PAGE 1 / 9

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

	For Other Than An Aut	nonzea Committee	Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
INDEPENDENCE US	A PAC		
ADDRESS (number and street)	P.O. Box 7465		
▼ Check if different			
than previously reported. (ACC)	NEW YORK		NY 10150 - L
2. FEC IDENTIFICATION N	UMBER ▼ CIT	TY A	STATE ▲ ZIP CODE ▲
C C00532705		S THIS NEW (N) O	AMENDED (A)
4. TYPE OF REPORT (Choose One)	(b) Monthly Feb Report Due On:	20 (M2) May 20 (M	(Non-Election Year Only)
(a) Quarterly Reports:	Mar	20 (M3) Jun 20 (M	(Non-Election Year Only)
April 15 Quarterly Report (20 (M4) Jul 20 (M7	7) x Oct 20 (M10) Jan 31 (YE)
July 15 Quarterly Report (0	PRE-Election	Primary (12P)	General (12G) Runoff (12R)
October 15 Quarterly Report (0	Report for the:	Convention (12C)	Special (12S)
January 31 Year-End Report (YE)Election	on on	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	on (d) 30-Day POST-Election Report for the:	General (30G)	Runoff (30R) Special (30S)
Termination Report (TER)		on on	in the State of
5. Covering Period 0		through 09	M / D D / Y Y Y Y Y Y 30 2022
I certify that I have examined the		my knowledge and belief it is	true, correct and complete.
Type or Print Name of Treasure	Wolfson, Howard, , , er		
Signature of Treasurer Woly	fson, Howard, , ,	[Electronically Filed]	Date 10 / 19 / 2022
NOTE: Submission of false, error	neous, or incomplete information	n may subject the person signin	g this Report to the penalties of 52 U.S.C. § 30109
Office Use			FEC FORM 3X Rev. 05/2016

OF	SUMMARY PAGE RECEIPTS AND DISBURSEMENTS	
FEC Form 3X (Rev. 05/2016)		Page 2
Write or Type Committee Name		
INDEPENDENCE USA PAC		
Report Covering the Period: From: 09	01 2022	To: 09 / 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
_	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2022		107516.87
(b) Cash on Hand at Beginning of Reporting Period	376924.39	
(c) Total Receipts (from Line 19)	0.00	1517264.44
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	376924.39	1624781.31
7. Total Disbursements (from Line 31)	4591.80	1252448.72
B. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	372332.59	372332.59
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	4609.50	
This committee has qualified as a multicandid	date committee. (see FEC FORM 1M)	
For	further information contact:	
F	Federal Election Commission 999 E Street, NW Washington, DC 20463	
	Tall From 900 424 0530	

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016) Page 3

Write or Type Committee Name

INDEPENDENCE USA PAC

01 09 2022 09 30 2022 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 0.00 1509264.44 (i) Itemized (use Schedule A)..... 0.00 0.00 (ii) Unitemized (iii) TOTAL (add 1509264.44 0.00 Lines 11(a)(i) and (ii).....▶ 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 8000.00 (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 1517264.44 0.00 Totals to Line 33, page 5)▶ 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees..... 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... 0.00 0.00 17. Other Federal Receipts 0.00 (Dividends, Interest, etc.)..... 0.00 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3)..... 0.00 0.00 (b) Levin Funds (from Schedule H5) (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))....... 0.00 1517264.44 20. Total Federal Receipts 0.00 1517264.44 (subtract Line 18(c) from Line 19)▶

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
Operating Expenditures: (a) Allocated Federal/Non-Federal		Jaionaa Tour to Bute		
Activity (from Schedule H4)				
(i) Federal Share	0.00	0.00		
(ii) Non-Federal Share	0.00	0.00		
(b) Other Federal Operating	7 7 7			
Expenditures	4591.80	183758.72		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	4591.80	183758.72		
Transfers to Affiliated/Other Party				
Contributions to	0.00	0.00		
Federal Candidates/Committees and Other Political Committees	0.00	0.00		
Independent Expenditures	0.00	400000000		
(use Schedule E)	0.00	1068690.00		
(52 U.S.C. § 30116(d)) (use Schedule F)	0.00	0.00		
Loan Repayments Made	0.00	0.00		
Loans Mode	0.00	0.00		
Loans Made	0.00	0.00		
Than Political Committees	0.00	0.00		
(b) Political Party Committees	0.00	0.00		
(c) Other Political Committees	4 4			
(such as PACs)	0.00	0.00		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00		
Other Dishuraements (Including	4 4	4 4		
Other Disbursements (Including Non-Federal Donations)	0.00	0.00		
,	4 4	7 7 7		
Federal Election Activity (52 U.S.C. § 30101(2) (a) Allocated Federal Election Activity	20))			
(from Schedule H6)				
(i) Federal Share	0.00	0.00		
(ii) "Levin" Share	0.00	0.00		
(b) Federal Election Activity Paid	0.00	0.00		
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		
VAN SANTES STATE	0.00	0.00		
Total Disbursements (add Lines 21(c), 22,				
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	4591.80	1252448.72		
Total Federal Disbursements				
(subtract Line 21(a)(ii) and Line 30(a)(ii)				
from Line 31)	4591.80	1252448.72		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5 **COLUMN A** COLUMN B III. Net Contributions/ **Total This Period** Calendar Year-to-Date **Operating Expenditures** 33. Total Contributions (other than loans) 0.00 1517264.44 (from Line 11(d), page 3) 34. Total Contribution Refunds 0.00 0.00 (from Line 28(d))..... 35. Net Contributions (other than loans) 0.00 1517264.44 (subtract Line 34 from Line 33) 36. Total Federal Operating Expenditures 4591.80 183758.72 (add Line 21(a)(i) and Line 21(b))▶ 37. Offsets to Operating Expenditures 0.00 0.00 (from Line 15, page 3)..... 38. Net Operating Expenditures 4591.80 183758.72 (subtract Line 37 from Line 36)

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SCHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 6 OF 9						
ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the Detailed Summary Page		y one)					
				22		27 20b			
[28b	28c 29 30b				
Any information copied from such Reports and State or for commercial purposes, other than using the national state of the									
NAME OF COMMITTEE (In Full)									
INDEPENDENCE USA PAC									
Full Name (Last, First, Middle Initial)				D . (D)					
A. Bank of America					Date of Disbursement				
Mailing Address 114 W. 47th St. 6th Floor				09 15 2022					
City	State	Zip Code		FEC Identi	ification Number				
New York Purpose of Disbursement	NY	10036							
Bank Fee			001	C					
Candidate Name					action ID : SB21B.4836	٦			
			Category/ Type	Amount of	Each Disbursement this Period	J			
Office Sought: House Disburse	ment For:		71	1 []	465.80	н			
Senate	Primary	General		7 7 4					
President	Other (spe	ecify) 🔻		Memo	Item				
State: District:									
Full Name (Last, First, Middle Initial) B. Geller Advisors I.I.C.				Date of Di	ichurcamant				
B. Geller Advisors LLC				Date of Disbursement					
Mailing Address 909 Third Avenue					09 26 2022				
City	State	Zip Code		FFC Identi	ification Number				
New York	NY	10022							
Purpose of Disbursement Financial Advisory Services Candidate Name Category/ Type					Transaction ID : SB21B.4835				
					Office Sought: House Disburse		3514.00		
Senate	General ecify)			7					
President		Memo	Item						
State: District:									
Full Name (Last, First, Middle Initial) C. The Outcast Agency, LLC					isbursement				
Mailing Address 100 Montgomery Street Suite 1201				09	26 2022				
City	State	Zip Code		FEC Identi	ification Number				
San Francisco	CA	94104			incation Number				
Purpose of Disbursement Website Services		001	C	action ID : SB21B.4834					
Candidate Name		Category/ Type			Amount of Each Disbursement this Period				
Office Sought: House Disbursement For: Senate Primary General				1 1	225.00				
				4 4					
President Other (specify) ▼					Item				
State: District:									
SUBTOTAL of Disbursements This Page (optional).					4204.80				
TOTAL This Period (last page this line number only	·)					٦			

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions from such Statements may not be sold or used by any person for the purpose of soliciting contributions for such committee. Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions from such committee. Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions from such committee. NAME OF COMMITTEE (in Park) INDEPENDENCE USA PAC Full Name (Last, First, Middle Initial) A Venable LLP Meiling Address 600 Massachusetts Avenue, NW City Washington Office Sought: But Name (Last, First, Middle Initial) Anount of Each Disbursement Candidate Name Office Sought: House Disbursement For: State: District: Full Name (Last, First, Middle Initial) City State: District: Full Name (Last, First, Middle Initial) City State: District: Full Name (Last, First, Middle Initial) City State: District: Full Name (Last, First, Middle Initial) City State: District: Full Name (Last, First, Middle Initial) City State: District: Full Name (Last, First, Middle Initial) City State: District: Full Name (Last, First, Middle Initial) City State: District: Full Name (Last, First, Middle Initial) City State: District: Full Name (Last, First, Middle Initial) City State: District: District: Full Name (Last, First, Middle Initial) City State: District: District: Amount of Each Disbursement bits Period Type: Amount of Each Disbursement bits Period Type: District: Amount of Each Disbursement bits Period Type: Amount of Each Disbursement bits Period Type: District: District: Substorate (specify) Type: District: Amount of Each Disbursement bits Period Type: Amount of Each Disbursement bits Period Type: District: District: District: District: District: District: District: District:	SCHEDULE B (FEC Form 3X)		Detailed Summary Page		FOR LINE NUMBER: PAGE 7 OF 9						
Detailed Summary Page	ITEMIZED DISBURSEMENTS				y one)						
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of seliciting 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 PLI) INDEPENDENCE USA PAC Full Name (Last, First, Middel Initial) A Venable LLP Mailing Address 600 Massachusetts Avenue, NW City Washington Purpose of Disbursement Legal Services Candidate Name Office Sought House Primary Other (specify) State City State Disbursement District Full Name (Last, First, Middel Initial) B. District Full Name (Last, First, Middel Initial) B. District Full Name (Last, First, Middel Initial) B. Date of Disbursement Transaction ID: S8218.4833 Amount of Each Disbursement ins Period Transaction ID: S8218.4833 Amount of Each Disbursement ins Period Transaction ID: S8218.4833 Amount of Each Disbursement ins Period Transaction ID: S8218.4833 Amount of Each Disbursement City Furpose of Disbursement Category/ Type Office Sought House Primary Office Sought House Primary Office Sought House Primary Office Sought District Full Name (Last, First, Middle Initial) Date of Disbursement Transaction ID: S8218.4833 Amount of Each Disbursement this Period Transaction ID: S8218.4833 Amount of Each Disbursement Transactio											
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Washington Purpose of Disbursement Legal Services Candidate Name Office Sought: House Primary General District: Full Name (Last, First, Middle Initial) B. Mailing Address City State Disbursement For: Senate President State: District: President State: District: Senate Disbursement For: General Other (specify) ▼ State Zip Code President Disbursement Candidate Name Category/ Type Office Sought: House Disbursement For: General Other (specify) Type Office Sought: House Disbursement For: General Other (specify) General Disbursement To District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code President Disbursement Candidate Name City State Zip Code President Disbursement Category/ Type District: Full Name (Last, First, Middle Initial) C. State Zip Code President Disbursement This Peade (optional)	Mailing Address 600 Massachusetts Avenue, NW				7						
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State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code FEC Identification Number Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Primary General Other (specify) State: District: Substrotal of Disbursements This Page (optional)						7	4	45			
State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code FEC Identification Number Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District: Substate: District: Mailing Address FEC Identification Number Category/ Type Amount of Each Disbursement this Period Memo Item 387.00					Memo Item						
City State Zip Code FEC Identification Number Candidate Name Category/ Type Office Sought: House Primary General President Other (specify) ▼ Subtrotal of Disbursements This Page (optional)								L Memo Rem			
City State Zip Code FEC Identification Number Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ Subtotal of Disbursements This Page (optional)	,	Date of	Dishursen	nent							
City State Zip Code FEC Identification Number Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ State: District: Substitute State Disbursement For: Senate Primary General Memo Item Memo Item Substitute Memo Item	o .					YYY					
Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General President State: District: Substrict: Memo Item Substrict: Amount of Each Disbursement this Period Memo Item 387.00	Mailing Address						J L				
Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District: SUBTOTAL of Disbursements This Page (optional)	City	State	Zip Code		FEC Ide	ntification	Number				
Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District: SUBTOTAL of Disbursements This Page (optional)	Purpose of Disbursement	se of Disbursement									
Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District: SUBTOTAL of Disbursements This Page (optional)	·							-			
Office Sought: House Disbursement For: Senate Primary General President Other (specify) ▼ SUBTOTAL of Disbursements This Page (optional)	Candidate Name					Amount of Each Disbursement this Period					
State: District: Other (specify) SUBTOTAL of Disbursements This Page (optional)	Office Sought: House Disburs					40.					
State: District: SUBTOTAL of Disbursements This Page (optional)				4 4							
SUBTOTAL of Disbursements This Page (optional)					Mem	o Item					
AEAL DO	State: DISTRICT:										
AEA 00	SUBTOTAL of Disbursements This Page (optional)					40.	- 40	387.00			
TOTAL This Period (last page this line number only)						-	,	4591.80			

SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 8
FOR LINE NUMBER: (check only one)

9 **X** 10

OF

NAME OF COMMITTEE (In Full) INDEPENDENCE USA PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Financial Advisory Services Geller Advisors LLC Mailing Address 909 Third Avenue State Zip Code New York NY 10022 Transaction ID: SD10.4831 Outstanding Balance Beginning This Period 3514.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 3514.00 0.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Financial Advisory Services Geller Advisors LLC Mailing Address 909 Third Avenue City State Zip Code New York 10022 Outstanding Balance Beginning This Period Transaction ID: SD10.4839 0.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 3793.00 0.00 3793.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Website Services The Outcast Agency, LLC Mailing Address 100 Montgomery Street Suite 1201 City State Zip Code CA 94104 San Francisco Outstanding Balance Beginning This Period Transaction ID: SD10.4830 225.00 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 0.00 225.00 3793.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3X) **DEBTS AND OBLIGATIONS**

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE OF FOR LINE NUMBER: (check only one)

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	ME OF COMMITTEE (In Full) IDEPENDENCE USA PAC				
	A. Full Name (Last, First, Middle Initial) of Debtor of The Outcast Agency, LLC	Nature of Debt (Purpose): Website Services			
	Mailing Address 100 Montgomery Street Suite 1201				
	City San Francisco				
	Outstanding Balance Beginning This Period	Transaction ID : SD10.4837 Outstanding Balance at Close of This Period			
	0.00 Amount Incurred This Period				
	225.00	225.00			
Ī	B. Full Name (Last, First, Middle Initial) of Debtor of Venable LLP	Nature of Debt (Purpose): Legal Services			
ľ	Mailing Address 600 Massachusetts Avenue, NW				
	City Washington	State DC	Zip Code 20001		
	Outstanding Balance Beginning This Period 387.00	Transaction ID : SD10.4829			
	Amount Incurred This Period	Outstanding Balance at Close of This Period			
	0.00	0.00			
	C. Full Name (Last, First, Middle Initial) of Debtor of Venable LLP	Nature of Debt (Purpose): Legal Services			
Ī	Mailing Address 600 Massachusetts Avenue, NW				
Ī	City Washington	State DC	Zip Code 20001		
	Outstanding Balance Beginning This Period			Transaction ID : SD10.4838	
	0.00 Amount Incurred This Period	Dove	ment This Deviced	Outstanding Polones at Class of This Paried	
	591.50	Fayi	nent This Period 0.00	Outstanding Balance at Close of This Period 591.50	
	CURTOTAL C. This Desired This D			816.50	
	SUBTOTALS This Period This Page (optional)			7 7 7	
	TOTALS This Period (last page this line number or			4609.50 0.00	
3)	TOTAL OUTSTANDING LOANS from Schedule C	(last page on	ly)	0.00	
	ADD 2) and 3) and carry forward to appropriate lin			4609.50	