

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC

ADDRESS (number and street) 8444 COUNTY RD M. Check if different than previously reported. (ACC) FREDONIA WI 53021

2. FEC IDENTIFICATION NUMBER C C00622472 3. IS THIS REPORT NEW (N) OR AMENDED (A) x

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report. (b) Monthly Report Due On: Feb 20, May 20, Aug 20, Nov 20, Mar 20, Jun 20, Sep 20, Dec 20, Apr 20, Jul 20, Oct 20, Jan 31. (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special. (d) 30-Day POST-Election Report for the: General, Runoff, Special.

5. Covering Period 04 / 01 / 2022 through 04 / 30 / 2022

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. PIARO, ROBERT, , , Type or Print Name of Treasurer

Signature of Treasurer PIARO, ROBERT, , , [Electronically Filed] Date 07 / 11 / 2022

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2022"/>		76189.15
(b) Cash on Hand at Beginning of Reporting Period.....	204592.02	
(c) Total Receipts (from Line 19) .....	665053.88	1098247.88
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	869645.90	1174437.03
7. Total Disbursements (from Line 31).....	631292.10	936083.23
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	238353.80	238353.80
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	52742.39	

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

**ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS 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).....	1735.00	12700.00
(ii) Unitemized .....	663318.88	1085547.88
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	665053.88	1098247.88
(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) .....	665053.88	1098247.88
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)).....▶	665053.88	1098247.88
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	665053.88	1098247.88

**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 .....	435458.56	651301.09
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	435458.56	651301.09
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	195508.54	284047.14
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 .....	325.00	735.00
(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)).....	325.00	735.00
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)) ..	631292.10	936083.23
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	631292.10	936083.23

**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) .....	665053.88	1098247.88
34. Total Contribution Refunds (from Line 28(d)) .....	325.00	735.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	664728.88	1097512.88
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	435458.56	651301.09
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	435458.56	651301.09

: 97 `A-G79 @C B9CI G`H9LH`F9 @H98 `HC `5 `F9DCFH`G7 <98I @ `CF `H9A-N5 HCB

Form/Schedule: F3XA  
Transaction ID :

BEST EFFORTS PROCEDURES - ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS / C00622472 1. Initial solicitation for a contribution is made via phone call and solicitor additionally states during the solicitation call that as a part of compliance, the PAC is required to inform the contributor that "Federal law requires us to use our best efforts to collect and report the name, mailing address, occupation and name of employer of individuals whose contributions exceed \$200 in a calendar year". Following acceptance to provide a contribution, a follow-up invoice letter is mailed to the contributor which includes a clear and conspicuous request for contributor's employer and occupation information to be written in and returned when they mail back their contribution. 2. Secondly, if employer/occupation information was still not provided within the above steps, a follow up phone call would be placed to the contributor within 30 days of receipt of the contribution via a separate pre-addressed post card sent in the US Mail to the contributor, again clearly requesting the name of employer and occupation, without solicitation of a contribution. 3. Lastly, the third/final step if employer/occupation information was still not provided, a follow up phone call is placed to the contributor during which the missing information is clearly requested (without solicitation of a contribution) as an FEC compliance requirement. 4. The missing employer/occupation information, if/when obtained, will be uploaded and we would subsequently update our reports to include the missing information. In instances where all efforts outlined above fail to obtain this information, the words "unavailable" or "refused" will be uploaded for these fields. In either scenario, the PAC will either file a memo Schedule A with its next regularly scheduled report, listing all contributions for which new contributor information has been received, or file an amendment to the original report.

Form/Schedule: F3XA  
Transaction ID:

The purpose of this amendment is to 1) correct the Schedule E aggregate totals, which were calculating incorrect due to a software bug. 2) Include the "off the top" credit card processing fee from "RallyPay" 3) Include the MEMO Schedule E's from the previous period, as non-memo, since they have been paid.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA  
Transaction ID :

The purpose of Amendment 2 is to include additional RallyPay fees that were previously not known. These additional RallyPays were recently created to encapsulate special projects of AFERF. We were not made aware until recently, that these special projects were not being included in the primary RallyPay account data.

Form/Schedule:  
Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 57  
(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)  
**ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC**

**A. HARRINGTON, CHERYL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 503 CORONADO WAY  
 City SATELLITE BEACH State FL Zip Code 32937  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 21 / 2022  
**Transaction ID : SA11AI-27289894**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. HENDRICKSON, DOUGLAS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5503 HUNTINGTON PKWY  
 City BETHESDA State MD Zip Code 20814  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt 04 / 12 / 2022  
**Transaction ID : SA11AI-27303910**  
 Amount of Each Receipt this Period 315.00  
 Memo Item

**C. MCNAIRY, BOBBIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2 GALESVILLE CT  
 City GAITHERSBURG State MD Zip Code 20878  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 04 / 01 / 2022  
**Transaction ID : SA11AI-27320948**  
 Amount of Each Receipt this Period 205.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 770.00  
**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: PAGE 9 OF 57  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC**

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

Mailing Address 4948 GASTON AVE  
 APT G

City DALLAS    State TX    Zip Code 75214

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 225.00

Date of Receipt  
 04 / 25 / 2022  
**Transaction ID : SA11AI-27274186**

Amount of Each Receipt this Period  
 200.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. OCALLAGHAN, MICHAEL, , ,**

Mailing Address PO BOX 221

City HUMAROCK    State MA    Zip Code 02047

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

Name of Employer (for Individual) PROCESS FACILITIES GROUP    Occupation (for Individual) ENGINEER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 265.00

Date of Receipt  
 04 / 12 / 2022  
**Transaction ID : SA11AI-27305306**

Amount of Each Receipt this Period  
 265.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. RUSSELL, JOSEPH, , ,**

Mailing Address 4014 MANCHESTER RD

City MADISON    State WI    Zip Code 53719

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

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

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 04 / 15 / 2022  
**Transaction ID : SA11AI-27298992**

Amount of Each Receipt this Period  
 250.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 715.00

**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: PAGE 10 OF 57  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
WILLIS, THOMAS J, , ,

Mailing Address 358 MOON RANCH ST

City BAKERSFIELD	State CA	Zip Code 93314
---------------------	-------------	-------------------

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

Name of Employer (for Individual) San Joaquin Veterinary Hospital	Occupation (for Individual) Owner/Vet
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	25	/	2022

**Transaction ID : SA11AI-27285168**

Amount of Each Receipt this Period  
250.00

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250.00
<b>TOTAL</b> This Period (last page this line number only).....	1735.00

**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)  
**ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC**

**A. Piaro, Robert R, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 8444 County Road M

City Fredonia State WI Zip Code 53021

Purpose of Disbursement Payroll  001 Category/Type

Candidate Name

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

State: District:

Date of Disbursement: 04 / 11 / 2022

FEC Identification Number: C

Transaction ID : SB21B-71877

Amount of Each Disbursement this Period: 780.89

Memo Item

**B. Piaro, Robert R, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 8444 County Road M

City Fredonia State WI Zip Code 53021

Purpose of Disbursement Payroll  001 Category/Type

Candidate Name

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

State: District:

Date of Disbursement: 04 / 11 / 2022

FEC Identification Number: C

Transaction ID : SB21B-71880

Amount of Each Disbursement this Period: 780.88

Memo Item

**C. Piaro, Robert R, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 8444 County Road M

City Fredonia State WI Zip Code 53021

Purpose of Disbursement Payroll  001 Category/Type

Candidate Name

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

State: District:

Date of Disbursement: 04 / 25 / 2022

FEC Identification Number: C

Transaction ID : SB21B-71877

Amount of Each Disbursement this Period: 780.87

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2342.64

**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)

**ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC**

Full Name (Last, First, Middle Initial)

**A. Piaro, Robert R, , ,**

Mailing Address 8444 County Road M

City  
Fredonia

State  
WI

Zip Code  
53021

Purpose of Disbursement  
Payroll

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	5		2	0	2	2

FEC Identification Number

C [REDACTED]  
**Transaction ID : SB21B-71881**  
Amount of Each Disbursement this Period  
[REDACTED] 780.89

Memo Item

Full Name (Last, First, Middle Initial)

**B. Cloud Data Services**

Mailing Address 1009 Whitney Ranch Dr

City  
Henderson

State  
NV

Zip Code  
89014

Purpose of Disbursement  
Leads/Phone Lists

003

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	2	2

FEC Identification Number

C [REDACTED]  
**Transaction ID : SB21B-71885**  
Amount of Each Disbursement this Period  
[REDACTED] 33374.09

Memo Item

Full Name (Last, First, Middle Initial)

**C. Cloud Data Services**

Mailing Address 1009 Whitney Ranch Dr

City  
Henderson

State  
NV

Zip Code  
89014

Purpose of Disbursement  
Leads/Phone Lists

003

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	3		2	0	2	2

FEC Identification Number

C [REDACTED]  
**Transaction ID : SB21B-71881**  
Amount of Each Disbursement this Period  
[REDACTED] 32879.25

Memo Item

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

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

6	7	0	3	4	.	2	3
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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 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)

**ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC**

Full Name (Last, First, Middle Initial)

**A. Cloud Data Services**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		20		2022

Mailing Address 1009 Whitney Ranch Dr

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B-71883**  
Amount of Each Disbursement this Period

[REDACTED] 47435.69

Memo Item

City Henderson State NV Zip Code 89014

Purpose of Disbursement Leads/Phone Lists

003  
Category/Type

Candidate Name

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

Full Name (Last, First, Middle Initial)

**B. Cloud Data Services**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		27		2022

Mailing Address 1009 Whitney Ranch Dr

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B-71875**  
Amount of Each Disbursement this Period

[REDACTED] 45087.60

Memo Item

City Henderson State NV Zip Code 89014

Purpose of Disbursement Leads/Phone Lists

003  
Category/Type

Candidate Name

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

Full Name (Last, First, Middle Initial)

**C. EWH Small Business Accounting S.C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		05		2022

Mailing Address 20670 Watertown Rd Ste 1040

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B-71888**  
Amount of Each Disbursement this Period

[REDACTED] 855.00

Memo Item

City Waukesha State WI Zip Code 53186-1867

Purpose of Disbursement Accounting

001  
Category/Type

Candidate Name

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

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

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

[REDACTED] 93378.29

[REDACTED]

**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)

**ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC**

Full Name (Last, First, Middle Initial)

**A. EWH Small Business Accounting S.C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		06		2022

Mailing Address 20670 Watertown Rd  
Ste 1040

City  
Waukesha

State  
WI

Zip Code  
53186-1867

Purpose of Disbursement  
Accounting

001
Category/ Type

FEC Identification Number

C
---

**Transaction ID : SB21B-71884**

Amount of Each Disbursement this Period

38.61
-------

Memo Item

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. EWH Small Business Accounting S.C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		13		2022

Mailing Address 20670 Watertown Rd  
Ste 1040

City  
Waukesha

State  
WI

Zip Code  
53186-1867

Purpose of Disbursement  
Accounting

001
Category/ Type

FEC Identification Number

C
---

**Transaction ID : SB21B-71880**

Amount of Each Disbursement this Period

38.61
-------

Memo Item

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C. EWH Small Business Accounting S.C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		20		2022

Mailing Address 20670 Watertown Rd  
Ste 1040

City  
Waukesha

State  
WI

Zip Code  
53186-1867

Purpose of Disbursement  
Accounting

001
Category/ Type

FEC Identification Number

C
---

**Transaction ID : SB21B-71878**

Amount of Each Disbursement this Period

38.61
-------

Memo Item

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

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

115.83
--------

**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 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)

**ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC**

Full Name (Last, First, Middle Initial)

**A. EWH Small Business Accounting S.C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		27		2022

Mailing Address 20670 Watertown Rd  
Ste 1040

City  
Waukesha

State  
WI

Zip Code  
53186-1867

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B-71884**  
Amount of Each Disbursement this Period

[REDACTED] 38.61

Memo Item

Purpose of Disbursement  
Accounting

001  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. EYP Consultants LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		06		2022

Mailing Address 2949 NW 120th Way

City  
Sunrise

State  
FL

Zip Code  
33323

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B-71881**  
Amount of Each Disbursement this Period

[REDACTED] 4171.77

Memo Item

Purpose of Disbursement  
Payment Processing

003  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C. EYP Consultants LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		13		2022

Mailing Address 2949 NW 120th Way

City  
Sunrise

State  
FL

Zip Code  
33323

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B-7188:**  
Amount of Each Disbursement this Period

[REDACTED] 4109.91

Memo Item

Purpose of Disbursement  
Payment Processing

003  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

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

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

[REDACTED] 8320.29

[REDACTED]

**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)

**ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC**

Full Name (Last, First, Middle Initial)

**A. EYP Consultants LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		20		2022

Mailing Address 2949 NW 120th Way

FEC Identification Number

C
---

**Transaction ID : SB21B-71881**  
Amount of Each Disbursement this Period

5929.46
---------

Memo Item

City Sunrise State FL Zip Code 33323

Purpose of Disbursement  
Payment Processing

003
Category/ Type

Candidate Name

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

Full Name (Last, First, Middle Initial)

**B. EYP Consultants LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		27		2022

Mailing Address 2949 NW 120th Way

FEC Identification Number

C
---

**Transaction ID : SB21B-71885**  
Amount of Each Disbursement this Period

5635.94
---------

Memo Item

City Sunrise State FL Zip Code 33323

Purpose of Disbursement  
Payment Processing

003
Category/ Type

Candidate Name

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

Full Name (Last, First, Middle Initial)

**C. LAV Services LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		06		2022

Mailing Address 1009 Whitney Ranch Dr

FEC Identification Number

C
---

**Transaction ID : SB21B-71888**  
Amount of Each Disbursement this Period

8343.51
---------

Memo Item

City Henderson State NV Zip Code 89014

Purpose of Disbursement  
Phonebank Payroll Services

003
Category/ Type

Candidate Name

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

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

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

19908.91
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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 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)

**ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC**

Full Name (Last, First, Middle Initial)

**A. LAV Services LLC**

Mailing Address 1009 Whitney Ranch Dr

City Henderson State NV Zip Code 89014

Purpose of Disbursement  
Phonebank Payroll Services

**003**  
Category/  
Type

Candidate Name

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

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B-71876**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. LAV Services LLC**

Mailing Address 1009 Whitney Ranch Dr

City Henderson State NV Zip Code 89014

Purpose of Disbursement  
Phonebank Payroll Services

**003**  
Category/  
Type

Candidate Name

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

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B-71882**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. LAV Services LLC**

Mailing Address 1009 Whitney Ranch Dr

City Henderson State NV Zip Code 89014

Purpose of Disbursement  
Phonebank Payroll Services

**003**  
Category/  
Type

Candidate Name

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

State: District:

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B-71877**  
Amount of Each Disbursement this Period

Memo Item

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

**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)

**ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC**

Full Name (Last, First, Middle Initial)

**A. RallyPay**

Mailing Address 995 Market Street  
Floor 2

City San Francisco State CA Zip Code 94103

Purpose of Disbursement  
Combined "off the top" CC Transaction fees Apr

003

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 30 / 2022

FEC Identification Number

C

Transaction ID : SB21B-72830

Amount of Each Disbursement this Period

1063.92

Memo Item

Full Name (Last, First, Middle Initial)

**B. RallyPay**

Mailing Address 995 Market Street  
Floor 2

City San Francisco State CA Zip Code 94103

Purpose of Disbursement  
Combined "off the top" Credit Card Chargebacks

003

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 30 / 2022

FEC Identification Number

C

Transaction ID : SB21B-73498

Amount of Each Disbursement this Period

2813.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. RallyPay**

Mailing Address 995 Market Street  
Floor 2

City San Francisco State CA Zip Code 94103

Purpose of Disbursement  
Combined "off the top" CC Transaction fees Apr

003

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 30 / 2022

FEC Identification Number

C

Transaction ID : SB21B-73498

Amount of Each Disbursement this Period

29236.08

Memo Item

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

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

33113.00

**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)

**ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC**

Full Name (Last, First, Middle Initial)

**A. Ridge Innovative**

Mailing Address 2124 Union Ave.

City Costa Mesa State CA Zip Code 92627

Purpose of Disbursement  
Phonebank Long Distance

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B-71885**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Ridge Innovative**

Mailing Address 2124 Union Ave.

City Costa Mesa State CA Zip Code 92627

Purpose of Disbursement  
Phonebank Long Distance

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B-71879**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Ridge Innovative**

Mailing Address 2124 Union Ave.

City Costa Mesa State CA Zip Code 92627

Purpose of Disbursement  
Phonebank Long Distance

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B-71888**  
Amount of Each Disbursement this Period

Memo Item

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

**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)

**ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC**

Full Name (Last, First, Middle Initial)

**A. Ridge Innovative**

Mailing Address 2124 Union Ave.

City Costa Mesa State CA Zip Code 92627

Purpose of Disbursement  
Phonebank Long Distance

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B-71877**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Standard Data Services LLC**

Mailing Address 513 Mill Ave SE  
Suite 206

City New Philadelphia State OH Zip Code 44663

Purpose of Disbursement  
Caging and Database Services

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B-71881**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Standard Data Services LLC**

Mailing Address 513 Mill Ave SE  
Suite 206

City New Philadelphia State OH Zip Code 44663

Purpose of Disbursement  
Caging and Database Services

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B-71884**  
Amount of Each Disbursement this Period

Memo Item

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

**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)

**ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC**

Full Name (Last, First, Middle Initial)

**A. Standard Data Services LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04	/	20	/	2022

Mailing Address 513 Mill Ave SE  
Suite 206

City New Philadelphia State OH Zip Code 44663

Purpose of Disbursement  
Caging and Database Services

003
Category/ Type

FEC Identification Number

C
---

Transaction ID : SB21B-71881  
Amount of Each Disbursement this Period

17788.38
----------

Memo Item

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

Full Name (Last, First, Middle Initial)

**B. Standard Data Services LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04	/	27	/	2022

Mailing Address 513 Mill Ave SE  
Suite 206

City New Philadelphia State OH Zip Code 44663

Purpose of Disbursement  
Caging and Database Services

003
Category/ Type

FEC Identification Number

C
---

Transaction ID : SB21B-71883  
Amount of Each Disbursement this Period

16907.86
----------

Memo Item

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

Full Name (Last, First, Middle Initial)

**C. United States Treasury**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04	/	01	/	2022

Mailing Address 1500 Pennsylvania Avenue  
NW

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Taxes

001
Category/ Type

FEC Identification Number

C
---

Transaction ID : SB21B-71871  
Amount of Each Disbursement this Period

214.66
--------

Memo Item

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

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

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

34910.90
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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 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)

**ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC**

Full Name (Last, First, Middle Initial)

**A. United States Treasury**

Mailing Address 1500 Pennsylvania Avenue  
NW

City  
Washington

State  
DC

Zip Code  
20003

Purpose of Disbursement  
Taxes

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	2	2

FEC Identification Number

C

Transaction ID : SB21B-71884

Amount of Each Disbursement this Period

214.68

Memo Item

Full Name (Last, First, Middle Initial)

**B. United States Treasury**

Mailing Address 1500 Pennsylvania Avenue  
NW

City  
Washington

State  
DC

Zip Code  
20003

Purpose of Disbursement  
Taxes

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	5		2	0	2	2

FEC Identification Number

C

Transaction ID : SB21B-71883

Amount of Each Disbursement this Period

214.66

Memo Item

Full Name (Last, First, Middle Initial)

**C. United States Treasury**

Mailing Address 1500 Pennsylvania Avenue  
NW

City  
Washington

State  
DC

Zip Code  
20003

Purpose of Disbursement  
Taxes

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	2		2	0	2	2

FEC Identification Number

C

Transaction ID : SB21B-71871

Amount of Each Disbursement this Period

214.70

Memo Item

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

644.04

**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)

**ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC**

Full Name (Last, First, Middle Initial)

**A. United States Treasury**

Mailing Address 1500 Pennsylvania Avenue  
NW

City  
Washington

State  
DC

Zip Code  
20003

Purpose of Disbursement  
Taxes

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	2	2

FEC Identification Number

C [REDACTED]  
**Transaction ID : SB21B-71875**  
Amount of Each Disbursement this Period  
[REDACTED] 214.66

Memo Item

Full Name (Last, First, Middle Initial)

**B. Wired4Data**

Mailing Address 55 Lake Havasu Ave South  
F-677

City  
Lake Havasu City

State  
AZ

Zip Code  
86403

Purpose of Disbursement  
Phonebank IT/Tech Support

003

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	2	2

FEC Identification Number

C [REDACTED]  
**Transaction ID : SB21B-71882**  
Amount of Each Disbursement this Period  
[REDACTED] 19004.68

Memo Item

Full Name (Last, First, Middle Initial)

**C. Wired4Data**

Mailing Address 55 Lake Havasu Ave South  
F-677

City  
Lake Havasu City

State  
AZ

Zip Code  
86403

Purpose of Disbursement  
Phonebank IT/Tech Support

003

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	3		2	0	2	2

FEC Identification Number

C [REDACTED]  
**Transaction ID : SB21B-71875**  
Amount of Each Disbursement this Period  
[REDACTED] 18722.90

Memo Item

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

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

3	7	9	4	2	.	2	4
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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 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)  
**ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC**

Full Name (Last, First, Middle Initial)  
**A. Wired4Data**

Date of Disbursement: MM / DD / YYYY  
04 / 20 / 2022

Mailing Address: 55 Lake Havasu Ave South, F-677

City: Lake Havasu City | State: AZ | Zip Code: 86403

Purpose of Disbursement: Phonebank IT/Tech Support

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Category/Type: **003**

FEC Identification Number: **C**

Transaction ID: **SB21B-71883**

Amount of Each Disbursement this Period: 27011.98

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Wired4Data**

Date of Disbursement: MM / DD / YYYY  
04 / 27 / 2022

Mailing Address: 55 Lake Havasu Ave South, F-677

City: Lake Havasu City | State: AZ | Zip Code: 86403

Purpose of Disbursement: Phonebank IT/Tech Support

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Category/Type: **003**

FEC Identification Number: **C**

Transaction ID: **SB21B-71879**

Amount of Each Disbursement this Period: 25674.88

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Wisconsin Dept of Revenue**

Date of Disbursement: MM / DD / YYYY  
04 / 01 / 2022

Mailing Address: PO Box 930208

City: Milwaukee | State: WI | Zip Code: 53293

Purpose of Disbursement: State Taxes

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Category/Type: **001**

FEC Identification Number: **C**

Transaction ID: **SB21B-71877**

Amount of Each Disbursement this Period: 39.54

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 52726.40

**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

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)

**ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC**

Full Name (Last, First, Middle Initial)

**A. Wisconsin Dept of Revenue**

Mailing Address PO Box 930208

City Milwaukee

State WI

Zip Code 53293

Purpose of Disbursement State Taxes

001

Category/Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 08 / 2022

FEC Identification Number

C  
Transaction ID : SB21B-71882  
Amount of Each Disbursement this Period  
39.54

Memo Item

Full Name (Last, First, Middle Initial)

**B. Wisconsin Dept of Revenue**

Mailing Address PO Box 930208

City Milwaukee

State WI

Zip Code 53293

Purpose of Disbursement State Taxes

001

Category/Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 18 / 2022

FEC Identification Number

C  
Transaction ID : SB21B-71879  
Amount of Each Disbursement this Period  
39.54

Memo Item

Full Name (Last, First, Middle Initial)

**C. Wisconsin Dept of Revenue**

Mailing Address PO Box 930208

City Milwaukee

State WI

Zip Code 53293

Purpose of Disbursement State Taxes

001

Category/Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 22 / 2022

FEC Identification Number

C  
Transaction ID : SB21B-71888  
Amount of Each Disbursement this Period  
39.54

Memo Item

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

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

118.62

# 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)

**ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC**

Full Name (Last, First, Middle Initial)

**A. Wisconsin Dept of Revenue**

Mailing Address PO Box 930208

City  
Milwaukee

State  
WI

Zip Code  
53293

Purpose of Disbursement  
State Taxes

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	2	2

FEC Identification Number

C

Transaction ID : SB21B-71879

Amount of Each Disbursement this Period

3	9	.	5	4
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Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

--	--	--	--	--

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

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Memo Item

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

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

3	9	.	5	4
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4	3	5	4	5	8	.	5	6
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**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 27 OF 57
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)  
**ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Cloud Data Services</b>		Nature of Debt (Purpose): Leads / Phone Lists	
Mailing Address 1350 W SOUTHPORT ROAD BOX 130			
City INDIANAPOLIS	State IN	Zip Code 46217	

Outstanding Balance Beginning This Period	Transaction ID : SD10-877279	
<input type="text" value="16437.98"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="22207.32"/>	<input type="text" value="16437.98"/>	<input type="text" value="22207.32"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>EYP Consultants LLC</b>		Nature of Debt (Purpose): Payment Processing	
Mailing Address 2949 NW 120th Way			
City Sunrise	State FL	Zip Code 33323	

Outstanding Balance Beginning This Period	Transaction ID : SD10-877281	
<input type="text" value="2054.74"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="2054.74"/>	<input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>LAV Services LLC</b>		Nature of Debt (Purpose): Phonebank Payroll Services	
Mailing Address 3468 Ruth Dr			
City Las Vegas	State NV	Zip Code 89121	

Outstanding Balance Beginning This Period	Transaction ID : SD10-877283	
<input type="text" value="4109.48"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="5551.83"/>	<input type="text" value="4109.48"/>	<input type="text" value="5551.83"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="27759.15"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 28 OF 57
	FOR LINE NUMBER: (check only one)
	<input type="checkbox"/> 9
	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Ridge Innovative</b>			Nature of Debt (Purpose): Phonebank Long Distance
Mailing Address 2124 Union ave.			
City Costa Mesa	State CA	Zip Code 92627	

Outstanding Balance Beginning This Period <input type="text" value="2967.96"/>	<b>Transaction ID : SD10-877285</b>	
Amount Incurred This Period <input type="text" value="4009.66"/>	Payment This Period <input type="text" value="2967.96"/>	Outstanding Balance at Close of This Period <input type="text" value="4009.66"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Standard Data Services LLC</b>			Nature of Debt (Purpose): Caging and Database Services
Mailing Address 513 Mill Ave SE Suite 206			
City New Philadelphia	State OH	Zip Code 44663	

Outstanding Balance Beginning This Period <input type="text" value="6164.24"/>	<b>Transaction ID : SD10-877287</b>	
Amount Incurred This Period <input type="text" value="8327.74"/>	Payment This Period <input type="text" value="6164.24"/>	Outstanding Balance at Close of This Period <input type="text" value="8327.74"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Wired4Data</b>			Nature of Debt (Purpose): PHONEBANK IT/TECH SUPPORT
Mailing Address 55 Lake Havasu Ave South F-677			
City Lake Havasu City	State AZ	Zip Code 86403	

Outstanding Balance Beginning This Period <input type="text" value="9360.50"/>	<b>Transaction ID : SD10-877289</b>	
Amount Incurred This Period <input type="text" value="12645.84"/>	Payment This Period <input type="text" value="9360.50"/>	Outstanding Balance at Close of This Period <input type="text" value="12645.84"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="24983.24"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text" value="52742.39"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="52742.39"/>

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC
FEC IDENTIFICATION NUMBER C C00622472

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Cloud Data Services Memo Item
Invoice for this estimate issued and paid after close of books
Mailing Address 1009 Whitney Ranch Dr.
City Henderson State NV Zip Code 89014
Purpose of Expenditure Leads / Phone Lists(Estimate) Category/Type 004
Name of Federal Candidate: Collins, Susan, , Support Office Sought: Senate State: ME
Calendar Year-To-Date Per Election for Office Sought 162980.44
Disbursement For: Primary General 2026

Full Name of Payee Cloud Data Services Memo Item
Invoice for this estimate issued and paid after close of books
Mailing Address 1009 Whitney Ranch Dr.
City Henderson State NV Zip Code 89014
Purpose of Expenditure Leads / Phone Lists(Estimate) Category/Type 004
Name of Federal Candidate: Carbajal, Salud, , Support Office Sought: House District: 24 State: CA
Calendar Year-To-Date Per Election for Office Sought 162980.44
Disbursement For: Primary General 2022

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

PIARO, ROBERT, , [Electronically Filed] Date 04 / 28 / 2022
Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC</b>	FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00622472
---	---

Check if  24-hour report  48-hour report  New report Amends report filed on  /  /

Full Name of Payee <input type="checkbox"/> Memo Item <b>Cloud Data Services</b>			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 1009 Whitney Ranch Dr.			Amount <input type="text"/>		
City Henderson	State NV	Zip Code 89014	Transaction ID : <b>SE-S789195</b>		
Purpose of Expenditure Leads/Phone Lists		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: Collins, Susan, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>ME</u>		
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <input type="checkbox"/> Memo Item <b>Cloud Data Services</b>			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 1009 Whitney Ranch Dr.			Amount <input type="text"/>		
City Henderson	State NV	Zip Code 89014	Transaction ID : <b>SE-S789197</b>		
Purpose of Expenditure Leads/Phone Lists		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: Carbajal, Salud, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: <u>24</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>CA</u>		
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____		

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<input type="text"/>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....	<input type="text"/>
(c) <b>TOTAL</b> Independent Expenditures .....	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

PIARO, ROBERT, , ,  
Signature

[Electronically Filed]

Date  /  /

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC
FEC IDENTIFICATION NUMBER C C00622472

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Cloud Data Services
Mailing Address 1009 Whitney Ranch Dr.
City Henderson State NV Zip Code 89014
Purpose of Expenditure Leads/Phone Lists Category/Type 004
Name of Federal Candidate: Collins, Susan, , , Support
Office Sought: Senate State: ME
Calendar Year-To-Date Per Election for Office Sought 82913.22
Disbursement For: Primary 2026

Full Name of Payee Cloud Data Services
Mailing Address 1009 Whitney Ranch Dr.
City Henderson State NV Zip Code 89014
Purpose of Expenditure Leads/Phone Lists Category/Type 004
Name of Federal Candidate: Carbajal, Salud, , , Support
Office Sought: House District: 24 State: CA
Calendar Year-To-Date Per Election for Office Sought 82913.22
Disbursement For: Primary 2022

(a) SUBTOTAL of Itemized Independent Expenditures 16194.26
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

PIARO, ROBERT, , , [Electronically Filed] Date 04 / 07 / 2022
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC
FEC IDENTIFICATION NUMBER C C00622472

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Cloud Data Services
Mailing Address 1009 Whitney Ranch Dr.
City Henderson State NV Zip Code 89014
Purpose of Expenditure Leads/Phone Lists Category/Type 004
Name of Federal Candidate: Collins, Susan, , , Support
Office Sought: Senate State: ME
Disbursement For: Primary
Amount 11681.92
Transaction ID: SE-S847887
Date of Disbursement or Obligation 04/20/2022

Full Name of Payee Cloud Data Services
Mailing Address 1009 Whitney Ranch Dr.
City Henderson State NV Zip Code 89014
Purpose of Expenditure Leads/Phone Lists Category/Type 004
Name of Federal Candidate: Carbajal, Salud, , , Support
Office Sought: House District: 24 State: CA
Disbursement For: Primary
Amount 11681.92
Transaction ID: SE-S847889
Date of Disbursement or Obligation 04/20/2022

(a) SUBTOTAL of Itemized Independent Expenditures 23363.84
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

PIARO, ROBERT, , ,

[Electronically Filed]

Date

04 / 14 / 2022

Signature



**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; margin-right: 5px;">C</span> C00622472                 </div>
---	--

Check if  24-hour report  48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>Cloud Data Services</b>	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 04 / 21 / 2022						
Mailing Address 1009 Whitney Ranch Dr.	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">11103.66</div> Transaction ID : <b>SE-S875973</b> Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 04 / 27 / 2022						
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:34%;">Zip Code</td> </tr> <tr> <td>Henderson</td> <td>NV</td> <td>89014</td> </tr> </table>		City	State	Zip Code	Henderson	NV	89014
City		State	Zip Code				
Henderson	NV	89014					
Purpose of Expenditure Leads/Phone Lists							
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Collins, Susan, , ,	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>ME</u>						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">139877.19</div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2026 <input type="checkbox"/> Other (specify) ▶ _____						

Full Name of Payee <input type="checkbox"/> Memo Item <b>Cloud Data Services</b>	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 04 / 21 / 2022						
Mailing Address 1009 Whitney Ranch Dr.	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">11103.66</div> Transaction ID : <b>SE-S875975</b> Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 04 / 27 / 2022						
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:34%;">Zip Code</td> </tr> <tr> <td>Henderson</td> <td>NV</td> <td>89014</td> </tr> </table>		City	State	Zip Code	Henderson	NV	89014
City		State	Zip Code				
Henderson	NV	89014					
Purpose of Expenditure Leads/Phone Lists							
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Carbajal, Salud, , ,	Office Sought: <input checked="" type="checkbox"/> House District: <u>24</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>CA</u>						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">139877.19</div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶ _____						

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">22207.32</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
<b>(c) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

PIARO, ROBERT, , ,

[Electronically Filed]

Date M M / D D / Y Y Y Y Y Y  
04 / 21 / 2022

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; margin-right: 5px;">C</span> C00622472                 </div>
---	--

Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>EYP Consultants LLC</b>			Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 03 / 31 / 2022		
Mailing Address 2949 NW 120th Way			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1027.37</div>		
City Sunrise	State FL	Zip Code 33323			
Purpose of Expenditure Payment Processing		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Transaction ID : <b>SE-S789203</b> Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 04 / 06 / 2022		
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Collins, Susan, , ,			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: 00 State: ME		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">62670.40</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee <input type="checkbox"/> Memo Item <b>EYP Consultants LLC</b>			Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 03 / 31 / 2022		
Mailing Address 2949 NW 120th Way			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1027.37</div>		
City Sunrise	State FL	Zip Code 33323			
Purpose of Expenditure Payment Processing		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Transaction ID : <b>SE-S789205</b> Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 04 / 06 / 2022		
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Carbajal, Salud, , ,			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 24 State: CA		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">62670.40</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">2054.74</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
<b>(c) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature PIARO, ROBERT, , , *[Electronically Filed]* Date M M / D D / Y Y Y Y Y Y 03 / 31 / 2022

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC
FEC IDENTIFICATION NUMBER C C00622472

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee EYP Consultants LLC
Mailing Address 2949 NW 120th Way
City Sunrise State FL Zip Code 33323
Purpose of Expenditure Payment Processing Category/Type 004
Date of Public Distribution/Dissemination 04/07/2022
Amount 1012.14
Transaction ID : SE-S795681
Date of Disbursement or Obligation 04/13/2022

Name of Federal Candidate: Collins, Susan, , , Support
Office Sought: Senate State: ME
Calendar Year-To-Date Per Election for Office Sought 82913.22
Disbursement For: Primary 2026

Full Name of Payee EYP Consultants LLC
Mailing Address 2949 NW 120th Way
City Sunrise State FL Zip Code 33323
Purpose of Expenditure Payment Processing Category/Type 004
Date of Public Distribution/Dissemination 04/07/2022
Amount 1012.14
Transaction ID : SE-S795683
Date of Disbursement or Obligation 04/13/2022

Name of Federal Candidate: Carbajal, Salud, , , Support
Office Sought: House District: 24 State: CA
Calendar Year-To-Date Per Election for Office Sought 82913.22
Disbursement For: Primary 2022

(a) SUBTOTAL of Itemized Independent Expenditures 2024.28
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature PIARO, ROBERT, , , [Electronically Filed] Date 04/07/2022

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC
FEC IDENTIFICATION NUMBER C C00622472

Check if 24-hour report 48-hour report New report Amends report filed on 04/14/2022

Full Name of Payee EYP Consultants LLC Memo Item

Date of Public Distribution/Dissemination 04/14/2022

Mailing Address 2949 NW 120th Way

Amount 1460.24

City Sunrise State FL Zip Code 33323

Transaction ID : SE-S847897

Purpose of Expenditure Payment Processing Category/Type 004

Date of Disbursement or Obligation 04/20/2022

Name of Federal Candidate: Carbajal, Salud, , , Support Oppose

Office Sought: House District: 24 State: CA

Calendar Year-To-Date Per Election for Office Sought 112118.03

Disbursement For: Primary General 2022 Other (specify)

Full Name of Payee EYP Consultants LLC Memo Item

Date of Public Distribution/Dissemination 04/14/2022

Mailing Address 2949 NW 120th Way

Amount 1460.24

City Sunrise State FL Zip Code 33323

Transaction ID : SE-S847895

Purpose of Expenditure Payment Processing Category/Type 004

Date of Disbursement or Obligation 04/20/2022

Name of Federal Candidate: Collins, Susan, , , Support Oppose

Office Sought: House District: 00 State: ME

Calendar Year-To-Date Per Election for Office Sought 112118.03

Disbursement For: Primary General 2026 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 2920.48

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

PIARO, ROBERT, , ,

[Electronically Filed]

Date 04/14/2022

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC
FEC IDENTIFICATION NUMBER C C00622472

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee EYP Consultants LLC
Mailing Address 2949 NW 120th Way
City Sunrise State FL Zip Code 33323
Purpose of Expenditure Payment Processing Category/Type 004
Date of Public Distribution/Dissemination 04/21/2022
Amount 1387.96
Transaction ID: SE-S875981
Date of Disbursement or Obligation 04/27/2022

Name of Federal Candidate: Collins, Susan, , ,
Support Oppose
Office Sought: House District: 00
President Senate State: ME
Calendar Year-To-Date Per Election for Office Sought 139877.19
Disbursement For: Primary General 2026
Other (specify)

Full Name of Payee EYP Consultants LLC
Mailing Address 2949 NW 120th Way
City Sunrise State FL Zip Code 33323
Purpose of Expenditure Payment Processing Category/Type 004
Date of Public Distribution/Dissemination 04/21/2022
Amount 1387.96
Transaction ID: SE-S875983
Date of Disbursement or Obligation 04/27/2022

Name of Federal Candidate: Carbajal, Salud, , ,
Support Oppose
Office Sought: House District: 24
President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought 139877.19
Disbursement For: Primary General 2022
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 2775.92
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature PIARO, ROBERT, , , [Electronically Filed] Date 04/21/2022

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC
FEC IDENTIFICATION NUMBER C C00622472

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee LAV Services LLC Memo Item
Invoice for this estimate issued and paid after close of books
Mailing Address 1009 Whitney Ranch Dr.
City Henderson State NV Zip Code 89014
Purpose of Expenditure Phonebank Payroll Services(Estimate) Category/Type 004
Name of Federal Candidate: Collins, Susan, , Support Office Sought: House District: 00 Senate State: ME
Calendar Year-To-Date Per Election for Office Sought 162980.44 Disbursement For: Primary General 2026 Other (specify)

Full Name of Payee LAV Services LLC Memo Item
Invoice for this estimate issued and paid after close of books
Mailing Address 1009 Whitney Ranch Dr.
City Henderson State NV Zip Code 89014
Purpose of Expenditure Phonebank Payroll Services(Estimate) Category/Type 004
Name of Federal Candidate: Carbajal, Salud, , Support Office Sought: House District: 24 Senate State: CA
Calendar Year-To-Date Per Election for Office Sought 162980.44 Disbursement For: Primary General 2022 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

PIARO, ROBERT, , [Electronically Filed] Date 04 / 28 / 2022
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC
FEC IDENTIFICATION NUMBER C C00622472

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee LAV Services LLC
Mailing Address 1009 Whitney Ranch Dr.
City Henderson State NV Zip Code 89014
Purpose of Expenditure Phonebank Payroll Services Category/Type 004
Date of Public Distribution/Dissemination 03/31/2022
Amount 2054.75
Transaction ID: SE-S789207
Date of Disbursement or Obligation 04/06/2022

Name of Federal Candidate: Collins, Susan, , ,
Support Oppose
Office Sought: House District: 00
President Senate State: ME
Calendar Year-To-Date Per Election for Office Sought 62670.40
Disbursement For: Primary General 2026
Other (specify)

Full Name of Payee LAV Services LLC
Mailing Address 1009 Whitney Ranch Dr.
City Henderson State NV Zip Code 89014
Purpose of Expenditure Phonebank Payroll Services Category/Type 004
Date of Public Distribution/Dissemination 03/31/2022
Amount 2054.75
Transaction ID: SE-S789209
Date of Disbursement or Obligation 04/06/2022

Name of Federal Candidate: Carbajal, Salud, , ,
Support Oppose
Office Sought: House District: 24
President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought 62670.40
Disbursement For: Primary General 2022
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 4109.50
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature PIARO, ROBERT, , , [Electronically Filed] Date 03/31/2022

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC
FEC IDENTIFICATION NUMBER C C00622472

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee LAV Services LLC
Mailing Address 1009 Whitney Ranch Dr.
City Henderson State NV Zip Code 89014
Purpose of Expenditure Phonebank Payroll Services Category/Type 004
Date of Public Distribution/Dissemination 04 / 07 / 2022
Amount 2024.28
Transaction ID : SE-S795685
Date of Disbursement or Obligation 04 / 13 / 2022

Name of Federal Candidate: Collins, Susan, , , Support
Office Sought: House District: 00
President Senate State: ME
Calendar Year-To-Date Per Election for Office Sought 82913.22
Disbursement For: Primary General 2026 Other (specify)

Full Name of Payee LAV Services LLC
Mailing Address 1009 Whitney Ranch Dr.
City Henderson State NV Zip Code 89014
Purpose of Expenditure Phonebank Payroll Services Category/Type 004
Date of Public Distribution/Dissemination 04 / 07 / 2022
Amount 2024.28
Transaction ID : SE-S795687
Date of Disbursement or Obligation 04 / 13 / 2022

Name of Federal Candidate: Carbajal, Salud, , , Support
Office Sought: House District: 24
President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought 82913.22
Disbursement For: Primary General 2022 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 4048.56
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature PIARO, ROBERT, , , [Electronically Filed] Date 04 / 07 / 2022





SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC
FEC IDENTIFICATION NUMBER C C00622472

Check if 24-hour report 48-hour report New report Amends report filed on 04/21/2022

Full Name of Payee LAV Services LLC
Mailing Address 1009 Whitney Ranch Dr.
City Henderson State NV Zip Code 89014
Purpose of Expenditure Phonebank Payroll Services Category/Type 004

Date of Public Distribution/Dissemination 04/21/2022
Amount 2775.92
Transaction ID: SE-S875985
Date of Disbursement or Obligation 04/27/2022

Name of Federal Candidate: Collins, Susan, , ,
Support Oppose
Calendar Year-To-Date Per Election for Office Sought 139877.19

Office Sought: House District: 00
Senate State: ME
Disbursement For: Primary General 2026

Full Name of Payee LAV Services LLC
Mailing Address 1009 Whitney Ranch Dr.
City Henderson State NV Zip Code 89014
Purpose of Expenditure Phonebank Payroll Services Category/Type 004

Date of Public Distribution/Dissemination 04/21/2022
Amount 2775.92
Transaction ID: SE-S875987
Date of Disbursement or Obligation 04/27/2022

Name of Federal Candidate: Carbajal, Salud, , ,
Support Oppose
Calendar Year-To-Date Per Election for Office Sought 139877.19

Office Sought: House District: 24
Senate State: CA
Disbursement For: Primary General 2022

(a) SUBTOTAL of Itemized Independent Expenditures 5551.84
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

PIARO, ROBERT, , ,
Signature

[Electronically Filed]

Date 04/21/2022

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC
FEC IDENTIFICATION NUMBER C C00622472

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Ridge Innovative Memo Item
Invoice for this estimate issued and paid after close of books
Mailing Address 2124 Union ave.
City Costa Mesa State CA Zip Code 92627
Purpose of Expenditure Phonebank Long Distance(Estimate) Category/Type 004
Name of Federal Candidate: Collins, Susan, , Support Office Sought: House District: 00
Collins, Susan, , Oppose President Senate State: ME
Calendar Year-To-Date Per Election for Office Sought 162980.44
Disbursement For: Primary General 2026 Other (specify)

Full Name of Payee Ridge Innovative Memo Item
Invoice for this estimate issued and paid after close of books
Mailing Address 2124 Union ave.
City Costa Mesa State CA Zip Code 92627
Purpose of Expenditure Phonebank Long Distance(Estimate) Category/Type 004
Name of Federal Candidate: Carbajal, Salud, , Support Office Sought: House District: 24
Carbajal, Salud, , Oppose President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought 162980.44
Disbursement For: Primary General 2022 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

PIARO, ROBERT, ,
Signature

[Electronically Filed]

Date 04 / 28 / 2022

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00622472
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Check if  24-hour report  48-hour report  New report Amends report filed on  /  /

Full Name of Payee <input type="checkbox"/> Memo Item <b>Ridge Innovative</b>		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 2124 Union ave.		Amount <input type="text"/>	
City Costa Mesa	State CA	Zip Code 92627	Transaction ID : <b>SE-S789211</b>
Purpose of Expenditure Phonebank Long Distance		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Collins, Susan, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>ME</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item <b>Ridge Innovative</b>		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 2124 Union ave.		Amount <input type="text"/>	
City Costa Mesa	State CA	Zip Code 92627	Transaction ID : <b>SE-S789213</b>
Purpose of Expenditure Phonebank Long Distance		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Carbajal, Salud, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>24</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>CA</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<input type="text"/>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....	<input type="text"/>
(c) <b>TOTAL</b> Independent Expenditures .....	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

PIARO, ROBERT, , ,

[Electronically Filed]

Date  /  /

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC
FEC IDENTIFICATION NUMBER C C00622472

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Ridge Innovative
Mailing Address 2124 Union ave.
City Costa Mesa State CA Zip Code 92627
Purpose of Expenditure Phonebank Long Distance Category/Type 004
Name of Federal Candidate: Collins, Susan, , , Support
Office Sought: Senate State: ME
Calendar Year-To-Date Per Election for Office Sought 82913.22
Disbursement For: Primary 2026

Full Name of Payee Ridge Innovative
Mailing Address 2124 Union ave.
City Costa Mesa State CA Zip Code 92627
Purpose of Expenditure Phonebank Long Distance Category/Type 004
Name of Federal Candidate: Carbajal, Salud, , , Support
Office Sought: House District: 24 State: CA
Calendar Year-To-Date Per Election for Office Sought 82913.22
Disbursement For: Primary 2022

(a) SUBTOTAL of Itemized Independent Expenditures 2923.96
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

PIARO, ROBERT, , , [Electronically Filed] Date 04 / 07 / 2022
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC
FEC IDENTIFICATION NUMBER C C00622472

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Ridge Innovative
Mailing Address 2124 Union ave.
City Costa Mesa State CA Zip Code 92627
Purpose of Expenditure Phonebank Long Distance Category/Type 004
Name of Federal Candidate: Collins, Susan, , Support
Office Sought: Senate State: ME
Calendar Year-To-Date Per Election for Office Sought 112118.03
Disbursement For: Primary 2026

Full Name of Payee Ridge Innovative
Mailing Address 2124 Union ave.
City Costa Mesa State CA Zip Code 92627
Purpose of Expenditure Phonebank Long Distance Category/Type 004
Name of Federal Candidate: Carbajal, Salud, , Support
Office Sought: House District: 24 State: CA
Calendar Year-To-Date Per Election for Office Sought 112118.03
Disbursement For: Primary 2022

(a) SUBTOTAL of Itemized Independent Expenditures 4218.48
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature PIARO, ROBERT, , [Electronically Filed] Date 04 / 14 / 2022

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC
FEC IDENTIFICATION NUMBER C C00622472

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Ridge Innovative
Mailing Address 2124 Union ave.
City Costa Mesa State CA Zip Code 92627
Purpose of Expenditure Phonebank Long Distance Category/Type 004

Date of Public Distribution/Dissemination 04/21/2022
Amount 2004.83
Transaction ID : SE-S875989
Date of Disbursement or Obligation 04/27/2022

Name of Federal Candidate: Collins, Susan, , , Support Oppose

Office Sought: House Senate District: 00 State: ME

Calendar Year-To-Date Per Election for Office Sought 139877.19

Disbursement For: Primary General 2026 Other (specify)

Full Name of Payee Ridge Innovative
Mailing Address 2124 Union ave.
City Costa Mesa State CA Zip Code 92627
Purpose of Expenditure Phonebank Long Distance Category/Type 004

Date of Public Distribution/Dissemination 04/21/2022
Amount 2004.83
Transaction ID : SE-S875991
Date of Disbursement or Obligation 04/27/2022

Name of Federal Candidate: Carbajal, Salud, , , Support Oppose

Office Sought: House Senate District: 24 State: CA

Calendar Year-To-Date Per Election for Office Sought 139877.19

Disbursement For: Primary General 2022 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 4009.66
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature PIARO, ROBERT, , , [Electronically Filed] Date 04/21/2022

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC
FEC IDENTIFICATION NUMBER C C00622472

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Standard Data Services LLC Memo Item
Invoice for this estimate issued and paid after close of books
Mailing Address 513 Mill Ave SE Suite 206
City New Philadelphia State OH Zip Code 44663
Purpose of Expenditure Caging and Database Services(Estimate) Category/Type 004
Date of Public Distribution/Dissemination 04/28/2022
Amount 4163.87
Transaction ID : SE-S876715
Date of Disbursement or Obligation
Name of Federal Candidate: Collins, Susan, , Support Oppose Office Sought: House District: 00 President Senate State: ME
Calendar Year-To-Date Per Election for Office Sought 162980.44
Disbursement For: Primary General 2026 Other (specify)

Full Name of Payee Standard Data Services LLC Memo Item
Invoice for this estimate issued and paid after close of books
Mailing Address 513 Mill Ave SE Suite 206
City New Philadelphia State OH Zip Code 44663
Purpose of Expenditure Caging and Database Services(Estimate) Category/Type 004
Date of Public Distribution/Dissemination 04/28/2022
Amount 4163.87
Transaction ID : SE-S876717
Date of Disbursement or Obligation
Name of Federal Candidate: Carbajal, Salud, , Support Oppose Office Sought: House District: 24 President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought 162980.44
Disbursement For: Primary General 2022 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

PIARO, ROBERT, ,

[Electronically Filed]

Date 04/28/2022

Signature



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC
FEC IDENTIFICATION NUMBER C C00622472

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Standard Data Services LLC
Mailing Address 513 Mill Ave SE Suite 206
City New Philadelphia State OH Zip Code 44663
Purpose of Expenditure Caging and Database Services Category/Type 004
Date of Public Distribution/Dissemination 03 / 31 / 2022
Amount 3082.12
Transaction ID : SE-S789199
Date of Disbursement or Obligation 04 / 06 / 2022

Name of Federal Candidate: Collins, Susan, , ,
Support Oppose
Office Sought: House District: 00
President Senate State: ME
Calendar Year-To-Date Per Election for Office Sought 62670.40
Disbursement For: Primary General 2026
Other (specify)

Full Name of Payee Standard Data Services LLC
Mailing Address 513 Mill Ave SE Suite 206
City New Philadelphia State OH Zip Code 44663
Purpose of Expenditure Caging and Database Services Category/Type 004
Date of Public Distribution/Dissemination 03 / 31 / 2022
Amount 3082.12
Transaction ID : SE-S789201
Date of Disbursement or Obligation 04 / 06 / 2022

Name of Federal Candidate: Carbajal, Salud, , ,
Support Oppose
Office Sought: House District: 24
President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought 62670.40
Disbursement For: Primary General 2022
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 6164.24
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

PIARO, ROBERT, , ,

[Electronically Filed]

Date

03 / 31 / 2022

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC
FEC IDENTIFICATION NUMBER C C00622472

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Standard Data Services LLC
Mailing Address 513 Mill Ave SE Suite 206
City New Philadelphia State OH Zip Code 44663
Purpose of Expenditure Caging and Database Services Category/Type 004
Date of Public Distribution/Dissemination 04 / 07 / 2022
Amount 3036.42
Transaction ID : SE-S795677
Date of Disbursement or Obligation 04 / 13 / 2022

Name of Federal Candidate: Collins, Susan, , , Support
Office Sought: House District: 00
President Senate State: ME
Calendar Year-To-Date Per Election for Office Sought 82913.22
Disbursement For: Primary General 2026
Other (specify)

Full Name of Payee Standard Data Services LLC
Mailing Address 513 Mill Ave SE Suite 206
City New Philadelphia State OH Zip Code 44663
Purpose of Expenditure Caging and Database Services Category/Type 004
Date of Public Distribution/Dissemination 04 / 07 / 2022
Amount 3036.42
Transaction ID : SE-S795679
Date of Disbursement or Obligation 04 / 13 / 2022

Name of Federal Candidate: Carbajal, Salud, , , Support
Office Sought: House District: 24
President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought 82913.22
Disbursement For: Primary General 2022
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 6072.84
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature PIARO, ROBERT, , , [Electronically Filed] Date 04 / 07 / 2022

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC
FEC IDENTIFICATION NUMBER C C00622472

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Standard Data Services LLC
Mailing Address 513 Mill Ave SE Suite 206
City New Philadelphia State OH Zip Code 44663
Purpose of Expenditure Caging and Database Services Category/Type 004
Name of Federal Candidate: Collins, Susan, , Support
Office Sought: Senate State: ME
Calendar Year-To-Date Per Election for Office Sought 112118.03
Disbursement For: Primary 2026

Full Name of Payee Standard Data Services LLC
Mailing Address 513 Mill Ave SE Suite 206
City New Philadelphia State OH Zip Code 44663
Purpose of Expenditure Caging and Database Services Category/Type 004
Name of Federal Candidate: Carbajal, Salud, , Support
Office Sought: House District: 24 State: CA
Calendar Year-To-Date Per Election for Office Sought 112118.03
Disbursement For: Primary 2022

(a) SUBTOTAL of Itemized Independent Expenditures 8761.44
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature PIARO, ROBERT, , [Electronically Filed] Date 04 / 14 / 2022

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; margin-right: 5px;">C</span> C00622472                 </div>
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Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>Standard Data Services LLC</b>			Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 04 / 21 / 2022		
Mailing Address 513 Mill Ave SE Suite 206			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">4163.87</div>		
City New Philadelphia	State OH	Zip Code 44663			
Purpose of Expenditure Caging and Database Services		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Transaction ID : <b>SE-S875977</b> Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 04 / 27 / 2022		
Name of Federal Candidate: Collins, Susan, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: 00 State: ME		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; text-align: right;">139877.19</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <input type="checkbox"/> Memo Item <b>Standard Data Services LLC</b>			Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 04 / 21 / 2022		
Mailing Address 513 Mill Ave SE Suite 206			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">4163.87</div>		
City New Philadelphia	State OH	Zip Code 44663			
Purpose of Expenditure Caging and Database Services		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Transaction ID : <b>SE-S875979</b> Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 04 / 27 / 2022		
Name of Federal Candidate: Carbajal, Salud, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 24 State: CA		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; text-align: right;">139877.19</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____		

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">8327.74</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
<b>(c) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

PIARO, ROBERT, , ,
[Electronically Filed]
Date
M M / D D / Y Y Y Y Y Y  
Signature
04 / 21 / 2022

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC
FEC IDENTIFICATION NUMBER C C00622472

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Wired4Data Memo Item
Invoice for this estimate issued and paid after close of books
Mailing Address 55 Lake Havasu Ave South F-677
City Lake Havasu City State AZ Zip Code 86403
Purpose of Expenditure PHONEBANK IT/TECH SUPPORT(Estimate) Category/Type 004
Date of Public Distribution/Dissemination 04/28/2022
Amount 6322.92
Transaction ID : SE-S876727
Date of Disbursement or Obligation
Name of Federal Candidate: Collins, Susan, , Support Oppose Office Sought: House District: 00 President Senate State: ME
Calendar Year-To-Date Per Election for Office Sought 162980.44 Disbursement For: Primary General 2026 Other (specify)

Full Name of Payee Wired4Data Memo Item
Invoice for this estimate issued and paid after close of books
Mailing Address 55 Lake Havasu Ave South F-677
City Lake Havasu City State AZ Zip Code 86403
Purpose of Expenditure PHONEBANK IT/TECH SUPPORT(Estimate) Category/Type 004
Date of Public Distribution/Dissemination 04/28/2022
Amount 6322.92
Transaction ID : SE-S876729
Date of Disbursement or Obligation
Name of Federal Candidate: Carbajal, Salud, , Support Oppose Office Sought: House District: 24 President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought 162980.44 Disbursement For: Primary General 2022 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
Signature PIARO, ROBERT, , [Electronically Filed] Date 04/28/2022

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC
FEC IDENTIFICATION NUMBER C C00622472

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Wired4Data
Mailing Address 55 Lake Havasu Ave South F-677
City Lake Havasu City State AZ Zip Code 86403
Purpose of Expenditure Phonebank IT/Tech Support Category/Type 004
Name of Federal Candidate: Collins, Susan, , Support
Office Sought: Senate State: ME
Calendar Year-To-Date Per Election for Office Sought 62670.40
Disbursement For: Primary 2026

Full Name of Payee Wired4Data
Mailing Address 55 Lake Havasu Ave South F-677
City Lake Havasu City State AZ Zip Code 86403
Purpose of Expenditure Phonebank IT/Tech Support Category/Type 004
Name of Federal Candidate: Carbajal, Salud, , Support
Office Sought: House State: CA
Calendar Year-To-Date Per Election for Office Sought 62670.40
Disbursement For: Primary 2022

(a) SUBTOTAL of Itemized Independent Expenditures 9360.52
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

PIARO, ROBERT, ,
Signature

[Electronically Filed]

Date 03 / 31 / 2022

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC
FEC IDENTIFICATION NUMBER C C00622472

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Wired4Data
Mailing Address 55 Lake Havasu Ave South F-677
City Lake Havasu City State AZ Zip Code 86403
Purpose of Expenditure Phonebank IT/Tech Support Category/Type 004
Date of Public Distribution/Dissemination 04/07/2022
Amount 4610.87
Transaction ID : SE-S795693
Date of Disbursement or Obligation 04/13/2022

Name of Federal Candidate: Collins, Susan, , , Support
Office Sought: House District: 00
President Senate State: ME
Calendar Year-To-Date Per Election for Office Sought 82913.22
Disbursement For: Primary General 2026

Full Name of Payee Wired4Data
Mailing Address 55 Lake Havasu Ave South F-677
City Lake Havasu City State AZ Zip Code 86403
Purpose of Expenditure Phonebank IT/Tech Support Category/Type 004
Date of Public Distribution/Dissemination 04/07/2022
Amount 4610.87
Transaction ID : SE-S795695
Date of Disbursement or Obligation 04/13/2022

Name of Federal Candidate: Carbajal, Salud, , , Support
Office Sought: House District: 24
President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought 82913.22
Disbursement For: Primary General 2022

(a) SUBTOTAL of Itemized Independent Expenditures 9221.74
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature PIARO, ROBERT, , , [Electronically Filed] Date 04/07/2022

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC
FEC IDENTIFICATION NUMBER C C00622472

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Wired4Data
Mailing Address 55 Lake Havasu Ave South F-677
City Lake Havasu City State AZ Zip Code 86403
Purpose of Expenditure Phonebank IT/Tech Support Category/Type 004
Name of Federal Candidate: Collins, Susan, , Support
Office Sought: Senate State: ME
Calendar Year-To-Date Per Election for Office Sought 112118.03
Disbursement For: Primary 2026

Full Name of Payee Wired4Data
Mailing Address 55 Lake Havasu Ave South F-677
City Lake Havasu City State AZ Zip Code 86403
Purpose of Expenditure Phonebank IT/Tech Support Category/Type 004
Name of Federal Candidate: Carbajal, Salud, , Support
Office Sought: House State: CA
Calendar Year-To-Date Per Election for Office Sought 112118.03
Disbursement For: Primary 2022

(a) SUBTOTAL of Itemized Independent Expenditures 13304.42
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

PIARO, ROBERT, ,

[Electronically Filed]

Date 04 / 14 / 2022

Signature



**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.2em; font-weight: bold; border: 1px solid black; display: inline-block; width: 15px; height: 15px; text-align: center; vertical-align: middle;">C</span> <span style="margin-left: 5px;">C00622472</span> </div>
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Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>Wired4Data</b>	Date of Public Distribution/Dissemination <span style="font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</span> <div style="border: 1px solid black; padding: 2px; display: inline-block;">04 / 21 / 2022</div>
Mailing Address 55 Lake Havasu Ave South F-677	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">6322.92</div>
City State Zip Code Lake Havasu City AZ 86403	
Purpose of Expenditure Phonebank IT/Tech Support	
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Collins, Susan, , ,	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: ME
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">139877.19</div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2026 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item <b>Wired4Data</b>	Date of Public Distribution/Dissemination <span style="font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</span> <div style="border: 1px solid black; padding: 2px; display: inline-block;">04 / 21 / 2022</div>
Mailing Address 55 Lake Havasu Ave South F-677	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">6322.92</div>
City State Zip Code Lake Havasu City AZ 86403	
Purpose of Expenditure Phonebank IT/Tech Support	
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Carbajal, Salud, , ,	Office Sought: <input checked="" type="checkbox"/> House District: 24 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">139877.19</div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">12645.84</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"> </div>
<b>(c) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">195508.54</div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

PIARO, ROBERT, , ,  
 \_\_\_\_\_  
 Signature
 

 [Electronically Filed]
 

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

04 / 21 / 2022