

# 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.

CAL Freedom PAC (Multi-Candidate Cmte)

ADDRESS (number and street)   
  
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C00629147

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

### 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- |                                      |                                      |                                       |  |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)  | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)  | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE)                           |

- (c) 12-Day PRE-Election Report for the:
- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) |                                       |

Election on  /  /  in the State of

- (d) 30-Day POST-Election Report for the:
- |   |                                       |  |
|---|---------------------------------------|--|
| <input checked="" type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|---|---------------------------------------|--|

Election on  /  /  in the State of

5. Covering Period  /  /  through  /  /

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

Montgomery, Thomas, E, , III

Type or Print Name of Treasurer

Signature of Treasurer *Montgomery, Thomas, E, , III* [Electronically Filed] Date  /  /

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

Office Use Only										
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**CAL Freedom PAC (Multi-Candidate Cmte)**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2022"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="351.38"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="101000.00"/>	<input type="text" value="174579.97"/>
(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="101351.38"/>	<input type="text" value="174579.97"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="101130.00"/>	<input type="text" value="174358.59"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="221.38"/>	<input type="text" value="221.38"/>
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="6145.51"/>	

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

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**CAL Freedom PAC (Multi-Candidate Cmte)**

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).....	0.00	1500.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	1500.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	0.00	1500.00
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.).....	101000.00	173079.97
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)).....▶	101000.00	174579.97
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	101000.00	174579.97

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	101000.00	173897.30
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).....	130.00	461.29
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)) ..	101130.00	174358.59
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	101130.00	174358.59

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	0.00	1500.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	0.00	1500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 12
<input 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 checked="" type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**CAL Freedom PAC (Multi-Candidate Cmte)**

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

Mailing Address 2557 Windy Court

City Merced State CA Zip Code 95340

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

Name of Employer (for Individual) R Abbate Enterprises Occupation (for Individual) Owner

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
11 / 03 / 2022

**Transaction ID : A-1047**

Amount of Each Receipt this Period  
1000.00

Memo Item

Non-Contribution Account

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

Mailing Address 1747 Pennsylvania Avenue, NW  
5th Floor

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00504530

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

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 25 / 2022

**Transaction ID : A-1039**

Amount of Each Receipt this Period  
100000.00

Memo Item

Earmarked contribution to oppose Adam Gray

Earmarked contribution to oppose Adam Gray

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

Mailing Address

City State Zip Code

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	101000.00
<b>TOTAL</b> This Period (last page this line number only).....	101000.00

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 7 OF 12
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**CAL Freedom PAC (Multi-Candidate Cmte)**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Political Communications, Inc</b>			Nature of Debt (Purpose): Compliance and Accounting
Mailing Address 4340 Redwood Highway F119			
City San Rafael	State CA	Zip Code 94903	

Outstanding Balance Beginning This Period 500.00	<b>Transaction ID : D-974</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Political Communications, Inc</b>			Nature of Debt (Purpose): Compliance and Accounting
Mailing Address 4340 Redwood Highway F119			
City San Rafael	State CA	Zip Code 94903	

Outstanding Balance Beginning This Period 500.00	<b>Transaction ID : D-975</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Political Communications, Inc</b>			Nature of Debt (Purpose): Compliance and Accounting
Mailing Address 4340 Redwood Highway F119			
City San Rafael	State CA	Zip Code 94903	

Outstanding Balance Beginning This Period 500.00	<b>Transaction ID : D-976</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 500.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	1500.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> 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 8 OF 12
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**CAL Freedom PAC (Multi-Candidate Cmte)**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Political Communications, Inc</b>			Nature of Debt (Purpose): Compliance and Accounting
Mailing Address 4340 Redwood Highway F119			
City San Rafael	State CA	Zip Code 94903	

Outstanding Balance Beginning This Period <input type="text" value="500.00"/>	<b>Transaction ID : D-1000</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="500.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Political Communications, Inc</b>			Nature of Debt (Purpose): Compliance and Accounting
Mailing Address 4340 Redwood Highway F119			
City San Rafael	State CA	Zip Code 94903	

Outstanding Balance Beginning This Period <input type="text" value="500.00"/>	<b>Transaction ID : D-1001</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="500.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Political Communications, Inc</b>			Nature of Debt (Purpose): Compliance and Accounting
Mailing Address 4340 Redwood Highway F119			
City San Rafael	State CA	Zip Code 94903	

Outstanding Balance Beginning This Period <input type="text" value="500.00"/>	<b>Transaction ID : D-1002</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="500.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="1500.00"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>



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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 9 OF 12
	FOR LINE NUMBER: (check only one)
	<input type="checkbox"/> 9
	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**CAL Freedom PAC (Multi-Candidate Cmte)**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Political Communications, Inc</b>			Nature of Debt (Purpose): Compliance and Accounting
Mailing Address 4340 Redwood Highway F119			
City San Rafael	State CA	Zip Code 94903	

Outstanding Balance Beginning This Period <input type="text" value="500.00"/>	<b>Transaction ID : D-1003</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="500.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Political Communications, Inc</b>			Nature of Debt (Purpose): Compliance and Accounting
Mailing Address 4340 Redwood Highway F119			
City San Rafael	State CA	Zip Code 94903	

Outstanding Balance Beginning This Period <input type="text" value="500.00"/>	<b>Transaction ID : D-1004</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="500.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Political Communications, Inc</b>			Nature of Debt (Purpose): Compliance and Accounting
Mailing Address 4340 Redwood Highway F119			
City San Rafael	State CA	Zip Code 94903	

Outstanding Balance Beginning This Period <input type="text" value="500.00"/>	<b>Transaction ID : D-1005</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="500.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="1500.00"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 10 OF 12
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**CAL Freedom PAC (Multi-Candidate Cmte)**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Political Communications, Inc</b>			Nature of Debt (Purpose): Compliance and Accounting
Mailing Address 4340 Redwood Highway F119			
City San Rafael	State CA	Zip Code 94903	

Outstanding Balance Beginning This Period 500.00	<b>Transaction ID : D-1010</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Political Communications, Inc</b>			Nature of Debt (Purpose): Compliance and Accounting
Mailing Address 4340 Redwood Highway F119			
City San Rafael	State CA	Zip Code 94903	

Outstanding Balance Beginning This Period 500.00	<b>Transaction ID : D-1011</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Venture Strategic Inc</b>			Nature of Debt (Purpose): Walk list data
Mailing Address 1 Corporate Park #101			
City Irvine	State CA	Zip Code 92606	

Outstanding Balance Beginning This Period 645.51	<b>Transaction ID : D-654</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 645.51

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	1645.51
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	6145.51
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	6145.51

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
CAL Freedom PAC (Multi-Candidate Cmte)
FEC IDENTIFICATION NUMBER
C C00629147

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

Full Name of Payee: Go Big Media
Mailing Address: 44 Canal Center Plaza, Suite 315, Alexandria, VA 22314
Purpose of Expenditure: Media campaign
Category/Type: 004
Date of Public Distribution/Dissemination: 10/26/2022
Amount: 41800.00
Transaction ID: E-1044
Date of Disbursement or Obligation: 10/26/2022
Name of Federal Candidate: Gray, Adam, C.,
Office Sought: House, District: 13, State: CA
Disbursement For: General 2022

Full Name of Payee: Go Big Media
Mailing Address: 44 Canal Center Plaza, Suite 315, Alexandria, VA 22314
Purpose of Expenditure: Ad production costs
Category/Type: 004
Date of Public Distribution/Dissemination: 10/26/2022
Amount: 5500.00
Transaction ID: E-1046
Date of Disbursement or Obligation: 10/26/2022
Name of Federal Candidate: Gray, Adam, C.,
Office Sought: House, District: 13, State: CA
Disbursement For: General 2022

(a) SUBTOTAL of Itemized Independent Expenditures ..... 47300.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....
(c) TOTAL Independent Expenditures .....

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

Montgomery, Thomas, E., III

[Electronically Filed]

Date

12 / 05 / 2022

Signature

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

NAME OF COMMITTEE (In Full) <b>CAL Freedom PAC (Multi-Candidate Cmte)</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00629147
--	--

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

Full Name of Payee <b>PG Placements</b> <input type="checkbox"/> Memo Item Non-Contribution Account	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address PO Box 812	Amount <input type="text"/>
City Alewxandria State VA Zip Code 22313	<b>Transaction ID : E-1042</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure Contribution Category/Type 004	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Gray, Adam, C., , Office Sought: <input checked="" type="checkbox"/> House District: 13 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 174192.59	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address	Amount <input type="text"/>
City State Zip Code	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure Category/Type	Name of Federal Candidate: <input type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<input type="text"/> 53700.00
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....	<input type="text"/>
<b>(c) TOTAL</b> Independent Expenditures .....	<input type="text"/> 101000.00

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

Montgomery, Thomas, E., III

[Electronically Filed]

Date  /  /

Signature