

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 Good Friends PAC

ADDRESS (number and street) PO Box 1632 Beaverton OR 97075

2. FEC IDENTIFICATION NUMBER C C00543116 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) (b) Monthly Report Due On: Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) (d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S)

5. Covering Period 01 / 01 / 2024 through 03 / 31 / 2024

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

Signature of Treasurer Broz, Randall, , , Date 04 / 08 / 2024

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Good Friends PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2024"/>	<input type="text" value="29197.29"/>	<input type="text" value="29197.29"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="29197.29"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="12500.00"/>	<input type="text" value="12500.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="41697.29"/>	<input type="text" value="41697.29"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="18941.12"/>	<input type="text" value="18941.12"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="22756.17"/>	<input type="text" value="22756.17"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Good Friends PAC

Report Covering the Period: From: 01 / 01 / 2024 To: 03 / 31 / 2024

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).....	12500.00	12500.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	12500.00	12500.00
(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)	12500.00	12500.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	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)).....▶	12500.00	12500.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	12500.00	12500.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	1441.12	1441.12
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1441.12	1441.12
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	17500.00	17500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	18941.12	18941.12
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	18941.12	18941.12

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	12500.00	12500.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	12500.00	12500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1441.12	1441.12
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1441.12	1441.12

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 17
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Good Friends PAC

A. Chapman, Matt, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 615 SW Burlingame Ter
 City Portland State OR Zip Code 97239-2643
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 01 / 06 / 2024
Transaction ID : 5495572
 Amount of Each Receipt this Period 5000.00
 Memo Item
 * Earmarked Contribution: See Below

B. ActBlue
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 441146
 City West Somerville State MA Zip Code 02144-0031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 12500.00

Date of Receipt 01 / 07 / 2024
Transaction ID : 5495572E
 Amount of Each Receipt this Period 5000.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

C. Eyerman, Linda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 80296 Pacific Rd
 City Arch Cape State OR Zip Code 97102-0177
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: 2024 Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 19 / 2024
Transaction ID : 5519534
 Amount of Each Receipt this Period 1000.00
 Memo Item
 * Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....▶	6000.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 17
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Good Friends PAC

A. ActBlue

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

Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
-----------------------------------	---

Receipt For: 2024
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
12500.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2024

Transaction ID : 5519534E

Amount of Each Receipt this Period
1000.00

Memo Item

Note: Above Contribution earmarked through this organization.

B. Heatherington, Jeff, , ,

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

Mailing Address 1512 NW 86Th St

City Vancouver	State WA	Zip Code 98665-7037
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FamilyCare	Occupation (for Individual) President
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Receipt For: 2024
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
03 / 03 / 2024

Transaction ID : 5519543

Amount of Each Receipt this Period
1000.00

Memo Item

* Earmarked Contribution: See Below

C. ActBlue

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

Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
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Receipt For: 2024
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
12500.00

Date of Receipt
MM / DD / YYYY
03 / 03 / 2024

Transaction ID : 5519543E

Amount of Each Receipt this Period
1000.00

Memo Item

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 17
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Good Friends PAC

A. Powell, Alice, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6115 SE Salmon St
 City Portland State OR Zip Code 97215-2819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: 2024
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 19 / 2024
Transaction ID : 5519535
 Amount of Each Receipt this Period 500.00
 Memo Item
 * Earmarked Contribution: See Below

B. ActBlue
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 441146
 City West Somerville State MA Zip Code 02144-0031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field
 Receipt For: 2024
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 12500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 24 / 2024
Transaction ID : 5519535E
 Amount of Each Receipt this Period 500.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

C. Shields, Chip, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4055 NE 9Th Ave
 City Portland State OR Zip Code 97212-1216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Schaeffer Mfg. Occupation (for Individual) Sales Rep
 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
 01 / 27 / 2024
Transaction ID : 5495573
 Amount of Each Receipt this Period 5000.00
 Memo Item
 * Earmarked Contribution: See Below

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 OF 17
 (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

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NAME OF COMMITTEE (In Full)
Good Friends PAC

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

Mailing Address **PO Box 441146**

City West Somerville	State MA	Zip Code 02144-0031
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
-----------------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
12500.00

Date of Receipt
01 / 28 / 2024

Transaction ID : 5495573E

Amount of Each Receipt this Period
5000.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
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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).....	0.00
TOTAL This Period (last page this line number only).....	12500.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Good Friends PAC

Form A: ActBlue. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Credit Card Processing), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (01/07/2024), FEC Identification Number, Transaction ID (500661144), and Amount of Each Disbursement (197.50).

Form B: ActBlue. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Credit Card Processing), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (01/29/2024), FEC Identification Number, Transaction ID (500661149), and Amount of Each Disbursement (197.50).

Form C: ActBlue. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Credit Card Processing), Candidate Name, Office Sought, Disbursement For (2024), Date of Disbursement (03/03/2024), FEC Identification Number, Transaction ID (500661150), and Amount of Each Disbursement (39.50).

SUBTOTAL of Disbursements This Page (optional) 434.50
TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Good Friends PAC

A. ActBlue

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

Purpose of Disbursement
Credit Card Processing

Candidate Name

Office Sought: House Senate President
Disbursement For: 2024 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 24 / 2024

FEC Identification Number: C

Transaction ID : 500661153

Amount of Each Disbursement this Period: 59.25

Memo Item

B. ANGERHOLZER BROZ CONSULTING LLC

Full Name (Last, First, Middle Initial)

Mailing Address 499 S Captial St Swsuite 422

City Washington State DC Zip Code 20003

Purpose of Disbursement
Compliance Fee

Candidate Name

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

State: District:

Date of Disbursement: 02 / 02 / 2024

FEC Identification Number: C

Transaction ID : 500661127

Amount of Each Disbursement this Period: 293.56

Memo Item

C. ANGERHOLZER BROZ CONSULTING LLC

Full Name (Last, First, Middle Initial)

Mailing Address 499 S Captial St Swsuite 422

City Washington State DC Zip Code 20003

Purpose of Disbursement
Compliance Fee

Candidate Name

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

State: District:

Date of Disbursement: 02 / 02 / 2024

FEC Identification Number: C

Transaction ID : 500661141

Amount of Each Disbursement this Period: 250.00

Memo Item *

SUBTOTAL of Disbursements This Page (optional)..... ▶ 352.81

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Good Friends PAC

A. ANGERHOLZER BROZ CONSULTING LLC

Full Name (Last, First, Middle Initial)

Mailing Address 499 S Captial St Swsuite 422

City Washington State DC Zip Code 20003

Purpose of Disbursement Accounting Software

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 02 / 22 / 2024

FEC Identification Number C

Transaction ID : 500661126

Amount of Each Disbursement this Period 40.81

Memo Item

B. NGP VAN

Full Name (Last, First, Middle Initial)

Mailing Address 655 15Th St NW Ste 650

City Washington State DC Zip Code 20005-5738

Purpose of Disbursement Software

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 02 / 23 / 2024

FEC Identification Number C

Transaction ID : 500661130

Amount of Each Disbursement this Period 600.00

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

FEC Identification Number C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	640.81
TOTAL This Period (last page this line number only).....▶	1428.12

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Good Friends PAC

Full Name (Last, First, Middle Initial) A. Andrea Salinas For Oregon		Date of Disbursement MM / DD / YYYY 02 / 21 / 2024
Mailing Address PO Box 230985		FEC Identification Number C C00793703 Transaction ID : 500661119 Amount of Each Disbursement this Period 2500.00
City Tigard	State OR	
Zip Code 97281-0985	Purpose of Disbursement Political Contribution	Category/ Type
Candidate Name SALINAS, ANDREA, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: OR District: 06	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. Andrea Salinas For Oregon		Date of Disbursement MM / DD / YYYY 03 / 25 / 2024
Mailing Address PO Box 230985		FEC Identification Number C C00793703 Transaction ID : 500661120 Amount of Each Disbursement this Period 800.00
City Tigard	State OR	
Zip Code 97281-0985	Purpose of Disbursement Political Contribution	Category/ Type
Candidate Name SALINAS, ANDREA, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: OR District: 06	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. Andrea Salinas For Oregon		Date of Disbursement MM / DD / YYYY 03 / 25 / 2024
Mailing Address PO Box 230985		FEC Identification Number C C00793703 Transaction ID : 500661136 Amount of Each Disbursement this Period 200.00
City Tigard	State OR	
Zip Code 97281-0985	Purpose of Disbursement Political Contribution	Category/ Type
Candidate Name SALINAS, ANDREA, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2024 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: OR District: 06	<input type="checkbox"/> Memo Item

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

3500.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Good Friends PAC

Full Name (Last, First, Middle Initial) A. Angie Craig For Congress		Date of Disbursement MM / DD / YYYY 03 / 29 / 2024
Mailing Address PO Box 22116		FEC Identification Number C C00575209 Transaction ID : 500661128 Amount of Each Disbursement this Period 1000.00
City Eagan	State MN	
Zip Code 55122-0116	Purpose of Disbursement Political Contribution	Category/ Type
Candidate Name CRAIG, ANGELA DAWN, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: MN District: 02	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. Caraveo For Congress		Date of Disbursement MM / DD / YYYY 03 / 29 / 2024
Mailing Address PO Box 953		FEC Identification Number C C00787788 Transaction ID : 500661121 Amount of Each Disbursement this Period 1000.00
City Eastlake	State CO	
Zip Code 80614-0953	Purpose of Disbursement Political Contribution	Category/ Type
Candidate Name CARAVEO, YADIRA, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: CO District: 08	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. CHRISTINA BOHANNAN FOR CONGRESS		Date of Disbursement MM / DD / YYYY 03 / 25 / 2024
Mailing Address PO Box 722		FEC Identification Number C C00787820 Transaction ID : 500661125 Amount of Each Disbursement this Period 1000.00
City Iowa City	State IA	
Zip Code 52244-0722	Purpose of Disbursement Political Contribution	Category/ Type
Candidate Name BOHANNAN, CHRISTINA, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: IA District: 01	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	3000.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Good Friends PAC

Full Name (Last, First, Middle Initial) A. Janelle Bynum For Congress		Date of Disbursement MM / DD / YYYY 02 / 21 / 2024
Mailing Address 10121 SE Sunnyside Rd Ste 300		FEC Identification Number C C00843425 Transaction ID : 500661122
City Clackamas	State OR	Zip Code 97015-5713
Purpose of Disbursement Political Contribution		Amount of Each Disbursement this Period 800.00
Candidate Name Bynum, Janelle, , ,		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OR	District: 05	

Full Name (Last, First, Middle Initial) B. Janelle Bynum For Congress		Date of Disbursement MM / DD / YYYY 02 / 21 / 2024
Mailing Address 10121 SE Sunnyside Rd Ste 300		FEC Identification Number C C00843425 Transaction ID : 500661135
City Clackamas	State OR	Zip Code 97015-5713
Purpose of Disbursement Political Contribution		Amount of Each Disbursement this Period 1700.00
Candidate Name Bynum, Janelle, , ,		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OR	District: 05	

Full Name (Last, First, Middle Initial) C. KAPTUR FOR CONGRESS		Date of Disbursement MM / DD / YYYY 03 / 25 / 2024
Mailing Address 545 E Town St		FEC Identification Number C C00154625 Transaction ID : 500661129
City Columbus	State OH	Zip Code 43215-4801
Purpose of Disbursement Political Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name KAPTUR, MARCY, M.C., ,		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH	District: 09	

SUBTOTAL of Disbursements This Page (optional).....▶	3500.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Good Friends PAC

Full Name (Last, First, Middle Initial)

A. SCHOLTEN FOR CONGRESS

Mailing Address PO Box 6233

City
Grand Rapids

State
MI

Zip Code
49516-6233

Purpose of Disbursement

Political Contribution

Candidate Name

SCHOLTEN, HILLARY, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2024
 Primary General
 Other (specify) ▼

State: MI District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	9		2	0	2	4

FEC Identification Number

C C00711317

Transaction ID : 500661132

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Memo Item

Full Name (Last, First, Middle Initial)

B. SUSAN WILD FOR CONGRESS

Mailing Address 1636 N Cedar Crest Blvd
183

City
Allentown

State
PA

Zip Code
18104-2318

Purpose of Disbursement

Political Contribution

Candidate Name

WILD, SUSAN, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2024
 Primary General
 Other (specify)

State: PA District: 07

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	8		2	0	2	4

FEC Identification Number

C C00658567

Transaction ID : 500662620

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Memo Item

Full Name (Last, First, Middle Initial)

C. SUSIE LEE FOR CONGRESS

Mailing Address 5130 S Fort Apache Rd
Ste 215 Pmb 382

City
Las Vegas

State
NV

Zip Code
89148-1732

Purpose of Disbursement

Political Contribution

Candidate Name

LEE, SUSIE, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2024
 Primary General
 Other (specify) ▼

State: NV District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	9		2	0	2	4

FEC Identification Number

C C00655613

Transaction ID : 500662618

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Memo Item

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

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

3	0	0	0	0	0	0	0	0	0

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Good Friends PAC

Full Name (Last, First, Middle Initial)

A. TITUS FOR CONGRESS

Mailing Address PO Box 72454

City
Las Vegas

State
NV

Zip Code
89170-2454

Purpose of Disbursement

Political Contribution

Candidate Name

TITUS, DINA, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2024
 Primary General
 Other (specify) ▼

State: NV District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	9		2	0	2	4

FEC Identification Number

C C00499467

Transaction ID : 500661131

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Val Hoyle For Congress

Mailing Address PO Box 657

City
Springfield

State
OR

Zip Code
97477-0116

Purpose of Disbursement

Political Contribution

Candidate Name

HOYLE, VALERIE, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2024
 Primary General
 Other (specify)

State: OR District: 04

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	1		2	0	2	4

FEC Identification Number

C C00796144

Transaction ID : 500661123

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Val Hoyle For Congress

Mailing Address PO Box 657

City
Springfield

State
OR

Zip Code
97477-0116

Purpose of Disbursement

Political Contribution

Candidate Name

HOYLE, VALERIE, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2024
 Primary General
 Other (specify) ▼

State: OR District: 04

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	5		2	0	2	4

FEC Identification Number

C C00796144

Transaction ID : 500661124

Amount of Each Disbursement this Period

1000.00

Memo Item

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

4500.00

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

17500.00