

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

Build the Bench PAC

ADDRESS (number and street) 499 S. Capitol Street, SW Suite 420 Washington DC 20003 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C C00794198

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

4. TYPE OF REPORT (Choose One)

- (a) Quarterly Reports: April 15 Quarterly Report (Q1) [X] 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: Feb 20 (M2) [] Mar 20 (M3) [] Apr 20 (M4) [] May 20 (M5) [] Jun 20 (M6) [] Jul 20 (M7) [] Aug 20 (M8) [] Sep 20 (M9) [] Oct 20 (M10) [] Nov 20 (M11) (Non-Election Year Only) [] Dec 20 (M12) (Non-Election Year Only) [] Jan 31 (YE) []

(c) 12-Day PRE-Election Report for the: Primary (12P) [] General (12G) [] Runoff (12R) [] Convention (12C) [] Special (12S) [] Election on MM/DD/YYYY in the State of

(d) 30-Day POST-Election Report for the: General (30G) [] Runoff (30R) [] Special (30S) [] Election on MM/DD/YYYY in the State of

5. Covering Period 01/01/2023 through 06/30/2023

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

Signature of Treasurer Broz, Randall, , , Date 10/05/2023

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

Build the Bench 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="2023"/>		<input type="text" value="31858.45"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="31858.45"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="37200.00"/>	<input type="text" value="37200.00"/>
(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="69058.45"/>	<input type="text" value="69058.45"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="49476.96"/>	<input type="text" value="49476.96"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="19581.49"/>	<input type="text" value="19581.49"/>
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 the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Build the Bench PAC

Report Covering the Period: From: 01 / 01 / 2023 To: 06 / 30 / 2023

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).....	25100.00	25100.00
(ii) Unitemized	150.00	150.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	25250.00	25250.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	10000.00	10000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	35250.00	35250.00
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).....	1950.00	1950.00
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)).....▶	37200.00	37200.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	37200.00	37200.00

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	47476.96	47476.96
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	47476.96	47476.96
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2000.00	2000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	49476.96	49476.96
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	49476.96	49476.96

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)	35250.00	35250.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	35250.00	35250.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	47476.96	47476.96
37. Offsets to Operating Expenditures (from Line 15, page 3).....	1950.00	1950.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	45526.96	45526.96

**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 29
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Build the Bench PAC

A. Barnes, Dwight, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14 Olympic Ct

City New Orleans	State LA	Zip Code 70131
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Crescent Crown Distributing	Occupation (for Individual) Public Relations Director
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	10	/	2023

Transaction ID : SA11AI.4340

Amount of Each Receipt this Period
300.00

Memo Item

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

Mailing Address 800 Edgewood Dr.

City Thibodaux	State LA	Zip Code 70301
-------------------	-------------	-------------------

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

Name of Employer (for Individual) Block Firm, LLC	Occupation (for Individual) Attorney
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	16	/	2023

Transaction ID : SA11AI.4364

Amount of Each Receipt this Period
800.00

Memo Item
Earmarked by ActBlue

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

Mailing Address PO BOX 52783

City Baton Rouge	State LA	Zip Code 70892
---------------------	-------------	-------------------

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

Name of Employer (for Individual) City of Baton Rouge	Occupation (for Individual) Mayor - President
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	10	/	2023

Transaction ID : SA11AI.4334

Amount of Each Receipt this Period
300.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1400.00
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 7 OF 29
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Build the Bench PAC

A. Gaines, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 425 Atherton Dr
 City Metairie State LA Zip Code 70005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Executive Occupation (for Individual) Ochsner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 02 / 16 / 2023
Transaction ID : SA11AI.4367
 Amount of Each Receipt this Period 800.00
 Memo Item
 Earmarked by ActBlue

B. Hart, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3721 St Charles Ave Unit A
 City New Orleans State LA Zip Code 70115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Oschner Health Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 02 / 16 / 2023
Transaction ID : SA11AI.4369
 Amount of Each Receipt this Period 1000.00
 Memo Item
 Earmarked by ActBlue

C. Hulefeld, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 Newcomb Blvd
 City New Orleans State LA Zip Code 70118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Oschner Health Occupation (for Individual) EVP & System COO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 02 / 16 / 2023
Transaction ID : SA11AI.4371
 Amount of Each Receipt this Period 800.00
 Memo Item
 Earmarked by ActBlue

SUBTOTAL of Receipts This Page (optional).....	2600.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 8 OF 29
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Build the Bench PAC

A. Kees, Gabrielle, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5117 Cheneau Lane
 City Baton Rouge State LA Zip Code 70808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Cornerstone Government Affairs Occupation (for Individual) Principal
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 01 / 19 / 2023
Transaction ID : SA11AI.4342
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. Levendis, Catherine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6530 Argonne Blvd
 City New Orleans State LA Zip Code 70124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ochsner Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 02 / 02 / 2023
Transaction ID : SA11AI.4356
 Amount of Each Receipt this Period 800.00
 Memo Item
 Earmarked by ActBlue

C. Madina, Telley, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4747 Brighton Pl.
 City New Orleans State LA Zip Code 70131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The Madina Group Consulting Occupation (for Individual) Owner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 02 / 16 / 2023
Transaction ID : SA11AI.4360
 Amount of Each Receipt this Period 2500.00
 Memo Item
 Earmarked by ActBlue

SUBTOTAL of Receipts This Page (optional)..... ▶ 8300.00
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 checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Build the Bench PAC

A. Major, Brittany, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1201 Canal Streer
 City New Orleans State LA Zip Code 70112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Major Services Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 02 / 2023
Transaction ID : SA11AI.4354
 Amount of Each Receipt this Period
 300.00
 Memo Item

B. Nichols, Kristy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1219 Eleonore
 City New Orleans State LA Zip Code 70115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ochsner Occupation (for Individual) Health Care
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 16 / 2023
Transaction ID : SA11AI.4372
 Amount of Each Receipt this Period
 800.00
 Memo Item
 Earmarked by ActBlue

C. November, Pete, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5914 Coliseum St
 City New Orleans State LA Zip Code 70115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Oschner Occupation (for Individual) CFO
 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
 02 / 16 / 2023
Transaction ID : SA11AI.4358
 Amount of Each Receipt this Period
 2000.00
 Memo Item
 Earmarked by ActBlue

SUBTOTAL of Receipts This Page (optional).....	3100.00
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 checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Build the Bench PAC

A. Quirk, Aimee, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4419 St Charles Ave #1
 City New Orleans State LA Zip Code 70115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Oschner Health Occupation (for Individual) CEO, InnovationOschner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 02 / 16 / 2023
Transaction ID : SA11AI.4370
 Amount of Each Receipt this Period 800.00
 Memo Item
 Earmarked by ActBlue

B. Rainwater Consulting, LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5117 Cheneau Ln
 City Baton Rouge State LA Zip Code 70808
 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 ▼ 5000.00

Date of Receipt 01 / 19 / 2023
Transaction ID : SA11AI.4346
 Amount of Each Receipt this Period 5000.00
 Memo Item

C. Rainwater, Paul, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5117 Cheneau lane
 City Baton Rouge State LA Zip Code 70808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Rainwater Consulting LLC Occupation (for Individual) Consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 01 / 19 / 2023
Transaction ID : SA11AI.4346.0
 Amount of Each Receipt this Period 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	800.00
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 checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Build the Bench PAC

A. Ruckert, Kyle, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1557 Brame Drive
 City Baton ROuge State LA Zip Code 70808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Bold Strategies Occupation (for Individual) Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 30 / 2023
Transaction ID : SA11AI.4374
 Amount of Each Receipt this Period 1000.00
 Memo Item
 Earmarked by ActBlue

B. Rutledge, Domoine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 66551
 City Baton Rouge State LA Zip Code 70896
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CSRS, LLC Occupation (for Individual) Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 02 / 2023
Transaction ID : SA11AI.4352
 Amount of Each Receipt this Period 300.00
 Memo Item

C. Seoane, Leonardo, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1011 Nashville Ave
 City New Orleans State LA Zip Code 70115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ochsner Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 02 / 16 / 2023
Transaction ID : SA11AI.4361
 Amount of Each Receipt this Period 800.00
 Memo Item
 Earmarked by ActBlue

SUBTOTAL of Receipts This Page (optional).....	2100.00
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 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)
Build the Bench PAC

A. Stewart, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1840 Dunmore Lane
 City Clemmons State NC Zip Code 27012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) University of Illinois Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 05 / 31 / 2023
Transaction ID : SA11AI.4481
 Amount of Each Receipt this Period 1500.00
 Memo Item

B. ActBlue Technical Services
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 366 Summer Street
 City Somerville State MA Zip Code 02144
 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 ▼ 1500.00

Date of Receipt 05 / 31 / 2023
Transaction ID : SA11AI.4481.0
 Amount of Each Receipt this Period 1500.00
 Memo Item

C. Teamer, Cherie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5130 Arts Street
 City New Orleans State LA Zip Code 70122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Radius Strategy Group Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 01 / 10 / 2023
Transaction ID : SA11AI.4336
 Amount of Each Receipt this Period 300.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1800.00
TOTAL This Period (last page this line number only).....▶	25100.00

**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 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)
Build the Bench PAC

A. JONES WALKER L.L.P. POLITICAL ACTION COMMITTEE

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

Mailing Address 201 ST. CHARLES AVENUE
49TH FLOOR

City NEW ORLEANS State LA Zip Code 70170

FEC ID number of contributing federal political committee. **C** C00111534

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
01 / 24 / 2023

Transaction ID : SA11C.4343

Amount of Each Receipt this Period
5000.00

Memo Item

B. SMOKE BEND ASSOCIATES LLC FEDERAL POLITICAL ACTION COMMITTEE

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

Mailing Address 6660 RIVERSIDE DRIVE
SUITE 208

City METAIRIE State LA Zip Code 70003

FEC ID number of contributing federal political committee. **C** C00378950

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
06 / 30 / 2023

Transaction ID : SA11C.4479

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
MM / DD / YYYY

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).....▶	10000.00

**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 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 checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Build the Bench PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Reese, Dorothy, F, ,		Date of Receipt MM / DD / YYYY 06 / 01 / 2023 Transaction ID : SA15.4485
Mailing Address 4824 Bancroft Drive		Amount of Each Receipt this Period 1650.00
City New Orleans	State LA	Zip Code 70122
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) DMM & Associates, LLC	Occupation (for Individual) Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1650.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. The Washington Mardi Gras Corporation		Date of Receipt MM / DD / YYYY 01 / 24 / 2023 Transaction ID : SA15.4526
Mailing Address 8701 Jefferson Highway Ste B		Amount of Each Receipt this Period 300.00
City Baton Rouge	State LA	Zip Code 70809
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual)	Occupation (for Individual)	Refund
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C.		Date of Receipt MM / DD / YYYY
Mailing Address		Amount of Each Receipt this Period
City	State	Zip Code
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual)	Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼	

SUBTOTAL of Receipts This Page (optional).....▶	1950.00
TOTAL This Period (last page this line number only).....▶	1950.00

**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)

Build the Bench PAC

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address 366 Summer Street

City
Somerville

State
MA

Zip Code
02144

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	6		2	0	2	3

FEC Identification Number

C
Transaction ID : SB21B.4457

Amount of Each Disbursement this Period

406.85

Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address 366 Summer Street

City
Somerville

State
MA

Zip Code
02144

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	0		2	0	2	3

FEC Identification Number

C
Transaction ID : SB21B.4458

Amount of Each Disbursement this Period

39.50

Memo Item

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address 366 Summer Street

City
Somerville

State
MA

Zip Code
02144

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	1		2	0	2	3

FEC Identification Number

C
Transaction ID : SB21B.4487

Amount of Each Disbursement this Period

59.25

Memo Item

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

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

505.60

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)
Build the Bench PAC

Full Name (Last, First, Middle Initial) A. Angerholzer Broz Consulting LLC		Date of Disbursement MM / DD / YYYY 03 / 27 / 2023
Mailing Address 499 S Capitol St SW Suite 420		FEC Identification Number C Transaction ID : SB21B.4413 Amount of Each Disbursement this Period 24794.94
City Washington	State DC	
Zip Code 20003		Memo Item <input type="checkbox"/>
Purpose of Disbursement Fundraising Consulting Fees and Reimbursed Expenses		
Candidate Name		Category/Type
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) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Angerholzer Broz Consulting LLC		Date of Disbursement MM / DD / YYYY 03 / 27 / 2023
Mailing Address 499 S Capitol St SW Suite 420		FEC Identification Number C Transaction ID : SB21B.4413.c Amount of Each Disbursement this Period 500.00
City Washington	State DC	
Zip Code 20003		Memo Item <input checked="" type="checkbox"/>
Purpose of Disbursement Bookkeeping		
Candidate Name		Category/Type
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) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Angerholzer Broz Consulting LLC		Date of Disbursement MM / DD / YYYY 03 / 27 / 2023
Mailing Address 499 S Capitol St SW Suite 420		FEC Identification Number C Transaction ID : SB21B.4413. Amount of Each Disbursement this Period 500.00
City Washington	State DC	
Zip Code 20003		Memo Item <input checked="" type="checkbox"/>
Purpose of Disbursement Bookkeeping		
Candidate Name		Category/Type
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) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	24794.94
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Build the Bench PAC

Full Name (Last, First, Middle Initial) A. Angerholzer Broz Consulting LLC		Date of Disbursement MM / DD / YYYY 03 / 27 / 2023
Mailing Address 499 S Capitol St SW Suite 420		FEC Identification Number C Transaction ID : SB21B.4413.4 Amount of Each Disbursement this Period 500.00
City Washington	State DC	
Zip Code 20003		Category/Type
Purpose of Disbursement Bookkeeping		
Candidate Name		Memo Item <input checked="" type="checkbox"/>
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) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Angerholzer Broz Consulting LLC		Date of Disbursement MM / DD / YYYY 03 / 27 / 2023
Mailing Address 499 S Capitol St SW Suite 420		FEC Identification Number C Transaction ID : SB21B.4413.7 Amount of Each Disbursement this Period 500.00
City Washington	State DC	
Zip Code 20003		Category/Type
Purpose of Disbursement Bookkeeping		
Candidate Name		Memo Item <input checked="" type="checkbox"/>
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) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Washington Hilton		Date of Disbursement MM / DD / YYYY 03 / 27 / 2023
Mailing Address 1919 Connecticut Ave NW		FEC Identification Number C Transaction ID : SB21B.4413. Amount of Each Disbursement this Period 6148.99
City Washington	State DC	
Zip Code 20009		Category/Type
Purpose of Disbursement Travel Expense - Deposit		
Candidate Name		Memo Item <input checked="" type="checkbox"/>
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) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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 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)
Build the Bench PAC

Full Name (Last, First, Middle Initial) A. Washington Hilton		Date of Disbursement MM / DD / YYYY 03 / 27 / 2023
Mailing Address 1919 Connecticut Ave NW		FEC Identification Number C [] Transaction ID : SB21B.4413. Amount of Each Disbursement this Period 5132.36
City Washington	State DC	Zip Code 20009
Purpose of Disbursement Event Venue Expense		Category/ Type []
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) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Intuit		Date of Disbursement MM / DD / YYYY 03 / 27 / 2023
Mailing Address 2632 Marine Way		FEC Identification Number C [] Transaction ID : SB21B.4413.1 Amount of Each Disbursement this Period 40.81
City Mountain View	State CA	Zip Code 94043
Purpose of Disbursement Accounting Software		Category/ Type []
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) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Ozio Restaurant & Lounge		Date of Disbursement MM / DD / YYYY 03 / 27 / 2023
Mailing Address 1813 M St NW		FEC Identification Number C [] Transaction ID : SB21B.4413. Amount of Each Disbursement this Period 3000.00
City Washington	State DC	Zip Code 20036
Purpose of Disbursement Event Cost - Catering		Category/ Type []
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) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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)

Form for line numbers 21b through 30b with checkboxes.

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NAME OF COMMITTEE (In Full)
Build the Bench PAC

Form A: Ozio Restaurant & Lounge. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, Amount of Each Disbursement, and Memo Item checkbox.

Form B: Cannata's Market. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, Amount of Each Disbursement, and Memo Item checkbox.

Form C: Intuit. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, Amount of Each Disbursement, and Memo Item checkbox.

SUBTOTAL of Disbursements This Page (optional) and TOTAL This Period (last page this line number only).

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Build the Bench PAC

Full Name (Last, First, Middle Initial) A. Intuit		Date of Disbursement MM / DD / YYYY 03 / 27 / 2023
Mailing Address 2632 Marine Way		FEC Identification Number C [] Transaction ID : SB21B.4413. Amount of Each Disbursement this Period [] 40.81
City Mountain View	State CA	Zip Code 94043
Purpose of Disbursement Accounting Software		Category/Type []
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) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Angerholzer Broz Consulting LLC		Date of Disbursement MM / DD / YYYY 06 / 20 / 2023
Mailing Address 499 S Capitol St SW Suite 420		FEC Identification Number C [] Transaction ID : SB21B.4406 Amount of Each Disbursement this Period [] 13325.45
City Washington	State DC	Zip Code 20003
Purpose of Disbursement Fundraising Consulting Fees and Reimbursed Expenses		Category/Type []
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) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Angerholzer Broz Consulting LLC		Date of Disbursement MM / DD / YYYY 06 / 20 / 2023
Mailing Address 499 S Capitol St SW Suite 420		FEC Identification Number C [] Transaction ID : SB21B.4406. Amount of Each Disbursement this Period [] 500.00
City Washington	State DC	Zip Code 20003
Purpose of Disbursement Bookkeeping		Category/Type []
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) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 13325.45
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Build the Bench PAC

A. Washington Hilton

Full Name (Last, First, Middle Initial)

Mailing Address 1919 Connecticut Ave NW

City Washington State DC Zip Code 20009

Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 06 / 20 / 2023

FEC Identification Number: C

Transaction ID : SB21B.4406.1

Amount of Each Disbursement this Period: 12784.64

Memo Item

B. Intuit

Full Name (Last, First, Middle Initial)

Mailing Address 2632 Marine Way

City Mountain View State CA Zip Code 94043

Purpose of Disbursement
Accounting Software

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 06 / 20 / 2023

FEC Identification Number: C

Transaction ID : SB21B.4406.2

Amount of Each Disbursement this Period: 40.81

Memo Item

C. Angerholzer Broz Consulting LLC

Full Name (Last, First, Middle Initial)

Mailing Address 499 S Capitol St SW Suite 420

City Washington State DC Zip Code 20003

Purpose of Disbursement
Fundraising Consulting Fees and Reimbursed Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 06 / 20 / 2023

FEC Identification Number: C

Transaction ID : SB21B.4410

Amount of Each Disbursement this Period: 540.81

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 540.81

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)

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

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NAME OF COMMITTEE (In Full)
Build the Bench PAC

Form A: Angerholzer Broz Consulting LLC. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Bookkeeping), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (06/20/2023), FEC Identification Number, Transaction ID (SB21B.4410.1), Amount (500.00), and Memo Item checked.

Form B: Intuit. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Accounting Software), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (06/20/2023), FEC Identification Number, Transaction ID (SB21B.4410.1), Amount (40.81), and Memo Item checked.

Form C: DMM & Associates. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Reimbursable Expense), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (01/12/2023), FEC Identification Number, Transaction ID (SB21B.4466), Amount (461.86), and Memo Item unchecked.

SUBTOTAL of Disbursements This Page (optional) 461.86
TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Build the Bench PAC

Full Name (Last, First, Middle Initial) A. Mignon Faget		Date of Disbursement MM / DD / YYYY 01 / 12 / 2023
Mailing Address 3301 Veterans Memorial Blvd		FEC Identification Number C [] Transaction ID : SB21B.4466.1
City Metairie	State LA	Zip Code 70002
Purpose of Disbursement Mardi Gras Gifts		Amount of Each Disbursement this Period [] 461.86
Candidate Name		Category/Type []
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) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. DMM & Associates		Date of Disbursement MM / DD / YYYY 02 / 22 / 2023
Mailing Address 4298 Elysian Fields Ave Suite B		FEC Identification Number C [] Transaction ID : SB21B.4470
City New Orleans	State LA	Zip Code 70122
Purpose of Disbursement Reimbursable Expense		Amount of Each Disbursement this Period [] 135.07
Candidate Name		Category/Type []
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) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Reese, Dorothy, F, ,		Date of Disbursement MM / DD / YYYY 01 / 12 / 2023
Mailing Address 4824 Bancroft Drive		FEC Identification Number C [] Transaction ID : SB21B.4467
City New Orleans	State LA	Zip Code 70122
Purpose of Disbursement Reimbursable Expense		Amount of Each Disbursement this Period [] 3475.64
Candidate Name		Category/Type []
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) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 3610.71
TOTAL This Period (last page this line number only).....▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Build the Bench PAC

Full Name (Last, First, Middle Initial) A. amazon		Date of Disbursement MM / DD / YYYY 01 / 12 / 2023	
Mailing Address 410 Terry Ave N		FEC Identification Number C [] Transaction ID : SB21B.4467.1 Amount of Each Disbursement this Period 1194.00	
City Seattle	State WA	Zip Code 98109	Category/ Type []
Purpose of Disbursement Event Supplies		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) ▼	State: District: [] []	

Full Name (Last, First, Middle Initial) B. amazon		Date of Disbursement MM / DD / YYYY 01 / 12 / 2023	
Mailing Address 410 Terry Ave N		FEC Identification Number C [] Transaction ID : SB21B.4467.2 Amount of Each Disbursement this Period 48.14	
City Seattle	State WA	Zip Code 98109	Category/ Type []
Purpose of Disbursement Event Supplies		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) ▼	State: District: [] []	

Full Name (Last, First, Middle Initial) C. amazon		Date of Disbursement MM / DD / YYYY 01 / 12 / 2023	
Mailing Address 410 Terry Ave N		FEC Identification Number C [] Transaction ID : SB21B.4467. Amount of Each Disbursement this Period 29.26	
City Seattle	State WA	Zip Code 98109	Category/ Type []
Purpose of Disbursement Event Supplies		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) ▼	State: District: [] []	

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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)

Form for line numbers 21b through 30b with checkboxes.

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NAME OF COMMITTEE (In Full)
Build the Bench PAC

Form A: B Great Manufacturing. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, Amount of Each Disbursement, and Memo Item checkbox.

Form B: Gem Printing. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, Amount of Each Disbursement, and Memo Item checkbox.

Form C: Reese, Dorothy, F, . Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, Amount of Each Disbursement, and Memo Item checkbox.

SUBTOTAL of Disbursements This Page (optional) and TOTAL This Period (last page this line number only) summary rows.

**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)
Build the Bench PAC

Full Name (Last, First, Middle Initial) A. Washington Hilton		Date of Disbursement MM / DD / YYYY 02 / 22 / 2023
Mailing Address 1919 Connecticut Ave NW		FEC Identification Number C Transaction ID : SB21B.4468.! Amount of Each Disbursement this Period 240.00
City Washington	State DC	
Zip Code 20009	Purpose of Disbursement Gratuities	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. Reese, Dorothy, F, ,		Date of Disbursement MM / DD / YYYY 02 / 22 / 2023
Mailing Address 4824 Bancroft Drive		FEC Identification Number C Transaction ID : SB21B.4469 Amount of Each Disbursement this Period 1657.87
City New Orleans	State LA	
Zip Code 70122	Purpose of Disbursement Reimbursable Expense	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. UPS		Date of Disbursement MM / DD / YYYY 02 / 22 / 2023
Mailing Address 55 Glenlake Parkway NE		FEC Identification Number C Transaction ID : SB21B.4469. Amount of Each Disbursement this Period 595.73
City Atlanta	State GA	
Zip Code 30328	Purpose of Disbursement Shipping	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	1657.87
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Build the Bench PAC

Full Name (Last, First, Middle Initial) A. American Express		Date of Disbursement MM / DD / YYYY 02 / 22 / 2023
Mailing Address 200 Vesey St		FEC Identification Number C Transaction ID : SB21B.4469.: Amount of Each Disbursement this Period 448.42
City New York	State NY	
Zip Code 10285	Category/ Type	
Purpose of Disbursement Interest Payment		
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 checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. B Sweet Bistro & Bakery		Date of Disbursement MM / DD / YYYY 02 / 22 / 2023
Mailing Address 704 N Rampart St		FEC Identification Number C Transaction ID : SB21B.4469.4 Amount of Each Disbursement this Period 385.00
City New Orleans	State LA	
Zip Code 70116	Category/ Type	
Purpose of Disbursement Event Bag Supplies		
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 checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. ThinkWrite Media		Date of Disbursement MM / DD / YYYY 01 / 18 / 2023
Mailing Address 6001Mounes Street Apt P238		FEC Identification Number C Transaction ID : SB21B.4461 Amount of Each Disbursement this Period 1351.91
City River Ridge	State LA	
Zip Code 70123	Category/ Type	
Purpose of Disbursement Event Decor and Setup		
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).....▶	1351.91
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Build the Bench PAC

A. Tyson's Creations LLC

Full Name (Last, First, Middle Initial)

Mailing Address 2800 10th Street NE

City Washington State DC Zip Code 20017

Purpose of Disbursement
Event Supplies

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 22 / 2023

FEC Identification Number: C

Transaction ID : SB21B.4459

Amount of Each Disbursement this Period: 657.56

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).....▶	657.56
TOTAL This Period (last page this line number only).....▶	47400.36

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)
Build the Bench PAC

A. **EMILIA SYKES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 1347

City AKRON State OH Zip Code 44309

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House
 Senate
 President
State: OH District: 13

Disbursement For: 2024
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	22	/	2023

FEC Identification Number

C C00801274

Transaction ID : SB23.4471

Amount of Each Disbursement this Period

1000.00

Memo Item

B. **FOUSHEE FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 16446

City CHAPEL HILL State NC Zip Code 27516

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House
 Senate
 President
State: NC District: 04

Disbursement For: 2024
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	22	/	2023

FEC Identification Number

C C00794727

Transaction ID : SB23.4474

Amount of Each Disbursement this Period

1000.00

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) ▼

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

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

2000.00

2000.00