

**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

New Power PAC

ADDRESS (number and street)

PO Box 1450

Check if different  
than previously  
reported. (ACC)

London

KY

40743-1450

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00489252

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)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

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.

Mahoney, Heather, Roe, Ms,

Type or Print Name of Treasurer

Signature of Treasurer

Mahoney, Heather, Roe, Ms,

[Electronically Filed]

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

New Power PAC

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y  
07 01 2020

To:

M M / D D / Y Y Y Y Y  
09 30 2020

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2020		1157.94
(b) Cash on Hand at Beginning of Reporting Period.....	11566.35	
(c) Total Receipts (from Line 19) .....	4501.67	139569.70
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	16068.02	140727.64
7. Total Disbursements (from Line 31) .....	5637.55	130297.17
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	10430.47	10430.47
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	



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

## For further information contact:

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

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

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

**New Power PAC**

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y Y
07	/	01	/	2020

To:

M M	/	D D	/	Y Y Y Y Y Y
09	/	30	/	2020

**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).....

4501.67

139481.22

(ii) Unitemized .....

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

4501.67

139481.22

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

4501.67

139481.22

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

88.48

## 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)) .....

4501.67

139569.70

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

4501.67

139569.70

**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 .....	5102.85	66203.44
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	5102.85	66203.44
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	534.70	53576.44
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	10517.29
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	5637.55	130297.17
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5637.55	130297.17

**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) .....	4501.67	139481.22
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	4501.67	139481.22
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	5102.85	66203.44
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	88.48
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	5102.85	66114.96

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 10

☒ 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)

**New Power PAC**

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

### A. Kentuckians For The Commonwealth

Mailing Address PO Box 1450

City  
London

State  
KY

Zip Code  
40743

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 ▼

139481.22

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 30 / 2020

Transaction ID : SA11AI.5919

Amount of Each Receipt this Period

4318.13

☐ Memo Item

In-kind - staff time support

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

### B. Kentuckians For The Commonwealth

Mailing Address PO Box 1450

City  
London

State  
KY

Zip Code  
40743

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 ▼

135163.09

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 30 / 2020

Transaction ID : SA11AI.5920

Amount of Each Receipt this Period

183.54

☐ Memo Item

In-kind - shared costs (utilities, rent, phone, etc)

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 / 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)..... ►

4501.67

4501.67

**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 7 OF 10

<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)

**New Power PAC**

Full Name (Last, First, Middle Initial)

**A. DreamHost**Mailing Address **PMB #257**  
**417 Associated Rd.**City  
BreaState  
CAZip Code  
92821Purpose of Disbursement  
web hosting fee

001

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	4			2	0	2	0		

FEC Identification Number

C

**Transaction ID : SB21B.5913**

Amount of Each Disbursement this Period

95.40

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DreamHost**Mailing Address **PMB #257**  
**417 Associated Rd.**City  
BreaState  
CAZip Code  
92821Purpose of Disbursement  
web hosting fee

001

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	8			2	0	2	0		

FEC Identification Number

C

**Transaction ID : SB21B.5914**

Amount of Each Disbursement this Period

39.99

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Kentuckians For The Commonwealth**Mailing Address **PO Box 1450**City  
LondonState  
KYZip Code  
40743Purpose of Disbursement  
In-kind - shared costs (utilities, rent, phone, etc)Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			3	0			2	0	2	0		

FEC Identification Number

C

**Transaction ID : SB21B.5921**

Amount of Each Disbursement this Period

183.54

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

318.93

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 8 OF 10

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27  
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 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)

**New Power PAC**

Full Name (Last, First, Middle Initial)

## **A. Kentuckians For The Commonwealth**

Mailing Address PO Box 1450

City  
London

State  
KY

Zip Code  
40743

Purpose of Disbursement  
In-kind - staff time support

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
09 / 30 / 2020

FEC Identification Number

C

**Transaction ID : SB21B.5922**

Amount of Each Disbursement this Period

4318.13

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. Toskr**

Mailing Address 1330 Broadway, 3rd Floor

City  
Oakland

State  
CA

Zip Code  
94612

Purpose of Disbursement  
fees for texting services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2020  
☐ Primary ☒ General  
☐ Other (specify)

001  
Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
07 / 10 / 2020

FEC Identification Number

C

**Transaction ID : SB21B.5907**

Amount of Each Disbursement this Period

29.51

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. Toskr**

Mailing Address 1330 Broadway, 3rd Floor

City  
Oakland

State  
CA

Zip Code  
94612

Purpose of Disbursement  
texting service fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2020  
☐ Primary ☒ General  
☐ Other (specify) ▼

001  
Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
08 / 27 / 2020

FEC Identification Number

C

**Transaction ID : SB21B.5912**

Amount of Each Disbursement this Period

45.36

☐ Memo Item

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

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

4393.00

4711.93



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

 PAGE 9 OF 10  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>New Power PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 5px;">C</span> <span>C00489252</span> </div>
---	--

 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on MM / DD / YYYY

Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span> <b>Facebook inc</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>MM / DD / YYYY</span> </div> <div style="display: flex; justify-content: space-between;"> <span>09 / 24 / 2020</span> </div>	
Mailing Address <b>1601 Willow Road</b>			Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-right: 10px;">0.79</span> </div> <b>Transaction ID : SE.5842</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <span>MM / DD / YYYY</span> </div> <div style="display: flex; justify-content: space-between;"> <span>09 / 25 / 2020</span> </div>	
City <b>Menlo Park</b>	State <b>CA</b>	Zip Code <b>94025</b>		
Purpose of Expenditure <b>social media ads</b>		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>		
Name of Federal Candidate: <b>MCCONNELL, MITCH, , ,</b>			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>KY</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-right: 10px;">0.79</span> </span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span> <b>Facebook inc</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>MM / DD / YYYY</span> </div> <div style="display: flex; justify-content: space-between;"> <span>09 / 24 / 2020</span> </div>	
Mailing Address <b>1601 Willow Road</b>			Amount <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-right: 10px;">0.01</span> </div> <b>Transaction ID : SE.5843</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <span>MM / DD / YYYY</span> </div> <div style="display: flex; justify-content: space-between;"> <span>09 / 25 / 2020</span> </div>	
City <b>Menlo Park</b>	State <b>CA</b>	Zip Code <b>94025</b>		
Purpose of Expenditure <b>social meda ads</b>		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>		
Name of Federal Candidate: <b>MCCONNELL, MITCH, , ,</b>			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>KY</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="margin-right: 10px;">0.80</span> </span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	<span style="margin-right: 10px;">0.80</span>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	<span style="margin-right: 10px;"></span>
(c) TOTAL Independent Expenditures .....	▶	<span style="margin-right: 10px;"></span>

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

Mahoney, Heather, Roe, Ms,

[Electronically Filed]

Date

 MM / DD / YYYY  
 10 / 12 / 2020

Signature

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

 PAGE 10 OF 10  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>New Power PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 5px;">C</span> <span>C00489252</span> </div>
---	--

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

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

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

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

Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span> <b>Facebook inc</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address <b>1601 Willow Road</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">533.90</div>	
City <b>Menlo Park</b>	State <b>CA</b>	Zip Code <b>94025</b>		
Purpose of Expenditure <b>social media ads</b>		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>	<b>Transaction ID : SE.5844</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: <b>MCCONNELL, MITCH, ,</b>			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>KY</b>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; float: right;">534.70</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <span style="float: right;"><input type="checkbox"/> Memo Item</span>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">533.90</div>	
City	State	Zip Code		
Purpose of Expenditure		Category/ Type <span style="border: 1px solid black; padding: 2px;"></span>	Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: <div style="display: flex; justify-content: space-between;"> <span><input type="checkbox"/> Support</span> <span><input type="checkbox"/> Oppose</span> </div>			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; float: right;"></span>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	533.90
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures .....	▶	534.70

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

Mahoney, Heather, Roe, Ms,

[Electronically Filed]

Date

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

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

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

Signature