

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 SALT CITY PAC

ADDRESS (number and street) 228 S WASHINGTON ST STE 115 ALEXANDRIA VA 22314

2. FEC IDENTIFICATION NUMBER C00608463 3. IS THIS REPORT NEW (N) OR AMENDED (A)

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

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

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Lisker, Lisa, , ,

Type or Print Name of Treasurer Signature of Treasurer Lisker, Lisa, , , [Electronically Filed] Date 01 / 28 / 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)

Page 2

Write or Type Committee Name

SALT CITY PAC

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

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|--|--|
| 6. (a) Cash on Hand January 1, <input type="text" value="2021"/> | <input type="text" value="30827.04"/> | <input type="text" value="30827.04"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="7678.16"/> | |
| (c) Total Receipts (from Line 19) | <input type="text" value="129500.00"/> | <input type="text" value="129500.00"/> |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | <input type="text" value="137178.16"/> | <input type="text" value="160327.04"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="39396.73"/> | <input type="text" value="62545.61"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="97781.43"/> | <input type="text" value="97781.43"/> |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

SALT CITY 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)..... | 1500.00 | 1500.00 |
| (ii) Unitemized | 0.00 | 0.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶ | 1500.00 | 1500.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 128000.00 | 128000.00 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) | 129500.00 | 129500.00 |
| 12. Transfers From Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received..... | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 0.00 | 0.00 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... | 0.00 | 0.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.)..... | 0.00 | 0.00 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3)..... | 0.00 | 0.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfers (add 18(a) and 18(b)).. | 0.00 | 0.00 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶ | 129500.00 | 129500.00 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶ | 129500.00 | 129500.00 |

DETAILED SUMMARY PAGE
of Disbursements

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures | 14396.73 | 17545.61 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 14396.73 | 17545.61 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 24000.00 | 44000.00 |
| 24. Independent Expenditures (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... | 0.00 | 0.00 |
| 29. Other Disbursements (Including Non-Federal Donations)..... | 1000.00 | 1000.00 |
| 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)) .. | 39396.73 | 62545.61 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 39396.73 | 62545.61 |

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

| III. Net Contributions/ Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|---------------------------------------|---|
| 33. Total Contributions (other than loans) (from Line 11(d), page 3) | 129500.00 | 129500.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 129500.00 | 129500.00 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 14396.73 | 17545.61 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 14396.73 | 17545.61 |

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

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

FOR LINE NUMBER: PAGE 6 OF 29
(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)
SALT CITY PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Lanza, Bryan, , ,

Mailing Address 3400 Holly St.

| | | |
|--------------------|-------------|-------------------|
| City Alexandria | State VA | Zip Code 22305 |
|--------------------|-------------|-------------------|

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

| | |
|---|---|
| Name of Employer (for Individual) Mercury Public Affairs | Occupation (for Individual) Consultant |
|---|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12 | | 31 | | 2021 |

Transaction ID : SA11AI.4726

Amount of Each Receipt this Period
1500.00

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 | / | D D | / | Y Y Y Y |
| | | | | |

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 | / | D D | / | Y Y Y Y |
| | | | | |

Amount of Each Receipt this Period

Memo Item

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 1500.00 |
| TOTAL This Period (last page this line number only)..... | 1500.00 |

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

| | | | |
|---|------------------------------|---|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 7 OF 29 |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
SALT CITY PAC

| | | | |
|---|--|-----------------------------|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. AIR LINE PILOTS ASSOCIATION PAC | | | Date of Receipt |
| Mailing Address 1625 MASSACHUSETTS AVE. NW | | | <input type="text" value="10"/> / <input type="text" value="12"/> / <input type="text" value="2021"/> |
| City WASHINGTON | State DC | Zip Code 20036 | Transaction ID : SA11C.4687 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00035451"/> | | | Amount of Each Receipt this Period <input type="text" value="5000.00"/> |
| Name of Employer (for Individual) | | Occupation (for Individual) | <input type="checkbox"/> Memo Item |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/> | | |

| | | | |
|--|--|-----------------------------|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. AMAZON.COM SERVICES LLC SEPARATE SEGREGATED FUND (AMAZON PAC) | | | Date of Receipt |
| Mailing Address 601 NEW JERSEY AVE NW - SUITE 900 | | | <input type="text" value="12"/> / <input type="text" value="21"/> / <input type="text" value="2021"/> |
| City WASHINGTON | State DC | Zip Code 20001 | Transaction ID : SA11C.4717 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00360354"/> | | | Amount of Each Receipt this Period <input type="text" value="5000.00"/> |
| Name of Employer (for Individual) | | Occupation (for Individual) | <input type="checkbox"/> Memo Item |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/> | | |

| | | | |
|---|--|-----------------------------|---|
| Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. AMERICAN BANKERS ASSOCIATION PAC (BANKPAC) | | | Date of Receipt |
| Mailing Address 1120 CONNECTICUT AVENUE NW SUITE 600 | | | <input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2021"/> |
| City WASHINGTON | State DC | Zip Code 20036 | Transaction ID : SA11C.4719 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00004275"/> | | | Amount of Each Receipt this Period <input type="text" value="5000.00"/> |
| Name of Employer (for Individual) | | Occupation (for Individual) | <input type="checkbox"/> Memo Item |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/> | | |

| | |
|--|---------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="15000.00"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text"/> |

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

| | | | |
|---|------------------------------|---|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 8 OF 29 |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
SALT CITY PAC

A. AMERICAN COUNCIL OF ENGINEERING COMPANIES (ACEC/PAC)
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1015 15TH STREET NW
 SUITE 800
 City WASHINGTON State DC Zip Code 20005
 FEC ID number of contributing federal political committee. **C** C00010868
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **11 / 29 / 2021**
Transaction ID : SA11C.4702
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL PAC)
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 S. AKARD STREET
 SUITE 1812
 City DALLAS State TX Zip Code 75202
 FEC ID number of contributing federal political committee. **C** C00109017
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **11 / 01 / 2021**
Transaction ID : SA11C.4696
 Amount of Each Receipt this Period 5000.00
 Memo Item

C. BUILDING BRIDGES PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 824 S MILLEDGE AVE STE 101
 City ATHENS State GA Zip Code 30605
 FEC ID number of contributing federal political committee. **C** C00693127
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **10 / 12 / 2021**
Transaction ID : SA11C.4694
 Amount of Each Receipt this Period 1000.00
 Memo Item

| | |
|---|----------|
| SUBTOTAL of Receipts This Page (optional)..... | 11000.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | |
|---|------------------------------|---|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 9 OF 29 |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
SALT CITY PAC

A. BUILDING BRIDGES PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 824 S MILLEDGE AVE STE 101

| | | |
|----------------|-------------|-------------------|
| City ATHENS | State GA | Zip Code 30605 |
|----------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C** C00693127

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 11 | / | 29 | / | 2021 |

Transaction ID : SA11C.4699

Amount of Each Receipt this Period
1000.00

Memo Item

B. BUILDING BRIDGES PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 824 S MILLEDGE AVE STE 101

| | | |
|----------------|-------------|-------------------|
| City ATHENS | State GA | Zip Code 30605 |
|----------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C** C00693127

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 20 | / | 2021 |

Transaction ID : SA11C.4711

Amount of Each Receipt this Period
1000.00

Memo Item

C. CHARTER COMMUNICATIONS INC. POLITICAL ACTION COMMITTEE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 400 ATLANTIC STREET
10TH FLOOR

| | | |
|------------------|-------------|-------------------|
| City STAMFORD | State CT | Zip Code 06901 |
|------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C** C00426775

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10 | / | 12 | / | 2021 |

Transaction ID : SA11C.4688

Amount of Each Receipt this Period
2500.00

Memo Item

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 4500.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | | |
|---|------------------------------|---|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 10 OF 29 |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
SALT CITY PAC

A. CHARTER COMMUNICATIONS INC. POLITICAL ACTION COMMITTEE

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

Mailing Address 400 ATLANTIC STREET
10TH FLOOR

City STAMFORD State CT Zip Code 06901

FEC ID number of contributing federal political committee. **C** C00426775

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 20 / 2021

Transaction ID : SA11C.4705

Amount of Each Receipt this Period
2500.00

Memo Item

B. DELOITTE POLITICAL ACTION COMMITTEE

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

Mailing Address P.O. BOX 365

City WASHINGTON State DC Zip Code 20044

FEC ID number of contributing federal political committee. **C** C00211318

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 20 / 2021

Transaction ID : SA11C.4706

Amount of Each Receipt this Period
5000.00

Memo Item

C. ENGINEERS POLITICAL EDUCATION COMMITTEE (EPEC)/INTERNATIONAL UNION OF OPERATING ENGINEERS

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

Mailing Address 1125 17TH ST, NW

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00029504

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 20 / 2021

Transaction ID : SA11C.4712

Amount of Each Receipt this Period
5000.00

Memo Item

| | |
|---|----------|
| SUBTOTAL of Receipts This Page (optional)..... | 12500.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | |
|---|------------------------------|---|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 11 OF 29 |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
SALT CITY PAC

A. GOOGLE LLC NETPAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25 MASSACHUSETTS AVE. NW
9TH FLOOR

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00428623

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
08 / 16 / 2021

Transaction ID : SA11C.4680

Amount of Each Receipt this Period
5000.00

Memo Item

B. HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 101 CONSTITUTION AVE. NW
SUITE 500 WEST

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00096156

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4000.00

Date of Receipt
MM / DD / YYYY
12 / 14 / 2021

Transaction ID : SA11C.4704

Amount of Each Receipt this Period
4000.00

Memo Item

C. INT'L ASSOCIATION OF BRIDGE, STRUCTURAL, ORNAMENTAL AND REINFORCING IRON WORKERS (IPAL)
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1750 NEW YORK AVE. NW
SUITE 400

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00027359

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
09 / 24 / 2021

Transaction ID : SA11C.4682

Amount of Each Receipt this Period
5000.00

Memo Item

| | |
|---|----------|
| SUBTOTAL of Receipts This Page (optional)..... | 14000.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | |
|---|------------------------------|---|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 12 OF 29 |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
SALT CITY PAC

A. KPMG PARTNERS/PRINCIPALS AND EMPLOYEES PAC

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

Mailing Address 1801 K STREET, NW

| | | |
|--------------------|-------------|-------------------|
| City WASHINGTON | State DC | Zip Code 20006 |
|--------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C** C00280222

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 31 | | 2021 |

Transaction ID : SA11C.4720

Amount of Each Receipt this Period
5000.00

Memo Item

B. L3HARRIS TECHNOLOGIES, INC. PAC

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

Mailing Address 600 MARYLAND AVENUE SW
SUITE 850E

| | | |
|--------------------|-------------|-------------------|
| City WASHINGTON | State DC | Zip Code 20024 |
|--------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C** C00100321

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 31 | | 2021 |

Transaction ID : SA11C.4722

Amount of Each Receipt this Period
5000.00

Memo Item

C. LABORERS' INTERNATIONAL UNION OF NORTH AMERICA (LIUNA) PAC

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

Mailing Address 905 16TH ST., N.W.

| | | |
|--------------------|-------------|-------------------|
| City WASHINGTON | State DC | Zip Code 20006 |
|--------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C** C00007922

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 22 | | 2021 |

Transaction ID : SA11C.4715

Amount of Each Receipt this Period
5000.00

Memo Item

| | |
|--|----------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 15000.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | | |
|---|------------------------------|---|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 13 OF 29 |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
SALT CITY PAC

A. LEIDOS INC. POLITICAL ACTION COMMITTEE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 301 LABORATORY ROAD
City OAK RIDGE State TN Zip Code 37830
FEC ID number of contributing federal political committee. **C** C00546234
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 12 / 2021
Transaction ID : SA11C.4690
Amount of Each Receipt this Period 1000.00
 Memo Item

B. LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2121 CRYSTAL DRIVE SUITE 100
City ARLINGTON State VA Zip Code 22202
FEC ID number of contributing federal political committee. **C** C00303024
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 11 / 22 / 2021
Transaction ID : SA11C.4698
Amount of Each Receipt this Period 2500.00
 Memo Item

C. NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 606 NORTH WASHINGTON STREET
City ALEXANDRIA State VA Zip Code 22314
FEC ID number of contributing federal political committee. **C** C00091561
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 12 / 2021
Transaction ID : SA11C.4692
Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 4500.00
TOTAL This Period (last page this line number only)..... ▶

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

| | | | |
|---|------------------------------|---|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 14 OF 29 |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
SALT CITY PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)

Mailing Address 606 NORTH WASHINGTON STREET

| | | |
|--------------------|-------------|-------------------|
| City ALEXANDRIA | State VA | Zip Code 22314 |
|--------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C** C00091561

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 31 | | 2021 |

Transaction ID : SA11C.4723

Amount of Each Receipt this Period
4000.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC

Mailing Address 1325 MASSACHUSETTS AVE., NW

| | | |
|--------------------|-------------|-------------------|
| City WASHINGTON | State DC | Zip Code 20005 |
|--------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C** C00238725

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 31 | | 2021 |

Transaction ID : SA11C.4724

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE

Mailing Address 430 NORTH MICHIGAN AVENUE

| | | |
|-----------------|-------------|-------------------|
| City CHICAGO | State IL | Zip Code 60611 |
|-----------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C** C00030718

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09 | | 24 | | 2021 |

Transaction ID : SA11C.4728

Amount of Each Receipt this Period
5000.00

Memo Item

| | |
|---|----------|
| SUBTOTAL of Receipts This Page (optional)..... | 11500.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | |
|---|------------------------------|---|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 15 OF 29 |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
SALT CITY PAC

A. NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

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

Mailing Address 1101 KING STREET
SUITE 600

City ALEXANDRIA State VA Zip Code 22308

FEC ID number of contributing federal political committee. **C** C00144766

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 20 / 2021

Transaction ID : SA11C.4708

Amount of Each Receipt this Period
2500.00

Memo Item

B. NATIONAL ELECTRICAL CONTRACTORS ASSOCIATION POLITICAL ACTION COMMITTEE (NECAPAC)

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

Mailing Address 3 BETHESDA METRO CENTER
SUITE 1100

City BETHESDA State MD Zip Code 20814

FEC ID number of contributing federal political committee. **C** C00113811

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2021

Transaction ID : SA11C.4725

Amount of Each Receipt this Period
5000.00

Memo Item

C. NATIONAL EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE - AMERICAN COLLEGE OF EMERGENCY PHY

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

Mailing Address 1125 EXECUTIVE CIRCLE

City IRVING State TX Zip Code 75038

FEC ID number of contributing federal political committee. **C** C00140061

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2021

Transaction ID : SA11C.4685

Amount of Each Receipt this Period
2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 10000.00

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

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

| | | | |
|---|------------------------------|---|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 16 OF 29 |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
SALT CITY PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
NATIONAL EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE - AMERICAN COLLEGE OF EMERGENCY PHY

Mailing Address 1125 EXECUTIVE CIRCLE

| | | |
|----------------|-------------|-------------------|
| City IRVING | State TX | Zip Code 75038 |
|----------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C** C00140061

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 20 | / | 2021 |

Transaction ID : SA11C.4710

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
PRICEWATERHOUSECOOPERS POLITICAL ACTION COMMITTEE I

Mailing Address 600 13TH STREET, NW
SUITE 1000

| | | |
|--------------------|-------------|-------------------|
| City WASHINGTON | State DC | Zip Code 20005 |
|--------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C** C00107235

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 11 | / | 08 | / | 2021 |

Transaction ID : SA11C.4697

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
THE COUNCIL OF INSURANCE AGENTS & BROKERS POLITICAL ACTION COMMITTEE

Mailing Address 701 PENNSYLVANIA AVENUE, NW
SUITE 750

| | | |
|--------------------|-------------|-------------------|
| City WASHINGTON | State DC | Zip Code 20004 |
|--------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C** C00039578

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10 | / | 12 | / | 2021 |

Transaction ID : SA11C.4689

Amount of Each Receipt this Period
5000.00

Memo Item

| | |
|---|----------|
| SUBTOTAL of Receipts This Page (optional)..... | 10000.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | |
|---|------------------------------|---|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 17 OF 29 |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
SALT CITY PAC

A. THE HOME DEPOT INC. POLITICAL ACTION COMMITTEE

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

Mailing Address 1155 F STREET, NW
SUITE 400

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00284885

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 29 / 2021

Transaction ID : SA11C.4700

Amount of Each Receipt this Period
2500.00

Memo Item

B. THE HOME DEPOT INC. POLITICAL ACTION COMMITTEE

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

Mailing Address 1155 F STREET, NW
SUITE 400

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00284885

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 29 / 2021

Transaction ID : SA11C.4701

Amount of Each Receipt this Period
2500.00

Memo Item

C. TRANSPORT WORKERS UNION POLITICAL CONTRIBUTIONS COMMITTEE

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

Mailing Address 501 THIRD ST. NW 9TH FLOOR

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00008268

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 20 / 2021

Transaction ID : SA11C.4714

Amount of Each Receipt this Period
5000.00

Memo Item

| | |
|---|----------|
| SUBTOTAL of Receipts This Page (optional)..... | 10000.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | |
|---|------------------------------|---|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 18 OF 29 |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
SALT CITY PAC

A. TUESDAY GROUP POLITICAL ACTION COMMITTEE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 209 PENNSYLVANIA AVENUE, S.E.
City WASHINGTON State DC Zip Code 20003
FEC ID number of contributing federal political committee. **C** C00433060
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 30 / 2021
Transaction ID : SA11C.4686
Amount of Each Receipt this Period 5000.00
 Memo Item

B. UNITED PARCEL SERVICE INC. PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 55 GLENLAKE PARKWAY NE
City ATLANTA State GA Zip Code 30328
FEC ID number of contributing federal political committee. **C** C00064766
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 27 / 2021
Transaction ID : SA11C.4684
Amount of Each Receipt this Period 5000.00
 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
Amount of Each Receipt this Period
 Memo Item

| | |
|--|-----------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 10000.00 |
| TOTAL This Period (last page this line number only).....▶ | 128000.00 |

**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)
SALT CITY PAC

| | | | |
|---|--|--|------------------------------------|
| Full Name (Last, First, Middle Initial) A. Capelianis Consulting | | Date of Disbursement MM / DD / YYYY 11 / 04 / 2021 | |
| Mailing Address 221 N Patrick St. | | FEC Identification Number C [REDACTED] Transaction ID : SB21B.4730 Amount of Each Disbursement this Period [REDACTED] 3171.74 | |
| City Alexandria | State VA | Zip Code 22314 | Category/ Type [REDACTED] |
| Purpose of Disbursement Travel | | Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | <input type="checkbox"/> Memo Item |
| State: District: | | | |

| | | | |
|---|--|--|------------------------------------|
| Full Name (Last, First, Middle Initial) B. Capelianis Consulting | | Date of Disbursement MM / DD / YYYY 12 / 28 / 2021 | |
| Mailing Address 221 N Patrick St. | | FEC Identification Number C [REDACTED] Transaction ID : SB21B.4731 Amount of Each Disbursement this Period [REDACTED] 9685.37 | |
| City Alexandria | State VA | Zip Code 22314 | Category/ Type [REDACTED] |
| Purpose of Disbursement Event Catering/Site Rental | | Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | <input type="checkbox"/> Memo Item |
| State: District: | | | |

| | | | |
|---|--|---|------------------------------------|
| Full Name (Last, First, Middle Initial) C. Huckaby Davis Lisker | | Date of Disbursement MM / DD / YYYY 11 / 26 / 2021 | |
| Mailing Address 228 S Washington St. Ste. 115 | | FEC Identification Number C [REDACTED] Transaction ID : SB21B.4732 Amount of Each Disbursement this Period [REDACTED] 655.80 | |
| City Alexandria | State VA | Zip Code 22314 | Category/ Type [REDACTED] |
| Purpose of Disbursement Compliance Consulting | | Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | <input type="checkbox"/> Memo Item |
| State: District: | | | |

| | |
|--|---------------------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | [REDACTED] 13512.91 |
| TOTAL This Period (last page this line number only).....▶ | [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)
SALT CITY PAC

A. Huckaby Davis Lisker

Full Name (Last, First, Middle Initial)

Mailing Address 228 S Washington St.
Ste. 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement Compliance Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
12 / 28 / 2021

FEC Identification Number: C

Transaction ID : SB21B.4733

Amount of Each Disbursement this Period: 874.82

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

| | |
|--|----------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 874.82 |
| TOTAL This Period (last page this line number only).....▶ | 14387.73 |

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|------------------------------|------------------------------|--|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
SALT CITY PAC

A. CARLOS GIMENEZ FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address 1421 SW 107TH AVE #236

City MIAMI State FL Zip Code 33174

Purpose of Disbursement
Political Contribution

Candidate Name
GIMENEZ, CARLOS, , ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: FL District: 26

Date of Disbursement

MM / DD / YYYY
09 / 27 / 2021

FEC Identification Number

C C00735985

Transaction ID : SB23.4736

Amount of Each Disbursement this Period

1500.00

Memo Item

B. CATHY MCMORRIS RODGERS FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address BOX 137

City SPOKANE State WA Zip Code 99210

Purpose of Disbursement
Political Contribution

Candidate Name
RODGERS, CATHY MCMORRIS, , ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: WA District: 05

Date of Disbursement

MM / DD / YYYY
12 / 27 / 2021

FEC Identification Number

C C00390476

Transaction ID : SB23.4737

Amount of Each Disbursement this Period

1000.00

Memo Item

C. COLE FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 722256

City NORMAN State OK Zip Code 73070

Purpose of Disbursement
Political Contribution

Candidate Name
COLE, TOM, , ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: OK District: 04

Date of Disbursement

MM / DD / YYYY
12 / 27 / 2021

FEC Identification Number

C C00379735

Transaction ID : SB23.4738

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

3500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|------------------------------|------------------------------|--|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
SALT CITY PAC

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. DIANA FOR CONGRESS | | Date of Disbursement MM / DD / YYYY 09 / 20 / 2021 |
| Mailing Address PO BOX 7208 | | FEC Identification Number C C00741090 Transaction ID : SB23.4741 Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Memo Item |
| City KINGSPORT | State TN | |
| Zip Code 37664 | Category/ Type | |
| Purpose of Disbursement Political Contribution | | |
| Candidate Name HARSHBARGER, DIANA, , , | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: TN | District: 01 | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. DON BACON FOR CONGRESS | | Date of Disbursement MM / DD / YYYY 12 / 27 / 2021 |
| Mailing Address PO BOX 391368 | | FEC Identification Number C C00575167 Transaction ID : SB23.4744 Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Memo Item |
| City OMAHA | State NE | |
| Zip Code 68139 | Category/ Type | |
| Purpose of Disbursement Political Contribution | | |
| Candidate Name BACON, DONALD J, , , | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: NE | District: 02 | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. DREW FERGUSON FOR CONGRESS INC. | | Date of Disbursement MM / DD / YYYY 12 / 27 / 2021 |
| Mailing Address PO BOX 71067 | | FEC Identification Number C C00607838 Transaction ID : SB23.4745 Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Memo Item |
| City NEWMAN | State GA | |
| Zip Code 30271 | Category/ Type | |
| Purpose of Disbursement Political Contribution | | |
| Candidate Name FERGUSON, ANDERSON, DREW, , IV | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: GA | District: 03 | |

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|--|---------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 3000.00 |
| TOTAL This Period (last page this line number only).....▶ | |

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|------------------------------|------------------------------|--|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
SALT CITY PAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF HAGEDORN

Mailing Address 11 CIVIC CENTER PLZ STE 007

City MANKATO State MN Zip Code 56001

Purpose of Disbursement
Political Contribution

Candidate Name
HAGEDORN, JAMES, , ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: MN District: 01

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 26 / 2021

FEC Identification Number

C C00550707
Transaction ID : SB23.4748
Amount of Each Disbursement this Period
1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. FRIENDS OF MICHAEL GUEST

Mailing Address POST OFFICE BOX 470

City BRANDON State MS Zip Code 39043

Purpose of Disbursement
Political Contribution

Candidate Name
GUEST, MICHAEL PATRICK, , ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: MS District: 03

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 27 / 2021

FEC Identification Number

C C00665752
Transaction ID : SB23.4749
Amount of Each Disbursement this Period
1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. GARBARINO FOR CONGRESS

Mailing Address PO BOX 101

City BAYPORT State NY Zip Code 11705

Purpose of Disbursement
Political Contribution

Candidate Name
GARBARINO, ANDREW, , ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: NY District: 02

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 27 / 2021

FEC Identification Number

C C00729954
Transaction ID : SB23.4752
Amount of Each Disbursement this Period
1500.00

Memo Item

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

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

3500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|------------------------------|------------------------------|--|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
SALT CITY PAC

A. GARRET GRAVES FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 64845

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 27 | | 2021 |

City: BATON ROUGE State: LA Zip Code: 70896

FEC Identification Number

Purpose of Disbursement
Political Contribution

C C00558486

Candidate Name
GRAVES, GARRET, , ,

Category/
Type

Transaction ID : SB23.4753

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: LA District: 06

1000.00

Memo Item

B. GARY PALMER FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1919 OXMOOR RD #235

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 27 | | 2021 |

City: HOMEWOOD State: AL Zip Code: 35209

FEC Identification Number

Purpose of Disbursement
Political Contribution

C C00551374

Candidate Name
PALMER, GARY, , ,

Category/
Type

Transaction ID : SB23.4756

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: AL District: 06

1000.00

Memo Item

C. HUDSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 5053

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 27 | | 2021 |

City: CONCORD State: NC Zip Code: 28027

FEC Identification Number

Purpose of Disbursement
Political Contribution

C C00504522

Candidate Name
HUDSON, RICHARD L. JR., , ,

Category/
Type

Transaction ID : SB23.4759

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: NC District: 10

1000.00

Memo Item

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

3000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|------------------------------|------------------------------|--|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
SALT CITY PAC

A. JOHN CARTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 201 UNIV. OAKS BLVD, STE 540 #148

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 27 | | 2021 |

City ROUND ROCK State TX Zip Code 78665

FEC Identification Number

Purpose of Disbursement
Political Contribution

C C00371203

Candidate Name
CARTER, JOHN R. REP., , ,

Category/
Type

Transaction ID : SB23.4760

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: TX District: 31

1000.00

Memo Item

B. MARC FOR US INC.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 5158

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 27 | | 2021 |

City POUGHKEEPSIE State NY Zip Code 12602

FEC Identification Number

Purpose of Disbursement
Political Contribution

C C00789586

Candidate Name
MOLINARO, MARCUS J., , ,

Category/
Type

Transaction ID : SB23.4761

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: NY District: 19

1000.00

Memo Item

C. MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 476

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 27 | | 2021 |

City LYNDORA State PA Zip Code 16045

FEC Identification Number

Purpose of Disbursement
Political Contribution

C C00474189

Candidate Name
KELLY, MIKE, , ,

Category/
Type

Transaction ID : SB23.4764

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: PA District: 16

1000.00

Memo Item

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

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

3000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|------------------------------|------------------------------|--|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
SALT CITY PAC

A. MIKE ROGERS FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address 123 EAST 13TH STREET

City ANNISTON State AL Zip Code 36201

Purpose of Disbursement
Political Contribution

Candidate Name
ROGERS, MICHAEL, , ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: AL District: 03

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | / | 27 | / | 2021 |

FEC Identification Number

C C00367862

Transaction ID : SB23.4767

Amount of Each Disbursement this Period

| |
|---------|
| 1000.00 |
|---------|

Memo Item

B. MILLER-MEEKS FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 33

City OTTUMWA State IA Zip Code 52501

Purpose of Disbursement
Political Contribution

Candidate Name
MILLER-MEEKS, MARIANNETTE JANE, , ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: IA District: 02

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09 | / | 27 | / | 2021 |

FEC Identification Number

C C00558825

Transaction ID : SB23.4770

Amount of Each Disbursement this Period

| |
|---------|
| 1500.00 |
|---------|

Memo Item

C. PETER MEIJER FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 68554

City GRAND RAPIDS State MI Zip Code 49516

Purpose of Disbursement
Political Contribution

Candidate Name
MEIJER, PETER MR., , ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: MI District: 03

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09 | / | 27 | / | 2021 |

FEC Identification Number

C C00710962

Transaction ID : SB23.4771

Amount of Each Disbursement this Period

| |
|--------|
| 500.00 |
|--------|

Memo Item

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

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

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| 3000.00 |
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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|------------------------------|------------------------------|--|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
SALT CITY PAC

A. RUSS FULCHER FOR IDAHO

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 1375

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 11 | | 26 | | 2021 |

City MERIDIAN State ID Zip Code 83680

FEC Identification Number

Purpose of Disbursement
Political Contribution

| | |
|---|-----------|
| C | C00648295 |
|---|-----------|

Candidate Name
FULCHER, RUSSELL, , ,

Category/
Type

Transaction ID : SB23.4772

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: ID District: 01

| |
|---------|
| 1000.00 |
|---------|

Memo Item

B. VALADAO FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 5132 NORTH PALM AVENUE #227

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09 | | 27 | | 2021 |

City FRESNO State CA Zip Code 93704

FEC Identification Number

Purpose of Disbursement
Political Contribution

| | |
|---|-----------|
| C | C00499392 |
|---|-----------|

Candidate Name
VALADAO, DAVID, , ,

Category/
Type

Transaction ID : SB23.4775

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: CA District: 21

| |
|---------|
| 1000.00 |
|---------|

Memo Item

C. VERN BUCHANAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address P. O. BOX 48928

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 27 | | 2021 |

City SARASOTA State FL Zip Code 34230

FEC Identification Number

Purpose of Disbursement
Political Contribution

| | |
|---|-----------|
| C | C00412759 |
|---|-----------|

Candidate Name
BUCHANAN, VERNON, , ,

Category/
Type

Transaction ID : SB23.4777

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: FL District: 16

| |
|---------|
| 1000.00 |
|---------|

Memo Item

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

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

| |
|---------|
| 3000.00 |
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|------------------------------|------------------------------|--|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
SALT CITY PAC

A. WOMACK FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 508

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 27 | | 2021 |

City ROGERS State AR Zip Code 72757

FEC Identification Number

Purpose of Disbursement
Political Contribution

| | |
|---|-----------|
| C | C00477745 |
|---|-----------|

Candidate Name
WOMACK, STEVE, , ,

Category/
Type

Transaction ID : SB23.4780

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: AR District: 03

| |
|---------|
| 1000.00 |
|---------|

Memo Item

B. YOUNG KIM FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 2186

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09 | | 27 | | 2021 |

City FULLERTON State CA Zip Code 92837

FEC Identification Number

Purpose of Disbursement
Political Contribution

| | |
|---|-----------|
| C | C00665638 |
|---|-----------|

Candidate Name
YOUNG, KIM, , ,

Category/
Type

Transaction ID : SB23.4783

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: CA District: 39

| |
|---------|
| 1000.00 |
|---------|

Memo Item

C.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| | | | | |

City State Zip Code

FEC Identification Number

Purpose of Disbursement

| | |
|---|--|
| C | |
|---|--|

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

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

| |
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Memo Item

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

| |
|---------|
| 2000.00 |
|---------|

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

| |
|----------|
| 24000.00 |
|----------|

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
SALT CITY PAC

A. Congressional Football Game for Charity

Full Name (Last, First, Middle Initial)

Mailing Address 1200 Trinity Drive

City Alexandria State VA Zip Code 22314

Purpose of Disbursement Charitable Contribution

Candidate Name

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

State: District:

Date of Disbursement: 11 / 26 / 2021

FEC Identification Number: C

Transaction ID : SB29.4734

Amount of Each Disbursement this Period: 1000.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 1000.00 |
| TOTAL This Period (last page this line number only).....▶ | 1000.00 |