

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

E-PAC

ADDRESS (number and street) PO BOX 500

Check if different than previously reported. (ACC) GLEN FALLS NY 12801

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

C C00570945

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 checked="" 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 M M / D D / Y Y Y Y Y Y in the State of

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

Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y Y Y 01 / 01 / 2022 through M M / D D / Y Y Y Y Y Y 01 / 31 / 2022

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

HOBBS, CABELL, , ,

Type or Print Name of Treasurer

Signature of Treasurer HOBBS, CABELL, , , [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 02 / 18 / 2022

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

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

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

E-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="2022"/>	<input type="text" value="381350.74"/>	<input type="text" value="381350.74"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="381350.74"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="7795.73"/>	<input type="text" value="7795.73"/>
(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="389146.47"/>	<input type="text" value="389146.47"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="38506.14"/>	<input type="text" value="38506.14"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="350640.33"/>	<input type="text" value="350640.33"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

E-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).....	5500.00	5500.00
(ii) Unitemized	2295.73	2295.73
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	7795.73	7795.73
(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)	7795.73	7795.73
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	7795.73	7795.73
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	7795.73	7795.73

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	28256.14	28256.14
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	28256.14	28256.14
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10000.00	10000.00
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).....	250.00	250.00
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)) ..	38506.14	38506.14
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	38506.14	38506.14

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)	7795.73	7795.73
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7795.73	7795.73
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	28256.14	28256.14
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	28256.14	28256.14

**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 17
<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)
E-PAC

A. WINRED
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219-1891
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FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2850.73

Date of Receipt
MM / DD / YYYY
01 / 11 / 2022
Transaction ID : SA11C.555755

Amount of Each Receipt this Period
1117.00

Memo Item
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

B. EMERICH, BRIAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 152 SOUTH STAGE COACH LANE

City FALLBROOK	State CA	Zip Code 92028-2435
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
01 / 11 / 2022
Transaction ID : SA11A.555830

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

C. LOEB, DANIEL, S., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 55 HUDSON YARDS

City NEW YORK	State NY	Zip Code 10001-2163
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)
THIRD POINT, LLC CEO

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
01 / 20 / 2022
Transaction ID : SA11A.559167

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5500.00
TOTAL This Period (last page this line number only).....	5500.00

**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)
E-PAC

Full Name (Last, First, Middle Initial) A. RENNA, RAYCHEL, , ,		Date of Disbursement MM / DD / YYYY 01 / 03 / 2022	
Mailing Address 333 8TH STREET SE APT 410		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4567 Amount of Each Disbursement this Period 1500.00	
City WASHINGTON	State DC	Zip Code 20003	Category/ Type [REDACTED]
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. GOOGLE		Date of Disbursement MM / DD / YYYY 01 / 03 / 2022	
Mailing Address 1600 AMPHITHEATRE PARKWAY		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4568 Amount of Each Disbursement this Period 24.00	
City MOUNTAIN VIEW	State CA	Zip Code 94043	Category/ Type [REDACTED]
Purpose of Disbursement WEB SERVICE		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. WINRED TECHNICAL SERVICES LLC		Date of Disbursement MM / DD / YYYY 01 / 11 / 2022	
Mailing Address 1776 WILSON BLVD #530		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4569 Amount of Each Disbursement this Period 63.91	
City ARLINGTON	State VA	Zip Code 22209	Category/ Type [REDACTED]
Purpose of Disbursement CREDIT CARD MERCHANT FEE		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	1587.91
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
E-PAC

Full Name (Last, First, Middle Initial) A. CMDI		Date of Disbursement MM / DD / YYYY 01 / 13 / 2022
Mailing Address 1593 SPRING HILL ROAD STE 400		FEC Identification Number C [] Transaction ID : SB21B.4572 Amount of Each Disbursement this Period [] 500.00
City TYSONS CORNER	State VA	Zip Code 22182
Purpose of Disbursement DATABASE MANAGEMENT SVC		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) B. MASON STRATEGIES		Date of Disbursement MM / DD / YYYY 01 / 13 / 2022
Mailing Address 219 E HOWELL AVENUE		FEC Identification Number C [] Transaction ID : SB21B.4570 Amount of Each Disbursement this Period [] 3500.00
City ALEXANDRIA	State VA	Zip Code 22301
Purpose of Disbursement FINANCE CONSULTING		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. RONALD REAGAN NATIONAL AIRPORT		Date of Disbursement MM / DD / YYYY 01 / 13 / 2022
Mailing Address 2401 SMITH BLVD		FEC Identification Number C [] Transaction ID : SB21B.4571 Amount of Each Disbursement this Period [] 40.00
City ARLINGTON	State VA	Zip Code 22202
Purpose of Disbursement TRAVEL		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	

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

4040.00

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)
E-PAC

A. AMERICAN AIRLINES

Full Name (Last, First, Middle Initial)

Mailing Address 4333 AMON CARTER BLVD

City FT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 14 / 2022

FEC Identification Number: C

Transaction ID : SB21B.4575

Amount of Each Disbursement this Period: 168.60

Memo Item

B. MASON STRATEGIES

Full Name (Last, First, Middle Initial)

Mailing Address 219 E HOWELL AVENUE

City ALEXANDRIA State VA Zip Code 22301

Purpose of Disbursement FINANCE CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 14 / 2022

FEC Identification Number: C

Transaction ID : SB21B.4574

Amount of Each Disbursement this Period: 11140.00

Memo Item

C. THE PROSPER GROUP

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 488

City GREENWOOD State IN Zip Code 46142

Purpose of Disbursement DIGITAL CONSULTING/WEB SERVICE/TEXT

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 14 / 2022

FEC Identification Number: C

Transaction ID : SB21B.4573

Amount of Each Disbursement this Period: 6250.03

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 17558.63

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)
E-PAC

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 01 / 18 / 2022
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [] Transaction ID : SB21B.4578 Amount of Each Disbursement this Period [] 143.60
City FT WORTH	State TX	Zip Code 76155
Purpose of Disbursement TRAVEL		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) B. CAPITOL HILL CLUB		Date of Disbursement MM / DD / YYYY 01 / 18 / 2022
Mailing Address 300 FIRST STREET SE		FEC Identification Number C [] Transaction ID : SB21B.4577 Amount of Each Disbursement this Period [] 60.00
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement FOOD/BEVERAGES		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. WINRED TECHNICAL SERVICES LLC		Date of Disbursement MM / DD / YYYY 01 / 18 / 2022
Mailing Address 1776 WILSON BLVD #530		FEC Identification Number C [] Transaction ID : SB21B.4576 Amount of Each Disbursement this Period [] 57.92
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement CREDIT CARD MERCHANT FEE		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	

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

261.52

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)
E-PAC

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement MM / DD / YYYY 01 / 19 / 2022
Mailing Address 16 HUDSON AVENUE		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4579 Amount of Each Disbursement this Period [REDACTED] 124.95
City GLEN FALLS	State NY	Zip Code 12801
Purpose of Disbursement POSTAGE		Category/ Type [REDACTED]
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) B. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 01 / 20 / 2022
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4580 Amount of Each Disbursement this Period [REDACTED] 163.60
City FT WORTH	State TX	Zip Code 76155
Purpose of Disbursement TRAVEL		Category/ Type [REDACTED]
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. BB&T		Date of Disbursement MM / DD / YYYY 01 / 21 / 2022
Mailing Address 2200 WILSON BLVD SUITE 100		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4581 Amount of Each Disbursement this Period [REDACTED] 15.00
City ARLINGTON	State VA	Zip Code 22201
Purpose of Disbursement BANK FEES		Category/ Type [REDACTED]
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	

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

[REDACTED] 303.55

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)
E-PAC

Full Name (Last, First, Middle Initial) A. COMPLIANCE CONSULTING CO OF VIRGINIA LLC		Date of Disbursement MM / DD / YYYY 01 / 24 / 2022
Mailing Address PO BOX 365		FEC Identification Number C [] Transaction ID : SB21B.4582 Amount of Each Disbursement this Period 1000.00
City MCLEAN	State VA	Zip Code 22101
Purpose of Disbursement COMPLIANCE CONSULTING		Category/Type []
Candidate Name		Memo Item <input 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. WINRED TECHNICAL SERVICES LLC		Date of Disbursement MM / DD / YYYY 01 / 25 / 2022
Mailing Address 1776 WILSON BLVD #530		FEC Identification Number C [] Transaction ID : SB21B.4583 Amount of Each Disbursement this Period 57.82
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement CREDIT CARD MERCHANT FEE		Category/Type []
Candidate Name		Memo Item <input 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. INTUIT		Date of Disbursement MM / DD / YYYY 01 / 26 / 2022
Mailing Address 2700 COAST AVE		FEC Identification Number C [] Transaction ID : SB21B.4587 Amount of Each Disbursement this Period 50.00
City MOUNTAIN VIEW	State CA	Zip Code 94043
Purpose of Disbursement SUBSCRIPTIONS		Category/Type []
Candidate Name		Memo Item <input 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).....▶	1107.82
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)
E-PAC

Full Name (Last, First, Middle Initial) A. THE RITZ-CARLTON BISCAYNE		Date of Disbursement MM / DD / YYYY 01 / 26 / 2022
Mailing Address 455 GRAND BAY DRIVE		FEC Identification Number C [] Transaction ID : SB21B.4584 Amount of Each Disbursement this Period [] 696.99
City MIAMI	State FL	Zip Code 33149
Purpose of Disbursement TRAVEL		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) B. THE RITZ-CARLTON BISCAYNE		Date of Disbursement MM / DD / YYYY 01 / 26 / 2022
Mailing Address 455 GRAND BAY DRIVE		FEC Identification Number C [] Transaction ID : SB21B.4585 Amount of Each Disbursement this Period [] 32.16
City MIAMI	State FL	Zip Code 33149
Purpose of Disbursement TRAVEL		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. THE RITZ-CARLTON BISCAYNE		Date of Disbursement MM / DD / YYYY 01 / 26 / 2022
Mailing Address 455 GRAND BAY DRIVE		FEC Identification Number C [] Transaction ID : SB21B.4586 Amount of Each Disbursement this Period [] 9.16
City MIAMI	State FL	Zip Code 33149
Purpose of Disbursement TRAVEL		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	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 738.31
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)
E-PAC

Full Name (Last, First, Middle Initial) A. GRV STRATEGIES LLC		Date of Disbursement MM / DD / YYYY 01 / 28 / 2022
Mailing Address 731 SEATON AVENUE UNIT 309		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4588 Amount of Each Disbursement this Period 1500.00
City ALEXANDRIA	State VA	Zip Code 22305
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		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) B. JETTIES		Date of Disbursement MM / DD / YYYY 01 / 31 / 2022
Mailing Address 3708 MACOMB ST NW		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4589 Amount of Each Disbursement this Period 548.41
City WASHINGTON	State DC	Zip Code 20016
Purpose of Disbursement FOOD/BEVERAGES		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. ZOES KITCHEN		Date of Disbursement MM / DD / YYYY 01 / 31 / 2022
Mailing Address 3644 KING STREET		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4590 Amount of Each Disbursement this Period 594.25
City ALEXANDRIA	State VA	Zip Code 22302
Purpose of Disbursement FOOD/BEVERAGES		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	

SUBTOTAL of Disbursements This Page (optional).....▶	2642.66
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)
E-PAC

A. ZOOM

Full Name (Last, First, Middle Initial)

Mailing Address 55 ALMADEN BLVD SUITE 600

City SAN JOSE State CA Zip Code 95113

Purpose of Disbursement WEB SERVICE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 01 / 31 / 2022

FEC Identification Number: C

Transaction ID : SB21B.4591

Amount of Each Disbursement this Period: 15.74

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:

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:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 15.74

TOTAL This Period (last page this line number only)..... ▶ 28256.14

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)
E-PAC

Full Name (Last, First, Middle Initial)
A. JANE TIMKEN FOR OHIO

Mailing Address 9856 ARCHER LANE

City DUBLIN State OH Zip Code 43017

Purpose of Disbursement
CONTRIBUTION

Candidate Name
TIMKEN, JANE, , ,

Office Sought: House Senate President
 Disbursement For: 2022 Primary General Other (specify) ▼
 State: OH District: 00

Date of Disbursement
MM / DD / YYYY
01 / 12 / 2022

FEC Identification Number

C C00769745

Transaction ID : SB23.4594

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)
B. KAT FOR CONGRESS

Mailing Address 5200 NW 43RD STREET SUITE 102-180

City GAINESVILLE State FL Zip Code 32606

Purpose of Disbursement
CONTRIBUTION

Candidate Name
CAMMACK, KAT, , ,

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

Date of Disbursement
MM / DD / YYYY
01 / 12 / 2022

FEC Identification Number

C C00730895

Transaction ID : SB23.4593

Amount of Each Disbursement this Period

5000.00

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
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement
MM / DD / YYYY

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).....▶

10000.00

10000.00

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)
E-PAC

A. NEW YORK YOUNG REPUBLICAN CLUB

Full Name (Last, First, Middle Initial)

Mailing Address 53 WEST 28TH STREET #5

City NEW YORK State NY Zip Code 10001

Purpose of Disbursement CONTRIBUTION NON-FEDERAL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 06 / 2022

FEC Identification Number: C

Transaction ID : SB29.4592

Amount of Each Disbursement this Period: 250.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	250.00