Disbursement For: 2024 Primary (checked)

State: TN District:

Date of Disbursement

Date field showing 02/27/2024

FEC Identification Number

C00376939

Transaction ID : E05C948992E

Amount of Each Disbursement this Period

Amount field showing 1500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Mike Crapo For US Senate

Mailing Address PO Box 1948

City Boise

State ID

Zip Code 83701

Purpose of Disbursement 2028 Primary

011

Candidate Name

Crapo, Michael, Dean, ,

Category/Type

Office Sought: Senate (checked)

Disbursement For: 2028 Primary (checked)

State: ID District:

Date of Disbursement

Date field showing 02/27/2024

FEC Identification Number

C00330886

Transaction ID : 6F97167CC6

Amount of Each Disbursement this Period

Amount field showing 1500.00

Memo Item

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

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

Subtotal amount field showing 4000.00

Total amount field showing 4000.00

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)

Form for line numbers 21b-30b with checkboxes, where 23 is checked.

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NAME OF COMMITTEE (In Full)

GE HealthCare Technologies Inc. PAC

Full Name (Last, First, Middle Initial)

A. Robin Kelly For Congress

Mailing Address PO Box 101199

City Chicago State IL Zip Code 60610

Purpose of Disbursement 2024 Primary

Candidate Name

Kelly, Robin, Lynne, ,

Office Sought: [X] House [ ] Senate [ ] President

Disbursement For: 2024 [X] Primary [ ] General [ ] Other (specify) v

State: IL District: 02

Date of Disbursement

Date of Disbursement form showing 02/27/2024

FEC Identification Number

C00539866

Transaction ID : DB8EC0CD6/

Amount of Each Disbursement this Period

Amount of Each Disbursement this Period form showing 1000.00

[ ] Memo Item

Full Name (Last, First, Middle Initial)

B. Scott Fitzgerald For Congress

Mailing Address PO Box 484

City Oconomowoc State WI Zip Code 53066-0484

Purpose of Disbursement 2024 Primary

Candidate Name

Fitzgerald, Scott, L., ,

Office Sought: [X] House [ ] Senate [ ] President

Disbursement For: 2024 [X] Primary [ ] General [ ] Other (specify) v

State: WI District: 05

Date of Disbursement

Date of Disbursement form showing 02/27/2024

FEC Identification Number

C00720011

Transaction ID : DCDEEAB9E/

Amount of Each Disbursement this Period

Amount of Each Disbursement this Period form showing 2000.00

[ ] Memo Item

Full Name (Last, First, Middle Initial)

C. Scott Peters For Congress

Mailing Address PO Box 22074

City San Diego State CA Zip Code 92192

Purpose of Disbursement 2024 Primary

Candidate Name

Peters, Scott, H., ,

Office Sought: [X] House [ ] Senate [ ] President

Disbursement For: 2024 [X] Primary [ ] General [ ] Other (specify) v

State: CA District: 50

Date of Disbursement

Date of Disbursement form showing 02/27/2024

FEC Identification Number

C00503110

Transaction ID : 834D816BD1

Amount of Each Disbursement this Period

Amount of Each Disbursement this Period form showing 1000.00

[ ] Memo Item

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

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

SUBTOTAL form showing 4000.00

TOTAL form showing 4000.00

# 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)

**GE HealthCare Technologies Inc. PAC**

Full Name (Last, First, Middle Initial)

**A. Tammy Baldwin For Senate**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		27		2024

Mailing Address PO Box 696

City  
Madison

State  
WI

Zip Code  
53701

FEC Identification Number

C	C00326801
---	-----------

**Transaction ID : F92E2C6A2B**

Amount of Each Disbursement this Period

1000.00
---------

Memo Item

Purpose of Disbursement  
2024 Primary

011
Category/ Type

Candidate Name

Baldwin, Tammy, S., ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: WI District:

Full Name (Last, First, Middle Initial)

**B. Veronica Escobar For Congress**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		27		2024

Mailing Address PO Box 3961

City  
El Paso

State  
TX

Zip Code  
79923

FEC Identification Number

C	C00653923
---	-----------

**Transaction ID : 0FF4DB0C5A**

Amount of Each Disbursement this Period

1000.00
---------

Memo Item

Purpose of Disbursement  
2024 Primary

011
Category/ Type

Candidate Name

Escobar, Veronica, , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: TX District: 16

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y

Mailing Address

City

State

Zip Code

FEC Identification Number

C	
---	--

Amount of Each Disbursement this Period

--

Memo Item

Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

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

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

19500.00
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