

**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

MAJORITY COMMITTEE PAC--MC PAC

ADDRESS (number and street)

PO BOX 10134

Check if different
than previously
reported. (ACC)

BAKERSFIELD

CA

93389-0134

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C

C00428052

3. IS THIS
REPORTNEW
(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

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of(d) 30-Day
POST-Election
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

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

THOMSON, JILL, , ,

Signature of Treasurer

THOMSON, JILL, , ,

Date

M M M /

D D D /

Y Y Y Y Y Y Y

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**FEC FORM 3X**
Rev. 05/2016

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

MAJORITY COMMITTEE PAC--MC PACReport Covering the Period: From:

| | | | | |
|-----|---|-----|---|-----------|
| M M | / | D D | / | Y Y Y Y Y |
| 08 | | 01 | | 2023 |

 To:

| | | | | |
|-----|---|-----|---|-----------|
| M M | / | D D | / | Y Y Y Y Y |
| 08 | | 31 | | 2023 |

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|-------------------------|-----------------------------------|---|---|---|------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|----|--|--|--|--|--|--|--|--|--|--|--|--|----|
| 6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="5">2023</td></tr></table> | Y | Y | Y | Y | Y | 2023 | | | | | | <table><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></</td></tr></table> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | </ |
| Y | Y | Y | Y | Y | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2023 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | </ | | | | | | | | | | | | | |

☒ 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

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

MAJORITY COMMITTEE PAC--MC PAC

Report Covering the Period:

From:

M M / D D / Y Y Y Y
08 01 2023

To:

M M / D D / Y Y Y Y
08 31 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)..... | 2055.46 | 27510.46 |
| (ii) Unitemized | 3301.61 | 43398.68 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶ | 5357.07 | 70909.14 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 5000.00 | 95000.00 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) | 10357.07 | 165909.14 |
| 12. Transfers From Affiliated/Other Party Committees..... | 148016.46 | 1746095.63 |
| 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)) | 158373.53 | 1912004.77 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) | 158373.53 | 1912004.77 |

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 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 | 155218.88 | 705419.31 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 155218.88 | 705419.31 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 0.00 | 605000.00 |
| 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 | 35.00 | 2094.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 5000.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... | 35.00 | 7094.00 |
| 29. Other Disbursements (Including Non-Federal Donations)..... | 0.00 | 75000.00 |
| 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)) .. | 155253.88 | 1392513.31 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 155253.88 | 1392513.31 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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) | 10357.07 | 165909.14 |
| 34. Total Contribution Refunds (from Line 28(d)) | 35.00 | 7094.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 10322.07 | 158815.14 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 155218.88 | 705419.31 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 155218.88 | 705419.31 |

: 97 'A-G79 @G B9CI G'H9LH'F9 @G H98 'HC'5 'F9DCFH'G7 <98I @ 'CF' +H9A-N5HCB

Form/Schedule: F3XN

Transaction ID :

PLEASE NOTE: THE COMMITTEE HAS DEMONSTRATED THE NECESSARY STEPS TO ESTABLISH BEST EFFORTS TO OBTAIN AND DISCLOSE THE FULL IDENTIFICATION OF ALL INDIVIDUALS WHO CONTRIBUTE IN EXCESS OF \$200 IN A CALENDAR YEAR. THESE EFFORTS INCLUDE A CLEAR REQUEST WITH THE ORIGINAL SOLICITATION, FOLLOWED BY A REQUEST FOR MISSING INFORMATION LETTER WITHIN 30 DAYS, WHICH CLEARLY ASKS FOR THE MISSING INFORMATION WITHOUT SOLICITING A CONTRIBUTION. IN ADDITION, THE LETTER READS: FEDERAL LAW REQUIRES US TO MAKE OUR BEST EFFORTS TO COLLECT AND REPORT THE NAME, MAILING ADDRESS, OCCUPATION AND NAME OF EMPLOYER OF ALL INDIVIDUALS WHO CONTRIBUTE IN EXCESS OF \$200 IN A CALENDAR YEAR. WE THEN ENCLOSE A SELF ADDRESSED ENVELOPE AND INCLUDE A TELEPHONE NUMBER TO REACH THE COMMITTEE WITH ANY QUESTIONS. A SECOND REQUEST FOR MISSING INFORMATION LETTER IS SENT IF WE DO NOT RECEIVE THE INFORMATION IN A TIMELY MANNER. IN THE EVENT THAT WE RECEIVE ADDITIONAL INFORMATION FROM CONTRIBUTORS WHOSE INFORMATION WAS NOT ORIGINALLY DISCLOSED, WE WILL AMEND THE APPROPRIATE REPORT TO REFLECT THE ADDITIONAL DISCLOSURES PROPERLY.

Form/Schedule:

Transaction ID:

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 7 OF 57
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

MAJORITY COMMITTEE PAC--MC PAC

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

A. ADAMS, JANE, , ,

Mailing Address 14 SALT SPRAY LN

City
HILTON HEAD ISLANDState
SCZip Code
29928FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 17 / 2023

Transaction ID : AE58ECB3AA0604C509A1

Amount of Each Receipt this Period

35.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

B. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2023

☐ Primary ☐ General
☒ Other (specify) ▼
ANNUAL

Aggregate Year-to-Date ▼

64842.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 17 / 2023

Transaction ID : A1B4D1F4687114E86815

Amount of Each Receipt this Period

35.00

☒ Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

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

C. BANGERT, MARILYN, , ,

Mailing Address 8713 US HWY 85

City
FORT LUPTONState
COZip Code
80621FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FUMCOccupation (for Individual)
CHOIR DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 23 / 2023

Transaction ID : A1B2BCB630513466BB80

Amount of Each Receipt this Period

50.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

85.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 57

(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)

MAJORITY COMMITTEE PAC--MC PAC

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

A. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2023

☐ Primary ☐ General
☒ Other (specify) ▼

ANNUAL

Aggregate Year-to-Date ▼

64842.14

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 23 / 2023**Transaction ID : AC73AD46900DB468EB40**

Amount of Each Receipt this Period

50.00

☒ Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

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

B. BORTON, THOMAS, , ,

Mailing Address 711 PAGE CT

City
MORENCIState
MIZip Code
49256-1141FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 08 / 2023**Transaction ID : A393A7C99A0B34F45AFC**

Amount of Each Receipt this Period

50.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

C. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2023

☐ Primary ☐ General
☒ Other (specify)

ANNUAL

Aggregate Year-to-Date ▼

64842.14

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 08 / 2023**Transaction ID : A6243DDD95FDA4CC39C0**

Amount of Each Receipt this Period

50.00

☒ Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

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

50.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 9 OF 57
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

MAJORITY COMMITTEE PAC--MC PAC

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

A. BUTTERFIELD, STAN, , ,

Mailing Address 3624 104TH AVE SW

City
OLYMPIAState
WAZip Code
98512-1010FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
FORESTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 10 / 2023

Transaction ID : AEC656CF750F84B439BC

Amount of Each Receipt this Period

50.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

B. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2023

☐ Primary ☐ General
☒ Other (specify) ▼
ANNUAL

Aggregate Year-to-Date ▼

64842.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 10 / 2023

Transaction ID : A8EAD59CB18D548689B6

Amount of Each Receipt this Period

50.00

☒ Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

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

C. DAVIS, CHERI, , ,

Mailing Address 3513 NANCE RUN

City
THE VILLAGESState
FLZip Code
32163-2869FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 07 / 2023

Transaction ID : A11B3773D1D18415C904

Amount of Each Receipt this Period

40.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

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

90.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 10 OF 57
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

MAJORITY COMMITTEE PAC--MC PAC

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

A. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2023

☐ Primary ☐ General
☒ Other (specify) ▼

ANNUAL

Aggregate Year-to-Date ▼

64842.14

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 07 / 2023

Transaction ID : AFC5E3629B3304B7DABF

Amount of Each Receipt this Period

40.00

☒ Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

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

B. DENESSWN, TERESA, , ,

Mailing Address 2642 LOHCARRON DR

City
FERNDALState
WAZip Code
98248FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

SELF

SIGN MAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

515.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 04 / 2023

Transaction ID : A57FCA2E7C41248E9AD2

Amount of Each Receipt this Period

25.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

C. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2023

☐ Primary ☐ General
☒ Other (specify)

ANNUAL

Aggregate Year-to-Date ▼

64842.14

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 04 / 2023

Transaction ID : A8E35016A0FB24598940

Amount of Each Receipt this Period

25.00

☒ Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

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

25.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 11 OF 57
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

MAJORITY COMMITTEE PAC--MC PAC

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

A. DENESSWN, TERESA, , ,

Mailing Address 2642 LOHCARRON DR

City
FERNDALÉState
WAZip Code
98248FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
SIGN MAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 14 / 2023

Transaction ID : AEDD592D5A40845749E8

Amount of Each Receipt this Period

15.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

B. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2023

☐ Primary ☐ General
☒ Other (specify) ▼
ANNUAL

Aggregate Year-to-Date ▼

64842.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 14 / 2023

Transaction ID : A01A25CD122BB4BA9AEA

Amount of Each Receipt this Period

15.00

☒ Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

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

C. DENESSWN, TERESA, , ,

Mailing Address 2642 LOHCARRON DR

City
FERNDALÉState
WAZip Code
98248FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
SIGN MAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 20 / 2023

Transaction ID : AD933DF5B8A8041A0B73

Amount of Each Receipt this Period

20.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

35.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 12 OF 57
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

MAJORITY COMMITTEE PAC--MC PAC

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

A. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2023

☐ Primary ☐ General
☒ Other (specify) ▼

ANNUAL

Aggregate Year-to-Date ▼

64842.14

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 20 / 2023**Transaction ID : AC28BF081AC554A43BB0**

Amount of Each Receipt this Period

20.00

☒ Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

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

B. DENESSWN, TERESA, , ,

Mailing Address 2642 LOHCARRON DR

City
FERNDALState
WAZip Code
98248FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF

Occupation (for Individual)

SIGN MAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 23 / 2023**Transaction ID : A5435FD77FDAB4E31A43**

Amount of Each Receipt this Period

10.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

C. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2023

☐ Primary ☐ General
☒ Other (specify)

ANNUAL

Aggregate Year-to-Date ▼

64842.14

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 23 / 2023**Transaction ID : AA009DF92D0264B3EB7E**

Amount of Each Receipt this Period

10.00

☒ Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

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

10.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 13 OF 57
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

MAJORITY COMMITTEE PAC--MC PAC

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

A. DEVITA, STEPHEN, , ,

Mailing Address 645 CAMBRIDGE RD

City
PARAMUSState
NJZip Code
07652-4203FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CBREOccupation (for Individual)
ENGINEER TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 02 / 2023

Transaction ID : A93477C51878C40F0ABF

Amount of Each Receipt this Period

50.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

B. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2023

☐ Primary ☐ General
☒ Other (specify) ▼
ANNUAL

Aggregate Year-to-Date ▼

64842.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 02 / 2023

Transaction ID : A37080A30BADA4E5A883

Amount of Each Receipt this Period

50.00

☒ Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

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

C. FERGUSON, ROBIN, , ,

Mailing Address P.O. BOX 1062

City
BUFFALOState
TXZip Code
75831FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PRMCOccupation (for Individual)
RN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 04 / 2023

Transaction ID : A230F35F879E74A2E834

Amount of Each Receipt this Period

50.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

100.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 OF 57
(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)

MAJORITY COMMITTEE PAC--MC PAC

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

A. WINRED

Mailing Address PO BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219-1891

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2023

☐ Primary ☐ General
☒ Other (specify) ▼

ANNUAL

Aggregate Year-to-Date ▼

64842.14

Date of Receipt

08 / 04 / 2023

Transaction ID : ABDB3C9044A124ECCA42

Amount of Each Receipt this Period

50.00

☒ Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

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

B. GERVINO, EUGENE, , ,

Mailing Address 1201 TORREY PINES DR

City
COLUMBIA

State
MO

Zip Code
65203-4825

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 ▼

400.00

Date of Receipt

08 / 22 / 2023

Transaction ID : A653DE8400F00416A992

Amount of Each Receipt this Period

50.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

C. WINRED

Mailing Address PO BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219-1891

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2023

☐ Primary ☐ General
☒ Other (specify)

ANNUAL

Aggregate Year-to-Date ▼

64842.14

Date of Receipt

08 / 22 / 2023

Transaction ID : A8A2739EB208444B4A37

Amount of Each Receipt this Period

50.00

☒ Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

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

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

50.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 15 OF 57
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

MAJORITY COMMITTEE PAC--MC PAC

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

A. GRUNDMEIER, ALLEN, , ,

Mailing Address 4519 TOLEDO AVE N

City
MINNEAPOLISState
MNZip Code
55422-1143FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2023

Transaction ID : A402C8681FCA84D3CA7F

Amount of Each Receipt this Period

25.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

B. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2023

☐ Primary ☐ General
☒ Other (specify) ▼
ANNUAL

Aggregate Year-to-Date ▼

64842.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2023

Transaction ID : A0247676F5D9E485FAA7

Amount of Each Receipt this Period

25.00

☒ Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

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

C. GRUNDMEIER, ALLEN, , ,

Mailing Address 4519 TOLEDO AVE N

City
MINNEAPOLISState
MNZip Code
55422-1143FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2023

Transaction ID : AFA1A3EBFB13947E3920

Amount of Each Receipt this Period

35.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

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

60.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 16 OF 57
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

MAJORITY COMMITTEE PAC--MC PAC

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

A. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2023

☐ Primary ☐ General
☒ Other (specify) ▼

ANNUAL

Aggregate Year-to-Date ▼

64842.14

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 21 / 2023**Transaction ID : A92AEAA6BADD4A4980:**

Amount of Each Receipt this Period

35.00

☒ Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

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

B. HALL, WILLIAM, , ,

Mailing Address 537 CLOVER DR

City
SAGINAWState
TXZip Code
76179FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 17 / 2023**Transaction ID : A4CFC7EED8E734007862**

Amount of Each Receipt this Period

50.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

C. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2023

☐ Primary ☐ General
☒ Other (specify)

ANNUAL

Aggregate Year-to-Date ▼

64842.14

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 17 / 2023**Transaction ID : AB47A1A7107D04E0EA95**

Amount of Each Receipt this Period

50.00

☒ Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

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

50.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 17 OF 57
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

MAJORITY COMMITTEE PAC--MC PAC

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

A. HARMON, JERRY, , ,

Mailing Address 1839 CASTLE HILL DR

City
WINDSORState
COZip Code
80550-2779FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 04 / 2023

Transaction ID : AD35DD51E670642609DD

Amount of Each Receipt this Period

50.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

B. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2023

☐ Primary ☐ General
☒ Other (specify) ▼

ANNUAL

Aggregate Year-to-Date ▼

64842.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 04 / 2023

Transaction ID : A7495DCA21B164C9E838

Amount of Each Receipt this Period

50.00

☒ Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

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

C. HARRIES, SCOTT, , ,

Mailing Address 23063 GREEN CREST DR

City
NEWHALLState
CAZip Code
91321-3805FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FINANCIAL SERVICESOccupation (for Individual)
FINANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 22 / 2023

Transaction ID : A986A1BF17B614318818

Amount of Each Receipt this Period

50.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

SUBTOTAL of Receipts This Page (optional)..... ►

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

100.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 18 OF 57
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

MAJORITY COMMITTEE PAC--MC PAC

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

A. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2023

☐ Primary ☐ General
☒ Other (specify) ▼

ANNUAL

Aggregate Year-to-Date ▼

64842.14

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 22 / 2023

Transaction ID : AA8701893C8824FB4A23

Amount of Each Receipt this Period

50.00

☒ Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

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

B. JACKSON, DEB, , ,

Mailing Address 3180 PEAR ORCHARD RD

City
GRANBURYState
TXZip Code
76048-6817FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 24 / 2023

Transaction ID : A00ABCADD88D34AC8AC9

Amount of Each Receipt this Period

100.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

C. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2023

☐ Primary ☐ General
☒ Other (specify)

ANNUAL

Aggregate Year-to-Date ▼

64842.14

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 24 / 2023

Transaction ID : A18E8591675C94FE591D

Amount of Each Receipt this Period

100.00

☒ Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

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

100.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 19 OF 57
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

MAJORITY COMMITTEE PAC--MC PAC

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

A. LATHAM, JOHN K., , ,

Mailing Address 109 WHISPERING PINES DR

City
BULLARDState
TXZip Code
75757-8819FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 22 / 2023**Transaction ID : A036DCD0A18B846CC8FB**

Amount of Each Receipt this Period

100.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

B. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2023

☐ Primary ☐ General
☒ Other (specify) ▼

ANNUAL

Aggregate Year-to-Date ▼

64842.14

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 22 / 2023**Transaction ID : A05D2F993EB2E4587B60**

Amount of Each Receipt this Period

100.00

☒ Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

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

C. MCLELLEN, MICHAEL, , ,

Mailing Address 4925 WEATHERSTONE LANE SE

City
KENTWOODState
MIZip Code
49508FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 13 / 2023**Transaction ID : AEF0152B43A1546419EA**

Amount of Each Receipt this Period

50.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

150.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 20 OF 57
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

MAJORITY COMMITTEE PAC--MC PAC

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

A. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2023

☐ Primary ☐ General
☒ Other (specify) ▼

ANNUAL

Aggregate Year-to-Date ▼

64842.14

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 13 / 2023

Transaction ID : A6EFADBC3BAE4413C947

Amount of Each Receipt this Period

50.00

☒ Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

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

B. OCONNOR, STEPHEN, , ,

Mailing Address 14 CHAMBERLAIN CT

City
GLEN MILLSState
PAZip Code
19342-4100FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 23 / 2023

Transaction ID : ADAD660E4140B4B71AE6

Amount of Each Receipt this Period

50.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

C. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2023

☐ Primary ☐ General
☒ Other (specify) ▼

ANNUAL

Aggregate Year-to-Date ▼

64842.14

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 23 / 2023

Transaction ID : ACEF6536857A143DCA91

Amount of Each Receipt this Period

50.00

☒ Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

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

50.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 21 OF 57
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

MAJORITY COMMITTEE PAC--MC PAC

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

A. PAQUET, DONALD, , ,

Mailing Address 19 LATHAM FARM RD

City
SMITHFIELDState
RIZip Code
02917-1001FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 08 / 2023

Transaction ID : A3CC6BD1083454A78B7F

Amount of Each Receipt this Period

50.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

B. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2023

☐ Primary ☐ General
☒ Other (specify) ▼
ANNUAL

Aggregate Year-to-Date ▼

64842.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 08 / 2023

Transaction ID : AFE8F9935065346B4A2E

Amount of Each Receipt this Period

50.00

☒ Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

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

C. POPOLO, JOSEPH, VICTOR, ,

Mailing Address 9002 DOUGLAS AVE

City
DALLASState
TXZip Code
75225FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CHARLES POTOMAC CAPITALOccupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5454.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 15 / 2023

Transaction ID : AF153566B7F0C4C8291E

Amount of Each Receipt this Period

454.55

☐ Memo Item

SEE REFUND SEPTEMBER 2023

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

504.55

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 22 OF 57
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

MAJORITY COMMITTEE PAC--MC PAC

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

A. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2023

☐ Primary ☐ General
☒ Other (specify) ▼

ANNUAL

Aggregate Year-to-Date ▼

64842.14

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 15 / 2023

Transaction ID : AF80B09C8DB93455DBA5

Amount of Each Receipt this Period

454.55

☒ Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

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

B. PORTER, RICHARD, , ,

Mailing Address 300 NORTH LASALLE

City
CHICAGOState
ILZip Code
60654FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

KIRKLAND ELLIS

LAWYER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5090.91

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 15 / 2023

Transaction ID : A724BC7BABDC74039B6A

Amount of Each Receipt this Period

90.91

☐ Memo Item

SEE REFUND SEPTEMBER 2023

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

C. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2023

☐ Primary ☐ General
☒ Other (specify)

ANNUAL

Aggregate Year-to-Date ▼

64842.14

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 15 / 2023

Transaction ID : A2CC209EB9D3D4B3BA3E

Amount of Each Receipt this Period

90.91

☒ Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

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

90.91

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 23 OF 57
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

MAJORITY COMMITTEE PAC--MC PAC

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

A. PRIESS, CAROL, , ,

Mailing Address 2 RIO VISTA DR

City
SAINT CHARLESState
MOZip Code
63303FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 16 / 2023

Transaction ID : A2427D7E938DA4BCB8F3

Amount of Each Receipt this Period

35.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

B. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2023

☐ Primary ☐ General
☒ Other (specify) ▼
ANNUAL

Aggregate Year-to-Date ▼

64842.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 16 / 2023

Transaction ID : A8BF9579AAF8D496A84C

Amount of Each Receipt this Period

35.00

☒ Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

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

C. ROBBINS, JOHN, , ,

Mailing Address PO BOX 844

City
TUPELOState
MSZip Code
38802-0844FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ROBBINS BROTHERS INCOccupation (for Individual)
SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 07 / 2023

Transaction ID : AC29F66B9B1944D96820

Amount of Each Receipt this Period

50.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

85.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 24 OF 57
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

MAJORITY COMMITTEE PAC--MC PAC

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

A. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2023

☐ Primary ☐ General
☒ Other (specify) ▼

ANNUAL

Aggregate Year-to-Date ▼

64842.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 07 / 2023

Transaction ID : A91CBDC9E9802B49488B0

Amount of Each Receipt this Period

50.00

☒ Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

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

B. RUNKLES, KAREN, , ,

Mailing Address 64 W MAIN ST

City
NEW MARKETState
MDZip Code
21774-6290FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 18 / 2023

Transaction ID : A771B0166091E4605947

Amount of Each Receipt this Period

50.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

C. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2023

☐ Primary ☐ General
☒ Other (specify)

ANNUAL

Aggregate Year-to-Date ▼

64842.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 18 / 2023

Transaction ID : AB10DBDFC560B44F4A59

Amount of Each Receipt this Period

50.00

☒ Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

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

50.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 25 OF 57
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

MAJORITY COMMITTEE PAC--MC PAC

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

A. SCHMID, DEBRA, , ,

Mailing Address 1439 VILLA RD

City
BIRMINGHAMState
MIZip Code
48009-6558FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 10 / 2023

Transaction ID : A1946C929D82E418B8C0

Amount of Each Receipt this Period

50.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

B. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2023

☐ Primary ☐ General
☒ Other (specify) ▼
ANNUAL

Aggregate Year-to-Date ▼

64842.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 10 / 2023

Transaction ID : AC6F490D396D04CE39E9

Amount of Each Receipt this Period

50.00

☒ Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

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

C. SEYBOLD, LINDA, , ,

Mailing Address 3362 LEVEL RD

City
CHURCHVILLEState
MDZip Code
21028FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 17 / 2023

Transaction ID : AD88D34AA965A4473891

Amount of Each Receipt this Period

35.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

85.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 26 OF 57
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

MAJORITY COMMITTEE PAC--MC PAC

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

A. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2023

☐ Primary ☐ General
☒ Other (specify) ▼

ANNUAL

Aggregate Year-to-Date ▼

64842.14

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 17 / 2023

Transaction ID : A2B4C5706DC094ECCA84

Amount of Each Receipt this Period

35.00

☒ Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

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

B. SIEGENTHALER, ANDRE, , ,

Mailing Address 7702 S 5TH ST

City
BROKEN ARROWState
OKZip Code
74011-3530FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 08 / 2023

Transaction ID : AC80780C52D604B22833

Amount of Each Receipt this Period

100.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

C. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2023

☐ Primary ☐ General
☒ Other (specify)

ANNUAL

Aggregate Year-to-Date ▼

64842.14

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 08 / 2023

Transaction ID : A285E91837E2240A19A0

Amount of Each Receipt this Period

100.00

☒ Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

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

100.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 27 OF 57
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

MAJORITY COMMITTEE PAC--MC PAC

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

A. SOSNICK, NIKKE, , ,

Mailing Address 510 PAJARO CT

City
SACRAMENTOState
CAZip Code
95864-7229FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
DESIGNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 23 / 2023**Transaction ID : A6ACB31D35134E04AF8**

Amount of Each Receipt this Period

50.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

B. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2023

☐ Primary ☐ General
☒ Other (specify) ▼
ANNUAL

Aggregate Year-to-Date ▼

64842.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 23 / 2023**Transaction ID : AF523583C2F1641619AB**

Amount of Each Receipt this Period

50.00

☒ Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

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

C. SPIVEY, LINDA, , ,

Mailing Address 757 HARDING LN

City
CHOCOWINITYState
NCZip Code
27817-9290FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 17 / 2023**Transaction ID : AC2405C367F564F98970**

Amount of Each Receipt this Period

35.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

85.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 28 OF 57
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

MAJORITY COMMITTEE PAC--MC PAC

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

A. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2023

☐ Primary ☐ General
☒ Other (specify) ▼

ANNUAL

Aggregate Year-to-Date ▼

64842.14

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 17 / 2023

Transaction ID : A86D1993155A447C4B79

Amount of Each Receipt this Period

35.00

☒ Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

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

B. WHITE, DANIEL, , ,

Mailing Address 434 S WASHINGTON ST

City
LA GRANGEState
TXZip Code
78945-2780FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

SELF

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 04 / 2023

Transaction ID : A97FABD9A560544A4B90

Amount of Each Receipt this Period

50.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

C. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2023

☐ Primary ☐ General
☒ Other (specify)

ANNUAL

Aggregate Year-to-Date ▼

64842.14

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 04 / 2023

Transaction ID : A59650CC09CF340B1A09

Amount of Each Receipt this Period

50.00

☒ Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

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

50.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 OF 57
(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"/> | <input type="checkbox"/> | <input type="checkbox"/> | <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)

MAJORITY COMMITTEE PAC--MC PAC

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

A. WRIGHT, STEPHEN, , ,

Mailing Address 16055 BLACK HICKORY DR

City
WINTER GARDEN

State
FL

Zip Code
34787

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TEAMHEALTH

Occupation (for Individual)
PA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

08 / 16 / 2023

Transaction ID : A24A1383E0FE1480CB19

Amount of Each Receipt this Period

50.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

B. WINRED

Mailing Address PO BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219-1891

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2023

☐ Primary ☐ General
☒ Other (specify) ▼
ANNUAL

Aggregate Year-to-Date ▼

64842.14

Date of Receipt

08 / 16 / 2023

Transaction ID : A1CD7D75CAD39477A862

Amount of Each Receipt this Period

50.00

☒ Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

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

C.

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

Amount of Each Receipt this Period

☐ Memo Item

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

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

50.00

2055.46

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 30 OF 57
(check only one)

| | | | |
|------------------------------|------------------------------|---|-----------------------------|
| <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 |

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)

MAJORITY COMMITTEE PAC--MC PAC**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEEMailing Address 2121 CRYSTAL DR
STE 100City
ARLINGTONState
VAZip Code
22202-3706FEC ID number of contributing
federal political committee.**C**

C00303024

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 30 / 2023

Transaction ID : A7FB8BCA1B1DB45B8893

Amount of Each Receipt this Period

5000.00

☐ Memo Item**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)..... ▶

5000.00

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

5000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 OF 57

(check only one)

| | | | | | | | | |
|------------------------------|------------------------------|------------------------------|--|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" 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)

MAJORITY COMMITTEE PAC--MC PAC

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

A. MCCARTHY VICTORY FUND

Mailing Address PO BOX 30844

City
BETHESDAState
MDZip Code
20824FEC ID number of contributing
federal political committee.

C

C00541011

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

489020.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 30 / 2023

Transaction ID : A91F7E983DB7B45AFAC8

Amount of Each Receipt this Period

106045.00

☐ Memo Item

TRANSFER OF NET PROCEEDS

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

B. CROP INSURANCE PROFESSIONALS ASSOCIATION CIPA PACMailing Address 228 SOUTH WASHINGTON STREET
SUITE 115City
ALEXANDRIAState
VAZip Code
22314FEC ID number of contributing
federal political committee.

C

C00503680

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 28 / 2023

Transaction ID : AAECA18D9A73B43E3898

Amount of Each Receipt this Period

5000.00

☒ Memo Item

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

C. AMERICAN CRYSTAL SUGAR COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 101 NORTH THIRD STREET

City
MOORHEADState
MNZip Code
56560FEC ID number of contributing
federal political committee.

C

C00110338

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 28 / 2023

Transaction ID : A4003E8DAB7A1427492E

Amount of Each Receipt this Period

5000.00

☒ Memo Item

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

106045.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 32 OF 57
(check only one)

| | | | | | | | | |
|------------------------------|------------------------------|------------------------------|--|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" 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)

MAJORITY COMMITTEE PAC--MC PAC

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

A. INTERNATIONAL ASSOCIATION OF FIREFIGHTERS FIREPAC

Mailing Address 1750 NEW YORK AVENUE NORTHWEST

City
WASHINGTONState
DCZip Code
20006FEC ID number of contributing
federal political committee.**C**

C00029447

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | | 28 | | 2023 |

Transaction ID : AD4DF9DD221584E0EB98

Amount of Each Receipt this Period

5000.00

☒ Memo Item

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

B. EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC

Mailing Address 2980 FAIRVIEW PARK DRIVE

City
FALLS CHURCHState
VAZip Code
22042-4511FEC ID number of contributing
federal political committee.**C**

C00088591

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | | 03 | | 2023 |

Transaction ID : AF13B842AC4C242A3835

Amount of Each Receipt this Period

5000.00

☒ Memo Item

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

C. OCCIDENTAL PETROLEUM CORPORATION POLITICAL ACTION COMMITTEEMailing Address 1701 PENNSYLVANIA AVENUE NORTHWEST
SUITE 800City
WASHINGTONState
DCZip Code
20006FEC ID number of contributing
federal political committee.**C**

C00083857

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐
☐

Primary

General

Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | | 17 | | 2023 |

Transaction ID : A03158EC661244AF9AE5

Amount of Each Receipt this Period

5000.00

☒ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

0.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 33 OF 57
(check only one)

| | | | | | | | | |
|------------------------------|------------------------------|------------------------------|--|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" 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)

MAJORITY COMMITTEE PAC--MC PAC

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

A. NELSON, LISA, , ,

Mailing Address 3806 TURNBERRY DRIVE

City
DUMONTState
IAZip Code
50625FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 22 / 2023**Transaction ID : A81BF9904B8FA4C0AB10**

Amount of Each Receipt this Period

5000.00

☒ Memo Item

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

B. ARGENTUM SILVER PACMailing Address 1650 KING ST
STE 602City
ALEXANDRIAState
VAZip Code
22314-2747FEC ID number of contributing
federal political committee.**C** C00338020

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 22 / 2023**Transaction ID : AF5246091679F4A01810**

Amount of Each Receipt this Period

5000.00

☒ Memo Item

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

C. DIRECT SUPPLY, INC. (DSI) PARTNERS PAC

Mailing Address 7301 WEST CHAMPIONS WAY

City
MILWAUKEEState
WIZip Code
53223FEC ID number of contributing
federal political committee.**C** C00409516

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 22 / 2023**Transaction ID : A435D5A23C065454BB03**

Amount of Each Receipt this Period

5000.00

☒ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 34 OF 57
(check only one)

| | | | | | | | | |
|------------------------------|------------------------------|------------------------------|--|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" 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)

MAJORITY COMMITTEE PAC--MC PAC

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

A. NETZER, MICHAEL, , ,

Mailing Address 150 GLEN AVENUE SOUTH

City
LAKEWOODState
NJZip Code
08701FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
VITA HEALTHCARE GROUPOccupation (for Individual)
PARTNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 22 / 2023

Transaction ID : ACC77531BBA6B4A53978

Amount of Each Receipt this Period

5000.00

☒ Memo Item

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

B. WHITE, JOEL, , ,

Mailing Address 1707 VALLEY AVE

City
MC LEANState
VAZip Code
22101-4721FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HGAOccupation (for Individual)
CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 14 / 2023

Transaction ID : A25F5C43DC2974D218A6

Amount of Each Receipt this Period

2500.00

☒ Memo Item

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

C. FORD, ALLYN, C., ,

Mailing Address 1495 NW GARDEN VALLEY BOULEVARD

City
ROSEBURGState
ORZip Code
97471FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ROSEBURG FOREST PRODUCTSOccupation (for Individual)
DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 10 / 2023

Transaction ID : A45CC153F93FB4A95A5A

Amount of Each Receipt this Period

3400.00

☒ Memo Item

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

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

0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 OF 57

(check only one)

| | | | | | | | | |
|------------------------------|------------------------------|------------------------------|--|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" 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)

MAJORITY COMMITTEE PAC--MC PAC

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

A. LAMELAS, PETER, , ,

Mailing Address 65 SPOONBILL ROAD

City
LANTANAState
FLZip Code
33462FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 21 / 2023

Transaction ID : A69B5D174A70F4C0FA33

Amount of Each Receipt this Period

5000.00

☒ Memo Item

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

B. MURPHY, JOHN, R., ,

Mailing Address 855 SAND AVENUE

City
EUGENEState
ORZip Code
97401-6050FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MURPHY COMPANYOccupation (for Individual)
PRESIDENT & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 22 / 2023

Transaction ID : AF079810BAA9D4C96B0B

Amount of Each Receipt this Period

5000.00

☒ Memo Item

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

C. KIM, DONGKOO, , ,

Mailing Address 1332 PESEO DEL MAR

City
PALOS VERDES PENINSULAState
CAZip Code
90274FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

720.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 30 / 2023

Transaction ID : A5AE165131C264AC8956

Amount of Each Receipt this Period

240.20

☒ Memo Item

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

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

0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 OF 57

(check only one)

| | | | | | | | | |
|------------------------------|------------------------------|------------------------------|--|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" 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)

MAJORITY COMMITTEE PAC--MC PAC

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

A. WOOD, ROBERT, , ,

Mailing Address 601 13TH ST NW

City
WASHINGTONState
DCZip Code
20005-3807FEC ID number of contributing
federal political committee.Name of Employer (for Individual)
BGR GROUPOccupation (for Individual)
CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | | 15 | | 2023 |

Transaction ID : A6D22F62FB5FE4CF5B98

Amount of Each Receipt this Period

☒ Memo Item

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

B. FRERES, ROBERT, , ,

Mailing Address PO BOX 276

City
LYONSState
ORZip Code
97358FEC ID number of contributing
federal political committee.Name of Employer (for Individual)
PRESIDENTOccupation (for Individual)
FRERES LUMBER COMPANY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | | 10 | | 2023 |

Transaction ID : A80C1F493EDF2438DAEA

Amount of Each Receipt this Period

☒ Memo Item

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

C. FRALIN, W., HEYWOOD, ,

Mailing Address PO BOX 29600

City
ROANOKEState
VAZip Code
24018-0796FEC ID number of contributing
federal political committee.Name of Employer (for Individual)
RETIREMENT UNLIMITEDOccupation (for Individual)
CHAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | | 22 | | 2023 |

Transaction ID : AB4F196C8CE314F578FB

Amount of Each Receipt this Period

☒ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 OF 57

(check only one)

| | | | | | | | | |
|------------------------------|------------------------------|------------------------------|--|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" 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)

MAJORITY COMMITTEE PAC--MC PAC

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

A. INDUSTRIAL INTEGRITY SOLUTIONS

Mailing Address 2151 EAST CONVENTION CENTER WAY

City
ONTARIOState
CAZip Code
91764FEC 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

M M / D D / Y Y Y Y Y
07 / 07 / 2023

Transaction ID : A907CC6877EF64BAD9B2

Amount of Each Receipt this Period

5000.00

☒ Memo Item

VERIFIED NON-CORPORATE SEE MEMO ITEM

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

B. PREVITI, JAMES, L., ,Mailing Address 2151 EAST CONVENTION WAY
SUITE 222City
ONTARIOState
CAZip Code
91764FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

INDUSTRIAL INTEGRITY SOLUTIONS

OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 07 / 2023

Transaction ID : A3CDDDB75632F14138BD7

Amount of Each Receipt this Period

5000.00

☒ Memo Item

MEMO FOR INTEGRITY SOLUTIONS

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

C. SWANSON, STEVEN, D., ,

Mailing Address 155 OLD GARDEN VALLEY ROAD

City
ROSEBURGState
ORZip Code
97471FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

SWANSON GROUP

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3400.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 10 / 2023

Transaction ID : A5C21F87C4C234E94BEA

Amount of Each Receipt this Period

3400.00

☒ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

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 38 OF 57

(check only one)

| | | | | | | | | |
|------------------------------|------------------------------|------------------------------|--|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" 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)

MAJORITY COMMITTEE PAC--MC PAC

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

A. SOUTHPORT FOREST PRODUCTS, LLC

Mailing Address PO BOX 298

City
COOS BAYState
ORZip Code
97420-0031FEC 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 ▼

900.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | / | 10 | / | 2023 |

Transaction ID : A8BD8041439354EA5ABD

Amount of Each Receipt this Period

900.00

☒ Memo Item

VERIFIED NON-CORPORATE SEE MEMO ITEMS

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

B. FOGG, PHIL, , ,

Mailing Address 15965 NE EILERS ROAD

City
AURORAState
ORZip Code
97002FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

MARQUIS COMPANIES

Occupation (for Individual)

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | / | 08 | / | 2023 |

Transaction ID : A640A28316FB74840812

Amount of Each Receipt this Period

5000.00

☒ Memo Item

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

C. HYATT, JEFFREY, , ,

Mailing Address 601 WEST WALNUT STREET

City
YAKIMAState
WAZip Code
98902FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

HYATT FAMILY COMPANY

Occupation (for Individual)

OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | / | 10 | / | 2023 |

Transaction ID : A40E601AFA0034AB5A0C

Amount of Each Receipt this Period

5000.00

☒ Memo Item

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

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

0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 39 OF 57
(check only one)

| | | | | | | | | |
|------------------------------|------------------------------|------------------------------|--|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" 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)

MAJORITY COMMITTEE PAC--MC PAC

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

A. FERRI, WILLIAM, , ,

Mailing Address 521 OCEAN TER

City
STATEN ISLANDState
NYZip Code
10301-4523FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CANTOR FITZGERALFOccupation (for Individual)
HEAD OF ASSET MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 22 / 2023

Transaction ID : A72BB9BFafa6A4EAE9F2

Amount of Each Receipt this Period

3400.00

☒ Memo Item

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

B. LYONS, JIM, , ,

Mailing Address PO BOX 298

City
COOS BAYState
ORZip Code
97420-0031FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SOUTHPORT FOREST PRODUCTSOccupation (for Individual)
CO-PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 10 / 2023

Transaction ID : ABB23167202EB4797845

Amount of Each Receipt this Period

450.00

☒ Memo Item

MEMO FOR SOUTHPORT FOREST PRODUCTS

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

C. SMITH, JASON, , ,

Mailing Address PO BOX 298

City
COOS BAYState
ORZip Code
97420-0031FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SOUTHPORT FOREST PRODUCTSOccupation (for Individual)
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 10 / 2023

Transaction ID : A25B1CDA928DD4663A9C

Amount of Each Receipt this Period

450.00

☒ Memo Item

MEMO FOR SOUTHPORT FOREST PRODUCTS

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

0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 40 OF 57
(check only one)

| | | | | | | | | |
|------------------------------|------------------------------|------------------------------|--|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" 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)

MAJORITY COMMITTEE PAC--MC PAC

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

A. NELSON, JOEL, , ,

Mailing Address 3806 TURNBERRY DR

City
WEST DES MOINESState
IAZip Code
50265-5332FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
LCSOccupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 22 / 2023

Transaction ID : A41930ACE699F4172BF8

Amount of Each Receipt this Period

5000.00

☒ Memo Item

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

B. EMMERSON, MARK, D., ,

Mailing Address PO BOX 496028

City
REDDINGState
CAZip Code
96049FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
SIERRA PACIFIC INDUSTRIESOccupation (for Individual)
CHAIRMAN & CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 10 / 2023

Transaction ID : ACCB21321FFFA4AF2B01

Amount of Each Receipt this Period

5000.00

☒ Memo Item

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

C. EMMERSON, A., A., ,

Mailing Address PO BOX 496028

City
REDDINGState
CAZip Code
96049-6028FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
SIERRA PACIFIC INDUSTRIESOccupation (for Individual)
CHAIRMAN EMERITUS

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 10 / 2023

Transaction ID : AFC149396B8F14727A8F

Amount of Each Receipt this Period

5000.00

☒ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 OF 57

(check only one)

| | | | | | | | | |
|------------------------------|------------------------------|------------------------------|--|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" 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)

MAJORITY COMMITTEE PAC--MC PAC

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

A. GERSTNER, BRADLEY, T., ,Mailing Address 2550 SAND HILL ROAD
SUITE 150City
MENLO PARKState
CAZip Code
94025FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
ALTIMETER CAPITALOccupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 14 / 2023**Transaction ID : AD1F13D9B7B504002923**

Amount of Each Receipt this Period

5000.00

☒ Memo Item

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

B. WEISBERG, WILLIAM, I., ,

Mailing Address 23700 COMMERCE PARK

City
BEACHWOODState
OHZip Code
44122FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
SABER HEALTHCAREOccupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 22 / 2023**Transaction ID : ACE04C7C0F4A747FEA51**

Amount of Each Receipt this Period

5000.00

☒ Memo Item

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

C. PROTECT THE HOUSE 2024

Mailing Address PO BOX 30844

City
BETHESDAState
MDZip Code
20824FEC ID number of contributing
federal political committee.**C** C00831925

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1092233.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 30 / 2023**Transaction ID : A1020280A37494A5280F**

Amount of Each Receipt this Period

41971.46

☐ Memo Item

TRANSFER OF NET PROCEEDS

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

41971.46

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 42 OF 57
(check only one)

| | | | | | | | | |
|------------------------------|------------------------------|------------------------------|--|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" 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)

MAJORITY COMMITTEE PAC--MC PAC

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

A. JOHNSON, WILLIAM, , ,

Mailing Address 3034 GORDON DRIVE

City
NAPLESState
FLZip Code
34102FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 22 / 2023

Transaction ID : A3A84B23C3F424127B41

Amount of Each Receipt this Period

5000.00

☒ Memo Item

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

B. VASINDA, MARY, S., ,

Mailing Address 10604 REDBRIDGE WAY

City

BAKERSFIELD

State

CA

Zip Code

93311

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AROUND THE CLOCK CAREOccupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 22 / 2023

Transaction ID : ACECFA8E4464D434E981

Amount of Each Receipt this Period

5000.00

☒ Memo Item

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

C. DAUM, ROBERT, C., ,

Mailing Address 1000 PALM WAY ROAD

City

NORTH PALM BEACH

State

FL

Zip Code

33408-2929

FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 03 / 2023

Transaction ID : ABA0E52DD841442CB866

Amount of Each Receipt this Period

5000.00

☒ Memo Item

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

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

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 43 OF 57
(check only one)

| | | | | | | | | |
|------------------------------|------------------------------|------------------------------|--|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" 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)

MAJORITY COMMITTEE PAC--MC PAC

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

A. DE NICOLA, ANTHONY, , ,

Mailing Address 732 NORTH MANASOTA KEY ROAD

City
ENGLEWOOD

State
FL

Zip Code
34223

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WELSH CARSON

Occupation (for Individual)
CHAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

08 / 08 / 2023

Transaction ID : A58A853FBAD0245C5985

Amount of Each Receipt this Period

5000.00

☒ Memo Item

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

B. SACO ROAD PROPERTY, LLC

Mailing Address 7500 CALLE NOBLEZA

City
BAKERSFIELD

State
CA

Zip Code
93309

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 ▼

2400.00

Date of Receipt

08 / 03 / 2023

Transaction ID : A7217B7A4989B45ED86C

Amount of Each Receipt this Period

2000.00

☒ Memo Item

VERIFIED NON-CORPORATE SEE MEMO ITEM

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

C. JOHNSON, RUSS, , ,

Mailing Address 5916 ALFRED HARRELL HIGHWAY

City
BAKERSFIELD

State
CA

Zip Code
93308-9651

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SAFETY NETWORK

Occupation (for Individual)
SELF-EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

08 / 05 / 2023

Transaction ID : AA8D7A47AB10E4653818

Amount of Each Receipt this Period

1183.31

☒ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

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 44 OF 57

(check only one)

| | | | | | | | | |
|------------------------------|------------------------------|------------------------------|--|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" 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)

MAJORITY COMMITTEE PAC--MC PAC

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

A. CONARD, EDWARD, , ,

Mailing Address 1202 LEXINGTON AVENUE
BOX 109City
NEW YORKState
NYZip Code
10028FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYEDOccupation (for Individual)
INVESTOR & WRITER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | / | 31 | / | 2023 |

Transaction ID : A3B33AF0E384F49008D3

Amount of Each Receipt this Period

5000.00

☒ Memo Item

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

B. DOWNS, GORDON, LEE, ,

Mailing Address 7500 CALLE NOBLEZA

City
BAKERSFIELDState
CAZip Code
93309-0806FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DOWNS EQUIPMENTOccupation (for Individual)
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | / | 03 | / | 2023 |

Transaction ID : AFDEE15261428412EABA

Amount of Each Receipt this Period

2000.00

☒ Memo Item

MEMO FOR SACO ROAD PROPERTY

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

C. SPANOS, DEAN, A., ,

Mailing Address 3333 SUSAN STREET

City
COSTA MESAState
CAZip Code
92626FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LA CHARGERSOccupation (for Individual)
CHAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | / | 24 | / | 2023 |

Transaction ID : A2D163A186E0948B187C

Amount of Each Receipt this Period

5000.00

☒ Memo Item

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

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

0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 45 OF 57
(check only one)

| | | | | | | | | |
|------------------------------|------------------------------|------------------------------|--|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" 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)

MAJORITY COMMITTEE PAC--MC PAC

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

A. MARCIL, GERALD, , ,

Mailing Address PO BOX 93

City
PALOS VERDES ESTATESState
CAZip Code
90274FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
PALOS VERDES INVESTMENTS, INC.Occupation (for Individual)
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 31 / 2023

Transaction ID : AD9BB7F734AD948EA9C1

Amount of Each Receipt this Period

5000.00

☒ Memo Item

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

B. VALACH, KENNETH, , ,

Mailing Address 5 LAZEE TRAIL

City
HOUSTONState
TXZip Code
77024FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
CROW HOLDINGS DEVELOPMENTOccupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 10 / 2023

Transaction ID : AF9E6F720AB084645B38

Amount of Each Receipt this Period

5000.00

☒ Memo Item

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

C. SMITH, THOMAS, S., ,

Mailing Address 5619 BORDLEY DRIVE

City
HOUSTONState
TXZip Code
77056FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 24 / 2023

Transaction ID : AF163B990FBEE42EE863

Amount of Each Receipt this Period

5000.00

☒ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 OF 57

(check only one)

| | | | | | | | | |
|------------------------------|------------------------------|------------------------------|--|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" 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)

MAJORITY COMMITTEE PAC--MC PAC

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

A. SCHROEDER, ERNEST, , ,

Mailing Address 6 MORNING VIEW DRIVE

City
NEWPORT COASTState
CAZip Code
92657-1500FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SCHROEDER COMPANIESOccupation (for Individual)
REAL ESTATE ASSET MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 12 / 2023

Transaction ID : A77AA1D1CE0414BAA8FF

Amount of Each Receipt this Period

5000.00

☒ Memo Item

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

B. SCHROEDER, DONNA, , ,

Mailing Address 6 MORNING VIEW DRIVE

City
NEWPORT COASTState
CAZip Code
92657FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SCHROEDER COMPANIESOccupation (for Individual)
REAL ESTATE INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 12 / 2023

Transaction ID : A90C2206B8B14442FAFC

Amount of Each Receipt this Period

5000.00

☒ Memo Item

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

C. SANTA ROSA RANCHERIAMailing Address 16835 ALKALI DRIVE
PO BOX 8City
LEMOOREState
CAZip Code
93245FEC 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 ▼

1700.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 08 / 2023

Transaction ID : A9BE76991998240AFBB9

Amount of Each Receipt this Period

1700.00

☒ Memo Item

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

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

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 47 OF 57

(check only one)

| | | | | | | | | |
|------------------------------|------------------------------|------------------------------|--|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" 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)

MAJORITY COMMITTEE PAC--MC PAC

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

A. SPANOS, MICHAEL, A., ,

Mailing Address 10100 TRINITY PARKWAY
FLOOR 5City
STOCKTONState
CAZip Code
95219-7242FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
A.G. SPANOS COMPANIESOccupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | / | 24 | / | 2023 |

Transaction ID : A816382DACA924BDD82C

Amount of Each Receipt this Period

5000.00

☒ Memo Item

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

B. RUHL, ALEXIS, F., ,

Mailing Address 10100 TRINITY PARKWAY
5TH FLOORCity
STOCKTONState
CAZip Code
95219-7242FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
A.G. SPANOS COMPANIESOccupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | / | 24 | / | 2023 |

Transaction ID : A1D8331293DDA42FC811

Amount of Each Receipt this Period

5000.00

☒ Memo Item

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

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| | / | | / | |

Amount of Each Receipt this Period

☐ Memo Item

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

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

0.00

148016.46

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 48 OF 57

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

MAJORITY COMMITTEE PAC--MC PAC

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS

Mailing Address PO BOX 1

City
LOS ANGELESState
CAZip Code
90053-0001

Purpose of Disbursement

SEE MEMO ITEMS

Candidate Name

001

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:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 8 | | | 0 | 3 | | | 2 | 0 | 2 | 3 | | |

FEC Identification Number

C

Transaction ID : B14A8CD2A1

Amount of Each Disbursement this Period

515.46

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ADOBE

Mailing Address 151 SOUTH ALMADEN BLVD

City
SAN JOSEState
CAZip Code
95113-2001

Purpose of Disbursement

PAC SOFTWARE SERVICE

Candidate Name

001

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:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : B7309EDE6E

Amount of Each Disbursement this Period

2.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. ADOBE

Mailing Address 151 SOUTH ALMADEN BLVD

City
SAN JOSEState
CAZip Code
95113-2001

Purpose of Disbursement

PAC SOFTWARE SERVICE

Candidate Name

001

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:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 | | | 1 | 4 | | | 2 | 0 | 2 | 3 | | |

FEC Identification Number

C

Transaction ID : B917FC49AA

Amount of Each Disbursement this Period

29.99

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

515.46

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 49 OF 57

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

MAJORITY COMMITTEE PAC--MC PAC

Full Name (Last, First, Middle Initial)

A. ADOBE

Mailing Address 151 SOUTH ALMADEN BLVD

City
SAN JOSEState
CAZip Code
95113-2001Purpose of Disbursement
PAC SOFTWARE SERVICE

001

Category/
Type

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 14 / 2023

FEC Identification Number

C Transaction ID : BA7B26DDDI

Amount of Each Disbursement this Period

82.49

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. AT&T

Mailing Address PO BOX 60017

City
LOS ANGELESState
CAZip Code
90060-0017Purpose of Disbursement
PAC TELEPHONE SERVICE

001

Category/
Type

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 15 / 2023

FEC Identification Number

C Transaction ID : BC286D6050I

Amount of Each Disbursement this Period

122.79

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. CAPITAL GRILLE

Mailing Address 601 PENNSYLVANIA AVENUE NW

City
WASHINGTONState
DCZip Code
20004-2601Purpose of Disbursement
PAC MEAL EXPENSE

001

Category/
Type

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 30 / 2023

FEC Identification Number

C Transaction ID : BB695B4EBI

Amount of Each Disbursement this Period

252.20

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 50 OF 57

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

MAJORITY COMMITTEE PAC--MC PAC

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS

Mailing Address PO BOX 1

City
LOS ANGELESState
CAZip Code
90053-0001

Purpose of Disbursement

SEE MEMO ITEMS

Candidate Name

001

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:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 8 | | | 2 | 2 | | | 2 | 0 | 3 | | | |

FEC Identification Number

C

Transaction ID : B5C7CF03A8

Amount of Each Disbursement this Period

13996.75

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ADOBE

Mailing Address 151 SOUTH ALMADEN BLVD

City
SAN JOSEState
CAZip Code
95113-2001

Purpose of Disbursement

PAC SOFTWARE SERVICE

Candidate Name

001

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:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 | | | 1 | 5 | | | 2 | 0 | 3 | | | |

FEC Identification Number

C

Transaction ID : B95CEE0EDE

Amount of Each Disbursement this Period

82.49

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. AT&T

Mailing Address PO BOX 60017

City
LOS ANGELESState
CAZip Code
90060-0017

Purpose of Disbursement

PAC TELEPHONE SERVICE

Candidate Name

001

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:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 | | | 1 | 5 | | | 2 | 0 | 3 | | | |

FEC Identification Number

C

Transaction ID : BF8C42B9A8

Amount of Each Disbursement this Period

122.79

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

13996.75

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 51 OF 57

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

MAJORITY COMMITTEE PAC--MC PAC

Full Name (Last, First, Middle Initial)

A. ADOBE

Mailing Address 151 SOUTH ALMADEN BLVD

City
SAN JOSEState
CAZip Code
95113-2001Purpose of Disbursement
PAC SOFTWARE SERVICE
Candidate Name

001

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 15 / 2023

FEC Identification Number

C Transaction ID : B49FD7F756/

Amount of Each Disbursement this Period

29.99

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. JOE'S SEAFOOD, PRIME STEAK, & STONE CRAB

Mailing Address 750 15TH STREET NW

City
WASHINGTONState
DCZip Code
20005Purpose of Disbursement
PAC CATERING
Candidate Name

003

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 25 / 2023

FEC Identification Number

C Transaction ID : BC561DCBA7

Amount of Each Disbursement this Period

2000.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. JW MARRIOTT

Mailing Address 4040 CENTRAL FLORIDA PKWY

City
ORLANDOState
FLZip Code
32837-7662Purpose of Disbursement
PAC CATERING
Candidate Name

007

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 26 / 2023

FEC Identification Number

C Transaction ID : BF8AB2193F

Amount of Each Disbursement this Period

11735.49

☒ Memo Item

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

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

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 52 OF 57

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

MAJORITY COMMITTEE PAC--MC PAC

Full Name (Last, First, Middle Initial)

A. AXIOM STRATEGIESMailing Address 1251 NW BRIARCLIFF PARKWAY
SUITE 85City
KANSAS CITYState
MOZip Code
64116-1780Purpose of Disbursement
PAC STRATEGIC CONSULTING

Candidate Name

001

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 02 / 2023

FEC Identification Number

C

Transaction ID : B36C3C74E4

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BELMONT STRATEGIES

Mailing Address 184 WEST BOYSTON STREET

City
WEST BOYLSTONState
MAZip Code
01583-1756Purpose of Disbursement
PAC STRATEGIC CONSULTING

Candidate Name

001

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 22 / 2023

FEC Identification Number

C

Transaction ID : B10B9FC94A

Amount of Each Disbursement this Period

8000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BERKE FARAH, LLPMailing Address 1200 NEW HAMPSHIRE AVENUE NW
SUITE 800City
WASHINGTONState
DCZip Code
20036-6805Purpose of Disbursement
PAC LEGAL CONSULTING

Candidate Name

001

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 10 / 2023

FEC Identification Number

C

Transaction ID : B5FC5721BE

Amount of Each Disbursement this Period

8000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

21000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 53 OF 57

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

MAJORITY COMMITTEE PAC--MC PAC

Full Name (Last, First, Middle Initial)

A. CFS COMPLIANCE

Mailing Address PO BOX 30844

City
BETHESDAState
MDZip Code
20824Purpose of Disbursement
PAC COMPLIANCE CONSULTING
Candidate Name

001

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
08 09 2023

FEC Identification Number

C Transaction ID : B498B08A4B

Amount of Each Disbursement this Period

6000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CONVERGENCE MEDIA

Mailing Address P.O. BOX 711024

City
HERNDONState
VAZip Code
20171-1024Purpose of Disbursement
PAC FUNDRAISING CONSULTING
Candidate Name

003

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
08 10 2023

FEC Identification Number

C Transaction ID : B143A9E2BE

Amount of Each Disbursement this Period

60000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. GUSTO

Mailing Address 525 20TH ST

City
SAN FRANCISCOState
CAZip Code
94107-4345Purpose of Disbursement
PAC PAYROLL FEES
Candidate Name

001

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
08 04 2023

FEC Identification Number

C Transaction ID : B534C09700

Amount of Each Disbursement this Period

41.34

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

66041.34

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 54 OF 57

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

MAJORITY COMMITTEE PAC--MC PAC

Full Name (Last, First, Middle Initial)

A. KEDRON PUBLIC AFFAIRS, LLC

Mailing Address PO BOX 781

City
TYRONEState
GAZip Code
30290

Purpose of Disbursement

PAC PUBLIC AFFAIRS CONSULTING

Candidate Name

001

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:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 8 | | | 1 | 1 | | | 2 | 0 | 2 | 3 | | |

FEC Identification Number

C

Transaction ID : B82BB3F507

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SPARKS COMMUNICATIONS

Mailing Address 408 PENWOOD ROAD

City
SILVER SPRINGState
MDZip Code
20901

Purpose of Disbursement

PAC COMMUNICATIONS CONSULTING

Candidate Name

003

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:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 8 | | | 2 | 2 | | | 2 | 0 | 2 | 3 | | |

FEC Identification Number

C

Transaction ID : B09F5FB82BI

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STRATEGIC ADVANCE SERVICESMailing Address 611 PENNSYLVANIA AVENUE SE
SUITE 267City
WASHINGTONState
DCZip Code
20003-4303

Purpose of Disbursement

PAC TRAVEL & EVENT SERVICES

Candidate Name

002

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:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 8 | | | 0 | 7 | | | 2 | 0 | 2 | 3 | | |

FEC Identification Number

C

Transaction ID : B4B4429D4F

Amount of Each Disbursement this Period

37050.35

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

44050.35

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 55 OF 57

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

MAJORITY COMMITTEE PAC--MC PAC

Full Name (Last, First, Middle Initial)

A. STRATEGIC ADVANCE SERVICESMailing Address 611 PENNSYLVANIA AVENUE SE
SUITE 267City
WASHINGTONState
DCZip Code
20003-4303

Purpose of Disbursement

PAC TRAVEL & EVENT SERVICES

Candidate Name

002

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:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 8 | | | 2 | 9 | | | 2 | 0 | 2 | 3 | | |

FEC Identification Number

C

Transaction ID : B451AAFEF7

Amount of Each Disbursement this Period

8900.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. THOMSON, JILL, , ,

Mailing Address PO BOX 30844

City
BETHESDAState
MDZip Code
20824-0844

Purpose of Disbursement

PAC TREASURER SERVICES

Candidate Name

001

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:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 8 | | | 1 | 8 | | | 2 | 0 | 2 | 3 | | |

FEC Identification Number

C

Transaction ID : BC18C4C26A

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
STE 530City
ARLINGTONState
VAZip Code
22209-2517

Purpose of Disbursement

PAC E-MERCHANT FEES

Candidate Name

001

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:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 8 | | | 0 | 7 | | | 2 | 0 | 2 | 3 | | |

FEC Identification Number

C

Transaction ID : BF18844E9B

Amount of Each Disbursement this Period

10.23

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

9410.23

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 56 OF 57

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

MAJORITY COMMITTEE PAC--MC PAC

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
STE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
PAC E-MERCHANT FEES

001

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 14 / 2023

FEC Identification Number

C

Transaction ID : B5BA2CB302

Amount of Each Disbursement this Period

73.07

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
STE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
PAC E-MERCHANT FEES

001

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 23 / 2023

FEC Identification Number

C

Transaction ID : BE98C31DB4

Amount of Each Disbursement this Period

53.86

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
STE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
PAC E-MERCHANT FEES

001

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 29 / 2023

FEC Identification Number

C

Transaction ID : B9A87D5F35

Amount of Each Disbursement this Period

77.82

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

204.75

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

155218.88

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 57 OF 57

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

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)

MAJORITY COMMITTEE PAC--MC PAC

Full Name (Last, First, Middle Initial)

A. DE LA YNCERA, CARMEN, , ,

Mailing Address 537 BOUNDARY BLVD

City
ROTONDA WESTState
FLZip Code
33947-2033

Purpose of Disbursement

PAC CONTRIBUTION REFUND

Candidate Name

010

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:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | | 14 | | 2023 |

FEC Identification Number

C

Transaction ID : B6ED02C348

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. PASCUZZO, GIACOMINA, , ,

Mailing Address 86 N QUAIL CIR

City
FINCASTLEState
VAZip Code
24090-3354

Purpose of Disbursement

PAC CONTRIBUTION REFUND

Candidate Name

010

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:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | | 28 | | 2023 |

FEC Identification Number

C

Transaction ID : B94F34C9177

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

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:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| | | | | |

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

35.00

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

35.00