

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**
ASSOCIATIONS INC. PAC/ASSOCIA PAC

ADDRESS (number and street) **5401 N.CENTRAL EXPRESSWAY**
SUITE 290
 Check if different than previously reported. (ACC) **DALLAS TX 75205**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00413856 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:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / 2024 through / / 2024

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 **Krueger, John, , ,**

Signature of Treasurer **Krueger, John, , ,** Date / / 2024

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

ASSOCIATIONS INC. PAC/ASSOCIA 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="2024"/>	<input type="text" value="51824.66"/>	<input type="text" value="51824.66"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="51592.12"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="11987.46"/>	<input type="text" value="18954.92"/>
(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="63579.58"/>	<input type="text" value="70779.58"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="6000.00"/>	<input type="text" value="13200.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="57579.58"/>	<input type="text" value="57579.58"/>
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

ASSOCIATIONS INC. PAC/ASSOCIA PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	6731.62	7177.62
(ii) Unitemized	5055.84	11577.30
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	11787.46	18754.92
(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)	11787.46	18754.92
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.....	200.00	200.00
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)).....▶	11987.46	18954.92
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	11987.46	18954.92

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)	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).....	6000.00	13200.00
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)) ..	6000.00	13200.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6000.00	13200.00

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)	11787.46	18754.92
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	11787.46	18754.92
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:	PAGE 6 OF 14
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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)
ASSOCIATIONS INC. PAC/ASSOCIA PAC

A. Blackburn, Mark, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 690 NE 57th Street
 City Miami State FL Zip Code 33137
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Marquis Occupation (for Individual) Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 02 / 16 / 2024
Transaction ID : SA11AI.36295
 Amount of Each Receipt this Period 55.00
 Memo Item
 Payroll Deduction (\$55.00 Bi-Weekly)

B. Carona, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.o Box 600035
 City Dallas State TX Zip Code 75360
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Corporate Headquarters Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt 02 / 09 / 2024
Transaction ID : SA11AI.36155
 Amount of Each Receipt this Period 190.00
 Memo Item

C. Carona, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.o Box 600035
 City Dallas State TX Zip Code 75360
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Corporate Headquarters Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 760.00

Date of Receipt 02 / 23 / 2024
Transaction ID : SA11AI.36538
 Amount of Each Receipt this Period 190.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	435.00
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 14
	<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)
ASSOCIATIONS INC. PAC/ASSOCIA PAC

A. Donnelly, P. James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 333 Las Olas Way
 Apt 4207
 City Ft. Lauderdale State FL Zip Code 33301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The Castle Group Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 02 / 08 / 2024
Transaction ID : SA11AI.36280
 Amount of Each Receipt this Period 5000.00
 Memo Item
 Direct Contribution

B. Duprey, Ronald, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3200 Atlantic Beach Blvd
 Apt# 610
 City Hutchinson Island State FL Zip Code 34949
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CMP Orlando Occupation (for Individual) Intg Svcs-VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 208.00

Date of Receipt 02 / 16 / 2024
Transaction ID : SA11AI.36343
 Amount of Each Receipt this Period 52.00
 Memo Item
 Payroll Deduction (\$52.00 Bi-Weekly)

C. Eden Carona, Helen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8891 Jourdan Way
 City Dallas State TX Zip Code 75225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Corporate Headquarters Occupation (for Individual) CCO-Chief Corporate Officer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 02 / 09 / 2024
Transaction ID : SA11AI.36158
 Amount of Each Receipt this Period 150.00
 Memo Item
 Payroll Deduction (\$150.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	5202.00
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 8 OF 14
	<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)
ASSOCIATIONS INC. PAC/ASSOCIA PAC

A. Eden Carona, Helen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8891 Jourdan Way
 City Dallas State TX Zip Code 75225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Corporate Headquarters Occupation (for Individual) CCO-Chief Corporate Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 02 / 23 / 2024
Transaction ID : SA11AI.36541
 Amount of Each Receipt this Period 150.00
 Memo Item
 Payroll Deduction (\$150.00 Bi-Weekly)

B. Hunter, Jon, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1814 Waterford Lane
 City Richardson State TX Zip Code 75082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Corporate Headquarters Occupation (for Individual) COO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 09 / 2024
Transaction ID : SA11AI.36185
 Amount of Each Receipt this Period 100.00
 Memo Item
 Payroll Deduction (\$100.00 Bi-Weekly)

C. Hunter, Jon, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1814 Waterford Lane
 City Richardson State TX Zip Code 75082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Corporate Headquarters Occupation (for Individual) COO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 02 / 23 / 2024
Transaction ID : SA11AI.36567
 Amount of Each Receipt this Period 100.00
 Memo Item
 Payroll Deduction (\$100.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	350.00
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 14
	<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)
ASSOCIATIONS INC. PAC/ASSOCIA PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Krueger, John, , ,		Date of Receipt MM / DD / YYYY 02 / 09 / 2024 Transaction ID : SA11AI.36179
Mailing Address 6813 Denali Drive		Amount of Each Receipt this Period 106.00
City McKinney	State TX	Zip Code 75070
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Corporate Headquarters	Occupation (for Individual) Govmt Affairs-VP	Payroll Deduction (\$106.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 318.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Krueger, John, , ,		Date of Receipt MM / DD / YYYY 02 / 23 / 2024 Transaction ID : SA11AI.36562
Mailing Address 6813 Denali Drive		Amount of Each Receipt this Period 106.00
City McKinney	State TX	Zip Code 75070
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Corporate Headquarters	Occupation (for Individual) Govmt Affairs-VP	Payroll Deduction (\$106.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 424.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Kruppa, Brian, , ,		Date of Receipt MM / DD / YYYY 02 / 09 / 2024 Transaction ID : SA11AI.36153
Mailing Address 4526 Deere Street Unit 201		Amount of Each Receipt this Period 85.00
City Dallas	State TX	Zip Code 75204
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Corporate Headquarters	Occupation (for Individual) Chief Legal Officer	Payroll Deduction (\$85.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 255.00	

SUBTOTAL of Receipts This Page (optional).....▶	297.00
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 14
	<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)
ASSOCIATIONS INC. PAC/ASSOCIA PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Kruppa, Brian, , ,			Date of Receipt MM / DD / YYYY 02 / 23 / 2024 Transaction ID : SA11AI.36536		
Mailing Address 4526 Deere Street Unit 201			Amount of Each Receipt this Period 85.00		
City Dallas	State TX	Zip Code 75204	Memo Item <input type="checkbox"/>		
FEC ID number of contributing federal political committee. C			Payroll Deduction (\$85.00 Bi-Weekly)		
Name of Employer (for Individual) Corporate Headquarters		Occupation (for Individual) Chief Legal Officer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 340.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. LEDELL, JASON, , ,			Date of Receipt MM / DD / YYYY 02 / 02 / 2024 Transaction ID : SA11AI.36005		
Mailing Address 2544 Citrus Garden Circle			Amount of Each Receipt this Period 100.00		
City Henderson	State NV	Zip Code 89052	Memo Item <input type="checkbox"/>		
FEC ID number of contributing federal political committee. C			Payroll Deduction (\$100.00 Bi-Weekly)		
Name of Employer (for Individual) Associa Nevada South		Occupation (for Individual) Ops-Dir			
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. LEDELL, JASON, , ,			Date of Receipt MM / DD / YYYY 02 / 16 / 2024 Transaction ID : SA11AI.36387		
Mailing Address 2544 Citrus Garden Circle			Amount of Each Receipt this Period 100.00		
City Henderson	State NV	Zip Code 89052	Memo Item <input type="checkbox"/>		
FEC ID number of contributing federal political committee. C			Payroll Deduction (\$100.00 Bi-Weekly)		
Name of Employer (for Individual) Associa Nevada South		Occupation (for Individual) Ops-Dir			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 400.00			

SUBTOTAL of Receipts This Page (optional).....▶	285.00
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 14
	<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)
ASSOCIATIONS INC. PAC/ASSOCIA PAC

A. Marine, Keith, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 237 Bendemeer Lane
 City Rolesville State NC Zip Code 27571
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) H.R.W. INC. Occupation (for Individual) Community-Dir (Branch)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 02 / 23 / 2024
Transaction ID : SA11AI.36513
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll Deduction (\$50.00 Bi-Weekly)

B. Riska, Charles, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6721 Waterway Court
 City Plano State TX Zip Code 75093
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Corporate Headquarters Occupation (for Individual) Ops-VP-Sr
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 02 / 23 / 2024
Transaction ID : SA11AI.36570
 Amount of Each Receipt this Period 55.00
 Memo Item
 Payroll Deduction (\$55.00 Bi-Weekly)

C. West, Sean, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1857 Johnson Ct.
 City Grapevine State TX Zip Code 76051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Corporate Headquarters Occupation (for Individual) Sales-VP-Sr
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 230.48

Date of Receipt 02 / 23 / 2024
Transaction ID : SA11AI.36559
 Amount of Each Receipt this Period 57.62
 Memo Item
 Payroll Deduction (\$57.62 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	162.62
TOTAL This Period (last page this line number only).....	6731.62

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 OF 14
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" 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)
ASSOCIATIONS INC. PAC/ASSOCIA PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Friends of Larry Liston

Mailing Address 2846 Country Club Circle

City Colorado Springs	State CO	Zip Code 80909
--------------------------	-------------	-------------------

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 ▼
200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 08 / 2024

Transaction ID : SA16.36681

Amount of Each Receipt this Period
200.00

Memo Item

Refund of excess non-federal contribution reported on February 20, 2024 report.

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	200.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

ASSOCIATIONS INC. PAC/ASSOCIA PAC

Full Name (Last, First, Middle Initial)

A. Committee to Elect Benton Sawrey

Mailing Address 86 Riverglade Dr.

City
Clayton

State
NC

Zip Code
27527

Purpose of Disbursement

Non-federal Contribution

Candidate Name

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : SB29.36675

Amount of Each Disbursement this Period

[REDACTED] 2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Jeff Leach Campaign

Mailing Address P.O. Box 866186

City
Plano

State
TX

Zip Code
75086

Purpose of Disbursement

Non-federal Contribution

Candidate Name

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : SB29.36673

Amount of Each Disbursement this Period

[REDACTED] 1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Kronda Thimesch Campaign

Mailing Address 1301 Justin Rd
Suite 210-310

City
Lewisville

State
TX

Zip Code
75077

Purpose of Disbursement

Non-federal Contribution

Candidate Name

Category/
Type

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : SB29.36677

Amount of Each Disbursement this Period

[REDACTED] 1000.00

Memo Item

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

[REDACTED] 4000.00

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

[REDACTED]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

ASSOCIATIONS INC. PAC/ASSOCIA PAC

Full Name (Last, First, Middle Initial)

A. Todd Johnson for NC Senate

Mailing Address P.O. Box 482

City
Monroe

State
NC

Zip Code
28111

Purpose of Disbursement
Non-federal Contribution

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	4

FEC Identification Number

C []

Transaction ID : SB29.36679

Amount of Each Disbursement this Period

[] 2000.00 []

Memo Item

Full Name (Last, First, Middle Initial)

B.

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	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C []

Amount of Each Disbursement this Period

[] []

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

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

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 []

[] 6000.00 []