

**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

C3 PAC

ADDRESS (number and street)

1390 CHAIN BRIDGE RD

SUITE 515

Check if different
than previously
reported. (ACC)

MCLEAN

VA

22101

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00680314

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 / D D / 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 / D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

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

10

15

2020

through

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

11

23

2020

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

OZANUS, WILLIAM, K, ,

Type or Print Name of Treasurer

Signature of Treasurer

OZANUS, WILLIAM, K, ,

[Electronically Filed]

Date

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

12

03

2020

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

C3 PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
10		15		2020

To:

M M	/	D D	/	Y Y Y Y Y
11		23		2020

	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">2020</td></tr></table>	Y	Y	Y	Y	Y	2020						<table><tr><td colspan="5">46004.07</td></tr></table>	46004.07				
Y	Y	Y	Y	Y													
2020																	
46004.07																	
(b) Cash on Hand at Beginning of Reporting Period.....	<table><tr><td colspan="5">52700.20</td></tr></table>	52700.20															
52700.20																	
(c) Total Receipts (from Line 19)	<table><tr><td colspan="5">84451.00</td></tr></table>	84451.00					<table><tr><td colspan="5">384636.78</td></tr></table>	384636.78									
84451.00																	
384636.78																	
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table><tr><td colspan="5">137151.20</td></tr></table>	137151.20					<table><tr><td colspan="5">430640.85</td></tr></table>	430640.85									
137151.20																	
430640.85																	
7. Total Disbursements (from Line 31).....	<table><tr><td colspan="5">69356.62</td></tr></table>	69356.62					<table><tr><td colspan="5">362846.27</td></tr></table>	362846.27									
69356.62																	
362846.27																	
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table><tr><td colspan="5">67794.58</td></tr></table>	67794.58					<table><tr><td colspan="5">67794.58</td></tr></table>	67794.58									
67794.58																	
67794.58																	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
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

C3 PAC

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	2	0

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	3		2	0	2	0

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).....	72738.20	151467.06
(ii) Unitemized	11712.80	233169.72
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	84451.00	384636.78
(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)	84451.00	384636.78
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))	84451.00	384636.78
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	84451.00	384636.78

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	27019.42	319531.67
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	27019.42	319531.67
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)	42337.20	42337.20
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	977.40
(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	977.40
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)) ..	69356.62	362846.27
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	69356.62	362846.27

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)	84451.00	384636.78
34. Total Contribution Refunds (from Line 28(d))	0.00	977.40
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	84451.00	383659.38
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	27019.42	319531.67
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	27019.42	319531.67

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

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

FOR LINE NUMBER: PAGE 6 OF 199

(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)

C3 PAC

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

A. ABBOTTPORTER, MARIE, , ,

Mailing Address 19708 US 71

City

LONG PRAIRIE

State

MN

Zip Code

56347

FEC 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 ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 20 / 2020

Transaction ID : SA11AI.33735

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

B. ABBOTTPORTER, MARIE, , ,

Mailing Address 19708 US 71

City

LONG PRAIRIE

State

MN

Zip Code

56347

FEC 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 ▼

235.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 20 / 2020

Transaction ID : SA11AI.34748

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

C. ACOSTA, RAUL, , ,

Mailing Address 6814 NEW MELONES CIRCLE

City

DISCOVERY BAY

State

CA

Zip Code

94505

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

USPS

Occupation (for Individual)

POSTMASTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

405.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 25 / 2020

Transaction ID : SA11AI.33817

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

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

75.00

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 7 OF 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. ADLER, CLAUDETTE, , ,

Mailing Address 5431 70TH CIRCLE N

City
MINNEAPOLIS

State
MN

Zip Code
55429

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HOLADAY CIRCUITS

Occupation (for Individual)
LAYER PROCESSOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 29 / 2020

Transaction ID : SA11AI.33964

Amount of Each Receipt this Period

20.20

☐ Memo Item
CONTRIBUTION

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

B. AGUILAR, RAYMOND, , ,

Mailing Address 6807 BAILEY

City
TAYLOR

State
MI

Zip Code
48180

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ITC HOLDINGS, INC.

Occupation (for Individual)
CONTROLLER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 07 / 2020

Transaction ID : SA11AI.34178

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. AKERSON, TED, , ,

Mailing Address 2 ROSE LANE, PO BOX 935

City
BOLTON LANDING

State
NY

Zip Code
12814

FEC 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 ▼

242.40

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 24 / 2020

Transaction ID : SA11AI.33665

Amount of Each Receipt this Period

20.20

☐ Memo Item
CONTRIBUTION

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

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

65.40

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)

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. ALLBERT, KAREN, , ,

Mailing Address 8222 WOODVIEW AVE

City
JOLIET

State
IL

Zip Code
60431

FEC 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 ▼

222.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 04 / 2020

Transaction ID : SA11AI.34201

Amount of Each Receipt this Period

20.20

☐ Memo Item
CONTRIBUTION

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

B. ALLEN, HOWARD, , ,

Mailing Address 1112 73RD SE

City

LAKE STEVENS

State

WA

Zip Code

98258

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BOEING

Occupation (for Individual)
SEALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 28 / 2020

Transaction ID : SA11AI.34055

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. ALMON, JEANETTE, , ,

Mailing Address 5025 WOODMEADOW DR

City

FORT WORTH

State

TX

Zip Code

76135

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
LPCS (LIC PROF COUNSELOR)

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
10 / 28 / 2020

Transaction ID : SA11AI.33995

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

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

145.20

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. ANASTASI, THOMPSON, , ,

Mailing Address 19 RAVEN COURT

City
NORTH TONAWANDA

State
NY

Zip Code
14120

FEC 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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 15 / 2020

Transaction ID : SA11AI.34368

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

B. ANDERSON, GERALD, , ,

Mailing Address 29630 SHOREVIEW CIRCLE

City
LINDSTROM

State
MN

Zip Code
55045

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
METCALF MAYFLOWER

Occupation (for Individual)
TRUCK DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 10 / 2020

Transaction ID : SA11AI.34189

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. ANDERSON, JAN, , ,

Mailing Address 21407 WILLOW GLADE DRIVE

City
KATY

State
TX

Zip Code
77450

FEC 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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 19 / 2020

Transaction ID : SA11AI.33538

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

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

70.00

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

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. ANDERSON, JAN, , ,

Mailing Address 21407 WILLOW GLADE DRIVE

City
KATY

State
TX

Zip Code
77450

FEC 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 ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 19 / 2020

Transaction ID : SA11AI.34786

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

B. ANDERSON, LEONARD, , ,

Mailing Address 18 DOLCE LUNA COURT

City

HENDERSON

State

NV

Zip Code

89011

FEC 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 ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 30 / 2020

Transaction ID : SA11AI.34019

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

C. ANNANDERS, DAVID, , ,

Mailing Address 3716 SO. OLIE AVE

City

OKLAHOMA CITY

State

OK

Zip Code

73109

FEC 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 ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 01 / 2020

Transaction ID : SA11AI.33988

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

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

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

155.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. ANNUNZIATA, JEFFREY, , ,

Mailing Address 2905 EAST 27TH ST

City
ERIE

State
PA

Zip Code
16510

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ERIE, PA

Occupation (for Individual)
POLICE OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 16 / 2020

Transaction ID : SA11AI.33399

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

B. ANNUNZIATA, JEFFREY, , ,

Mailing Address 2905 EAST 27TH ST

City
ERIE

State
PA

Zip Code
16510

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ERIE, PA

Occupation (for Individual)
POLICE OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 21 / 2020

Transaction ID : SA11AI.34681

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. AQUILINO, LORI, , ,

Mailing Address 7720 NORTHEAST HIGHWAY 99

City
VANCOUVER

State
WA

Zip Code
98665

FEC 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 ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 15 / 2020

Transaction ID : SA11AI.33631

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

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

70.00

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

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

FOR LINE NUMBER: PAGE 12 OF 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. AQUILINO, LORI, , ,

Mailing Address 7720 NORTHEAST HIGHWAY 99

City
VANCOUVERState
WAZip Code
98665FEC 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 ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 15 / 2020

Transaction ID : SA11AI.34657

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

B. ARDOLINA, XIOMARA, , ,

Mailing Address 23333 4 CHIMNEYS LANE

City
MIDDLEBURGState
VAZip Code
20117FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NOT EMPLOYDOccupation (for Individual)
WAS A RESTAURANT OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 16 / 2020

Transaction ID : SA11AI.33408

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. ARDOLINA, XIOMARA, , ,

Mailing Address 23333 4 CHIMNEYS LANE

City
MIDDLEBURGState
VAZip Code
20117FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NOT EMPLOYDOccupation (for Individual)
WAS A RESTAURANT OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

486.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 16 / 2020

Transaction ID : SA11AI.34383

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

70.00

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 13 OF 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. ARO, DOMINIC, , ,

Mailing Address 61 THE KNOLLS

City
WARWICKState
NYZip Code
10990FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HORIZON MEDICALOccupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 16 / 2020

Transaction ID : SA11AI.33388

Amount of Each Receipt this Period

20.00

☐ Memo Item
 CONTRIBUTION

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

B. ARO, DOMINIC, , ,

Mailing Address 61 THE KNOLLS

City
WARWICKState
NYZip Code
10990FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HORIZON MEDICALOccupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 / 16 / 2020

Transaction ID : SA11AI.34363

Amount of Each Receipt this Period

20.00

☐ Memo Item
 CONTRIBUTION

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

C. AUGUSTIN, JENNY, , ,

Mailing Address 300 BERKSHIRE DRIVE

City
BELTONState
MOZip Code
64012FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TUTERA GROUPOccupation (for Individual)
SR EXEC ASST TO CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 / 07 / 2020

Transaction ID : SA11AI.34209

Amount of Each Receipt this Period

30.00

☐ Memo Item
 CONTRIBUTION

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

70.00

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 14 OF 199

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. BAECHLE, TYLER, , ,

Mailing Address 2413 VIRGINIA COURT

City
ARNOLD

State
MO

Zip Code
63010

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

FOX C-6

Occupation (for Individual)

SUBSTITUTE TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 04 / 2020

Transaction ID : SA11AI.34207

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

B. BALDWIN, PAMELA, , ,

Mailing Address 119 12TH ST

City
DEL MAR

State
CA

Zip Code
92017

FEC 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 ▼

405.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 26 / 2020

Transaction ID : SA11AI.33808

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

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

C. BALTHASAR, SUSAN, , ,

Mailing Address 19636 GULF BLVD.

City
INDIAN SHORES

State
FL

Zip Code
33785

FEC 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 ▼

660.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 13 / 2020

Transaction ID : SA11AI.34431

Amount of Each Receipt this Period

60.00

☐ Memo Item
CONTRIBUTION

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

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

130.00

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

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

FOR LINE NUMBER: PAGE 15 OF 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. BANGERT, LOUIS, , ,

Mailing Address 29867 N. DESERT ANGEL

City

SAN TAN VALLEY

State

AZ

Zip Code

85143

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RAY3

Occupation (for Individual)

PRINCIPAL SW ENGINEER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 09 / 2020

Transaction ID : SA11AI.34274

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

B. BARBER, GAYLE, , ,

Mailing Address 7668 GRANITE HALL AVENUE

City

RICHMOND

State

VA

Zip Code

23225

FEC 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 ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 14 / 2020

Transaction ID : SA11AI.34395

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

C. BARBER, STEVEN, , ,

Mailing Address 1581 S. HAZEL CT.

City

DENVER

State

CO

Zip Code

80219

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RAILS PLUS INC.

Occupation (for Individual)

CARPENTER

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 19 / 2020

Transaction ID : SA11AI.33547

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

100.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. BARBER, STEVEN, , ,

Mailing Address 1581 S. HAZEL CT.

City
DENVER

State
CO

Zip Code
80219

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RAILS PLUS INC.

Occupation (for Individual)
CARPENTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 19 / 2020

Transaction ID : SA11AI.34803

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

B. BARKLEY, MARYBETH, , ,

Mailing Address 555CARTER125

City
FREMONT

State
MO

Zip Code
63941

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE++

Occupation (for Individual)
DISABLED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 21 / 2020

Transaction ID : SA11AI.33744

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

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

C. BARKLEY, MARYBETH, , ,

Mailing Address 555CARTER125

City
FREMONT

State
MO

Zip Code
63941

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE++

Occupation (for Individual)
DISABLED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 22 / 2020

Transaction ID : SA11AI.33743

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

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

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

40.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 17 OF 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. BARKLEY, MARYBETH, , ,

Mailing Address 555CARTER125

City
FREMONT

State
MO

Zip Code
63941

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE++

Occupation (for Individual)

DISABLED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 26 / 2020

Transaction ID : SA11AI.33742

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

B. BARKLEY, MARYBETH, , ,

Mailing Address 555CARTER125

City
FREMONT

State
MO

Zip Code
63941

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE++

Occupation (for Individual)

DISABLED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 09 / 2020

Transaction ID : SA11AI.34208

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

C. BARKLEY, MARYBETH, , ,

Mailing Address 555CARTER125

City
FREMONT

State
MO

Zip Code
63941

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE++

Occupation (for Individual)

DISABLED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 15 / 2020

Transaction ID : SA11AI.34500

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

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

45.00

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

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

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(check only one)

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. BARKLEY, MARYBETH, , ,

Mailing Address 555CARTER125

City
FREMONT

State
MO

Zip Code
63941

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE++

Occupation (for Individual)

DISABLED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 21 / 2020

Transaction ID : SA11AI.34759

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

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

B. BARKLEY, MARYBETH, , ,

Mailing Address 555CARTER125

City
FREMONT

State
MO

Zip Code
63941

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE++

Occupation (for Individual)

DISABLED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 22 / 2020

Transaction ID : SA11AI.34758

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

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

C. BATCHELDER, WILLIAM, , ,

Mailing Address 5056 BRITTON RIDGE LANE

City
FORT WORTH

State
TX

Zip Code
76179

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

CAREFLITE

Occupation (for Individual)

HELICOPTER MECHANIC

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 19 / 2020

Transaction ID : SA11AI.33529

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

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

40.00

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

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

FOR LINE NUMBER: PAGE 19 OF 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. BATCHELDER, WILLIAM, , ,

Mailing Address 5056 BRITTON RIDGE LANE

City
FORT WORTH

State
TX

Zip Code
76179

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CAREFLITE

Occupation (for Individual)
HELICOPTER MECHANIC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 19 / 2020

Transaction ID : SA11AI.34777

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

B. BECHTOL, DAVID, , ,

Mailing Address 16851 HOPE ROAD

City
CANYON

State
TX

Zip Code
79015

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DAVID BECHTOL

Occupation (for Individual)
DVM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 18 / 2020

Transaction ID : SA11AI.33542

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. BECHTOL, DAVID, , ,

Mailing Address 16851 HOPE ROAD

City
CANYON

State
TX

Zip Code
79015

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DAVID BECHTOL

Occupation (for Individual)
DVM

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 18 / 2020

Transaction ID : SA11AI.34796

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

75.00

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:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. BENNETT, PAMELA, , ,

Mailing Address 405SOUTHAVE POBOX51, 18

City
ELIDA

State
NM

Zip Code
88116

FEC 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 ▼

297.00

Date of Receipt

11 / 10 / 2020

Transaction ID : SA11AI.34599

Amount of Each Receipt this Period

27.00

☐ Memo Item
CONTRIBUTION

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

B. BERRY, PATRICIA, , ,

Mailing Address 11327 SAVANNAH DRIVE

City

FREDERICKSBURG

State

VA

Zip Code

22407

FEC 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 ▼

255.00

Date of Receipt

10 / 21 / 2020

Transaction ID : SA11AI.33685

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

C. BERRY, PATRICIA, , ,

Mailing Address 11327 SAVANNAH DRIVE

City

FREDERICKSBURG

State

VA

Zip Code

22407

FEC 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 ▼

270.00

Date of Receipt

10 / 29 / 2020

Transaction ID : SA11AI.33897

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

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

57.00

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

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. BERRY, PATRICIA, , ,

Mailing Address 11327 SAVANNAH DRIVE

City
FREDERICKSBURG

State
VA

Zip Code
22407

FEC 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 ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 21 / 2020

Transaction ID : SA11AI.34696

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

B. BIGGS, KATHY, , ,

Mailing Address P. O. BOX 757

City
WAILUKU

State
HI

Zip Code
96793

FEC 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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 19 / 2020

Transaction ID : SA11AI.33622

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. BIGGS, KATHY, , ,

Mailing Address P. O. BOX 757

City
WAILUKU

State
HI

Zip Code
96793

FEC 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 ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 19 / 2020

Transaction ID : SA11AI.34852

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

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

65.00

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

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. BLAKEMAN, SANDRA, , ,

Mailing Address 535 SOUTH LAKES END DRIVE

City
FORT PIERCE

State
FL

Zip Code
34982

FEC 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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 05 / 2020

Transaction ID : SA11AI.34152

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

B. BLOUNT, KEVIN, , ,

Mailing Address 5553 WETLANDS DR

City
FREDERICK

State
CO

Zip Code
80504

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CAROUSEL INDUSTRIES

Occupation (for Individual)
DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 01 / 2020

Transaction ID : SA11AI.34007

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

C. BONO, RICHARD, , ,

Mailing Address 12801 SAGAMORE RD

City
LEAWOOD

State
KS

Zip Code
66209

FEC 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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 18 / 2020

Transaction ID : SA11AI.33505

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

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

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

100.00

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

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. BONO, RICHARD, , ,

Mailing Address 12801 SAGAMORE RD

City
LEAWOOD

State
KS

Zip Code
66209

FEC 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 ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 18 / 2020

Transaction ID : SA11AI.34763

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

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

B. BONYADI, DONNA, , ,

Mailing Address 2856 W. LINCOLN AVENUE, APT A4

City
ANAHEIM

State
CA

Zip Code
92801

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HYUNDAI MITOR AMERICA

Occupation (for Individual)
SALES TRAINING ASSOCIATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 28 / 2020

Transaction ID : SA11AI.34040

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

C. BONYADI, DONNA, , ,

Mailing Address 2856 W. LINCOLN AVENUE, APT A4

City
ANAHEIM

State
CA

Zip Code
92801

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HYUNDAI MITOR AMERICA

Occupation (for Individual)
SALES TRAINING ASSOCIATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 01 / 2020

Transaction ID : SA11AI.34039

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

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

70.00

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

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. BOSCH, EILEEN, , ,

Mailing Address 14241 WOODEN WAY

City
SARATOGA

State
CA

Zip Code
95070

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COMPASS

Occupation (for Individual)
REALTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 29 / 2020

Transaction ID : SA11AI.34045

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

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

B. BRENNAN, JOSEPHINE, , ,

Mailing Address 6654 PETIT AVENUE

City
LOS ANGELES

State
CA

Zip Code
91406

FEC 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 ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 15 / 2020

Transaction ID : SA11AI.33591

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

C. BRENNAN, JOSEPHINE, , ,

Mailing Address 6654 PETIT AVENUE

City
LOS ANGELES

State
CA

Zip Code
91406

FEC 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 ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 15 / 2020

Transaction ID : SA11AI.34612

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

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

75.00

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

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. BROUHARD, JEANINE, , ,

Mailing Address 9247 SEPULVEDA BOULEVARD

22

City

NORTH HILLS

State

CA

Zip Code

91343

FEC 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 ▼

725.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 16 / 2020

Transaction ID : SA11AI.33590

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

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

B. BROUHARD, JEANINE, , ,

Mailing Address 9247 SEPULVEDA BOULEVARD

22

City

NORTH HILLS

State

CA

Zip Code

91343

FEC 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 ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 17 / 2020

Transaction ID : SA11AI.33589

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. BROUHARD, JEANINE, , ,

Mailing Address 9247 SEPULVEDA BOULEVARD

22

City

NORTH HILLS

State

CA

Zip Code

91343

FEC 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 ▼

770.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 28 / 2020

Transaction ID : SA11AI.34031

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

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

50.00

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

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. BROUHARD, JEANINE, , ,

Mailing Address 9247 SEPULVEDA BOULEVARD

22

City

NORTH HILLS

State

CA

Zip Code

91343

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

778.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 30 / 2020

Transaction ID : SA11AI.34029

Amount of Each Receipt this Period

8.00

☐ Memo Item
CONTRIBUTION

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

B. BROUHARD, JEANINE, , ,

Mailing Address 9247 SEPULVEDA BOULEVARD

22

City

NORTH HILLS

State

CA

Zip Code

91343

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 30 / 2020

Transaction ID : SA11AI.34030

Amount of Each Receipt this Period

2.00

☐ Memo Item
CONTRIBUTION

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

C. BROUHARD, JEANINE, , ,

Mailing Address 9247 SEPULVEDA BOULEVARD

22

City

NORTH HILLS

State

CA

Zip Code

91343

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

810.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 06 / 2020

Transaction ID : SA11AI.34294

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

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

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

40.00

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

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. BROUHARD, JEANINE, , ,

Mailing Address 9247 SEPULVEDA BOULEVARD

22

City

NORTH HILLS

State

CA

Zip Code

91343

FEC 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 ▼

815.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 16 / 2020

Transaction ID : SA11AI.34610

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

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

B. BROUHARD, JEANINE, , ,

Mailing Address 9247 SEPULVEDA BOULEVARD

22

City

NORTH HILLS

State

CA

Zip Code

91343

FEC 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 ▼

840.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 17 / 2020

Transaction ID : SA11AI.34829

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. BROUKHIM, BIJAN, , ,

Mailing Address 1521 LEXINGTON RD

City

BEVERLY HILLS

State

CA

Zip Code

90210

FEC 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 ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 09 / 2020

Transaction ID : SA11AI.34287

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

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130.00

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

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. BROWN, DENNIS, , ,

Mailing Address 140 W COTTONWOOD ST,

City
AMARILLO

State
TX

Zip Code
79108

FEC 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 ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 07 / 2020

Transaction ID : SA11AI.34251

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

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

B. BROWN, MARGARET, , ,

Mailing Address 305 ALDINE ST.

City
ROCHESTER

State
NY

Zip Code
14619

FEC 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 ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 16 / 2020

Transaction ID : SA11AI.34370

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

C. BROWNING, ELEANOR, , ,

Mailing Address 7306 NORTHWEST 44TH LANE

City
OCALA

State
FL

Zip Code
34482

FEC 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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 15 / 2020

Transaction ID : SA11AI.33459

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

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

65.00

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

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. BROWNING, ELEANOR, , ,

Mailing Address 7306 NORTHWEST 44TH LANE

City
OCALA

State
FL

Zip Code
34482

FEC 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 ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 15 / 2020

Transaction ID : SA11AI.34437

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

B. BRYANT, CONNIE, , ,

Mailing Address 145 BLACKHAWK LSNE

City

SEDONSEDONSA

State
AZ

Zip Code
86336

FEC 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 Y
11 / 01 / 2020

Transaction ID : SA11AI.34015

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

C. BUCHMANN, JOAN, , ,

Mailing Address 615 SO CHURCH ST APT212

City

ST. PETERS

State
MO

Zip Code
63376

FEC 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 ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 31 / 2020

Transaction ID : SA11AI.33972

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

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

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80.00

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

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. BUCHMANN, JOAN, , ,

Mailing Address 615 SO CHURCH ST APT212

City
ST. PETERS

State
MO

Zip Code
63376

FEC 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 ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 21 / 2020

Transaction ID : SA11AI.34756

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

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

B. BURNS, JOHN, , ,

Mailing Address 3615 OAK CREEK PLACE

City
WEST DES MOINES

State
IA

Zip Code
50265

FEC 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 ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 28 / 2020

Transaction ID : SA11AI.33960

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. BUSH, JAMES, , ,

Mailing Address 1519 REBEL DR

City
JACKSONVILLE

State
AR

Zip Code
72076

FEC 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 ▼

377.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 30 / 2020

Transaction ID : SA11AI.33985

Amount of Each Receipt this Period

20.20

☐ Memo Item
CONTRIBUTION

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

55.20

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

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(check only one)

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. BYELICK, STEPHEN, , ,

Mailing Address 864 BASSWOOD LANE

City
EAGAN

State
MN

Zip Code
55123

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ALLIANCE BANK

Occupation (for Individual)
CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

545.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 30 / 2020

Transaction ID : SA11AI.33962

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

B. BYELICK, STEPHEN, , ,

Mailing Address 864 BASSWOOD LANE

City
EAGAN

State
MN

Zip Code
55123

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ALLIANCE BANK

Occupation (for Individual)
CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 08 / 2020

Transaction ID : SA11AI.34190

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. CALES, NANCY, , ,

Mailing Address PO BOX 502

City
GLEN SAINT MARY

State
FL

Zip Code
32040

FEC 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 ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 12 / 2020

Transaction ID : SA11AI.34416

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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 32 OF 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. CALLAHAN, LOWELL, , ,

Mailing Address 3668 SPENCEVILLE ROAD

City
WHEATLAND

State
CA

Zip Code
95692

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
HVAC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 19 / 2020

Transaction ID : SA11AI.33620

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

B. CALLAHAN, LOWELL, , ,

Mailing Address 3668 SPENCEVILLE ROAD

City
WHEATLAND

State
CA

Zip Code
95692

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
HVAC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 19 / 2020

Transaction ID : SA11AI.34851

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. CAPERTON, JOHN, , ,

Mailing Address 1429 77TH ST

City
DARIEN

State
IL

Zip Code
60561

FEC 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 ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 19 / 2020

Transaction ID : SA11AI.33498

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

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

75.00

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

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. CAPERTON, JOHN, , ,

Mailing Address 1429 77TH ST

City
DARIEN

State
IL

Zip Code
60561

FEC 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 ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 19 / 2020

Transaction ID : SA11AI.34753

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

B. CARBAUGH, KARI, , ,

Mailing Address 311 TRITLE AVE

City
WAYNESBORO

State
PA

Zip Code
17268

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
VISITING ANGELS

Occupation (for Individual)
CAREGIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 19 / 2020

Transaction ID : SA11AI.33400

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. CARBAUGH, KARI, , ,

Mailing Address 311 TRITLE AVE

City
WAYNESBORO

State
PA

Zip Code
17268

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
VISITING ANGELS

Occupation (for Individual)
CAREGIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 19 / 2020

Transaction ID : SA11AI.34682

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

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

75.00

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

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for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. CARMICHAEL, STEPHANIE, , ,

Mailing Address 63215 CIMARRON DR

City
BENDState
ORZip Code
97701FEC 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 ▼

535.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 28 / 2020

Transaction ID : SA11AI.34053

Amount of Each Receipt this Period

15.00

☐ Memo Item
 CONTRIBUTION

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

B. CARMICHAEL, STEPHANIE, , ,

Mailing Address 63215 CIMARRON DR

City
BENDState
ORZip Code
97701FEC 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 ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 28 / 2020

Transaction ID : SA11AI.34054

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

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

C. CARTET, LOWELL, , ,

Mailing Address 2 SWALLOW FIELD

City
CINCINNATIState
OHZip Code
45174FEC 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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 16 / 2020

Transaction ID : SA11AI.33474

Amount of Each Receipt this Period

30.00

☐ Memo Item
 CONTRIBUTION

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

95.00

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

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

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. CARTET, LOWELL, , ,

Mailing Address 2 SWALLOW FIELD

City
CINCINNATI

State
OH

Zip Code
45174

FEC 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 ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 16 / 2020

Transaction ID : SA11AI.34463

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

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

B. CASSIDY, AL, , ,

Mailing Address 2954 PLANTATION ROAD

City
WINTER HAVEN

State
FL

Zip Code
33884

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED

Occupation (for Individual)
REAL ESTATE DEVELOPMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 10 / 2020

Transaction ID : SA11AI.34147

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

C. CENAC, NANCY, , ,

Mailing Address 11765 N ROBI PL

City
ORO VALLEY

State
AZ

Zip Code
85737

FEC 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 ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 06 / 2020

Transaction ID : SA11AI.34278

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

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

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

160.00

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. CHAMPAGNE, SALLY, , ,

Mailing Address 1903 FERRY CIRCLE

City
FOLSOM

State
CA

Zip Code
95630

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INTEL CORP

Occupation (for Individual)
BUSINESS ARCHITECT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 28 / 2020

Transaction ID : SA11AI.34050

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

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

B. CHANGSHIMAURA, LINDA, , ,

Mailing Address 802 PROSPECT STREET

City
HONOLULU

State
HI

Zip Code
96813

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DESIGN EIGHT LLC

Occupation (for Individual)
ARCHITECT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

267.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 24 / 2020

Transaction ID : SA11AI.33825

Amount of Each Receipt this Period

27.00

☐ Memo Item
CONTRIBUTION

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

C. CHANGSHIMAURA, LINDA, , ,

Mailing Address 802 PROSPECT STREET

City
HONOLULU

State
HI

Zip Code
96813

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DESIGN EIGHT LLC

Occupation (for Individual)
ARCHITECT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 24 / 2020

Transaction ID : SA11AI.33826

Amount of Each Receipt this Period

3.00

☐ Memo Item
CONTRIBUTION

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

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

60.00

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

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(check only one)

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. CHANGSHIMAURA, LINDA, , ,

Mailing Address 802 PROSPECT STREET

City
HONOLULU

State
HI

Zip Code
96813

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DESIGN EIGHT LLC

Occupation (for Individual)
ARCHITECT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.00

Date of Receipt

11 / 23 / 2020

Transaction ID : SA11AI.34853

Amount of Each Receipt this Period

27.00

☐ Memo Item
CONTRIBUTION

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

B. CHANGSHIMAURA, LINDA, , ,

Mailing Address 802 PROSPECT STREET

City
HONOLULU

State
HI

Zip Code
96813

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DESIGN EIGHT LLC

Occupation (for Individual)
ARCHITECT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

11 / 23 / 2020

Transaction ID : SA11AI.34854

Amount of Each Receipt this Period

3.00

☐ Memo Item
CONTRIBUTION

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

C. CHEATHAM, NANCY M, , ,

Mailing Address 811 WEST GRAY STREET

City
HOUSTON

State
TX

Zip Code
77019

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COMMAND VENTURES INC

Occupation (for Individual)
CONTROLLER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

10 / 21 / 2020

Transaction ID : SA11AI.33761

Amount of Each Receipt this Period

110.00

☐ Memo Item
CONTRIBUTION

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

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

140.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. CHEATHAM, NANCY M, , ,

Mailing Address 811 WEST GRAY STREET

City
HOUSTON

State
TX

Zip Code
77019

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COMMAND VENTURES INC

Occupation (for Individual)
CONTROLLER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 24 / 2020

Transaction ID : SA11AI.33760

Amount of Each Receipt this Period

120.00

☐ Memo Item
CONTRIBUTION

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

B. CHEATHAM, NANCY M, , ,

Mailing Address 811 WEST GRAY STREET

City
HOUSTON

State
TX

Zip Code
77019

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COMMAND VENTURES INC

Occupation (for Individual)
CONTROLLER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 21 / 2020

Transaction ID : SA11AI.34780

Amount of Each Receipt this Period

110.00

☐ Memo Item
CONTRIBUTION

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

C. CHMIELOWIEC, KEN, , ,

Mailing Address 1472 SE 15 STREET

City
FORT LAUDERDALE

State
FL

Zip Code
33316

FEC 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 ▼

222.20

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2020

Transaction ID : SA11AI.34145

Amount of Each Receipt this Period

20.20

☐ Memo Item
CONTRIBUTION

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

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

250.20

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. CHRISTENSEN, CAREN, , ,

Mailing Address 2330 TURNBERRY CT

City
BELOITState
WIZip Code
53511FEC 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 ▼

255.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 16 / 2020

Transaction ID : SA11AI.33487

Amount of Each Receipt this Period

10.00

☐ Memo Item
 CONTRIBUTION

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

B. CHRISTENSEN, CAREN, , ,

Mailing Address 2330 TURNBERRY CT

City
BELOITState
WIZip Code
53511FEC 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 ▼

265.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 11 / 16 / 2020

Transaction ID : SA11AI.34482

Amount of Each Receipt this Period

10.00

☐ Memo Item
 CONTRIBUTION

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

C. CLARK, DON, , ,

Mailing Address 2225 OAK HILL DR.

City
GREENSBOROState
NCZip Code
27408FEC 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 ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 15 / 2020

Transaction ID : SA11AI.33422

Amount of Each Receipt this Period

20.00

☐ Memo Item
 CONTRIBUTION

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

40.00

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

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. CLARK, DON, , ,

Mailing Address 2225 OAK HILL DR.

City
GREENSBORO

State
NC

Zip Code
27408

FEC 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 ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 15 / 2020

Transaction ID : SA11AI.34399

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

B. CLARK, KATHY, , ,

Mailing Address 140 WOODSMAN LANE

City
EVERETT

State
PA

Zip Code
15537

FEC 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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 19 / 2020

Transaction ID : SA11AI.33397

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. CLARK, KATHY, , ,

Mailing Address 140 WOODSMAN LANE

City
EVERETT

State
PA

Zip Code
15537

FEC 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 ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 19 / 2020

Transaction ID : SA11AI.34679

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

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

70.00

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

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

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. CLEARY, KIM, , ,

Mailing Address 2621 UNIVERSITY BOULEVARD

City
HOUSTON

State
TX

Zip Code
77005

FEC 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 ▼

405.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 26 / 2020

Transaction ID : SA11AI.33759

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

B. CLEARY, KIM, , ,

Mailing Address 2621 UNIVERSITY BOULEVARD

City
HOUSTON

State
TX

Zip Code
77005

FEC 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 ▼

435.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 10 / 2020

Transaction ID : SA11AI.34538

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

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

C. CLEVELAND, SUE, , ,

Mailing Address P. O. BOX 8511

City
LUMBERTON

State
TX

Zip Code
77657

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CLEVECO CONSTRUCTION CO.

Occupation (for Individual)
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 08 / 2020

Transaction ID : SA11AI.34240

Amount of Each Receipt this Period

60.00

☐ Memo Item
CONTRIBUTION

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

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

105.00

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

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. COLLINGWOOD, SUMNER, , ,

Mailing Address P. O. BOX 892

City
RINGGOLD

State
GA

Zip Code
30736

FEC 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 ▼

325.00

Date of Receipt

10 / 21 / 2020

Transaction ID : SA11AI.33694

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

B. COLLINGWOOD, SUMNER, , ,

Mailing Address P. O. BOX 892

City
RINGGOLD

State
GA

Zip Code
30736

FEC 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 ▼

350.00

Date of Receipt

11 / 01 / 2020

Transaction ID : SA11AI.33913

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. COLLINGWOOD, SUMNER, , ,

Mailing Address P. O. BOX 892

City
RINGGOLD

State
GA

Zip Code
30736

FEC 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 ▼

365.00

Date of Receipt

11 / 21 / 2020

Transaction ID : SA11AI.34708

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

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

55.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. COMBS, BETTY, , ,

Mailing Address 28013 POST OAK RUN

City
MAGNOLIAState
TXZip Code
77355FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DENTAL OFFICEOccupation (for Individual)
FRONT DESK

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2020

Transaction ID : SA11AI.33999

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

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

B. COOK, BANE, , ,

Mailing Address 1457 FRENCHMAN'S BEND RD

City
MONROEState
LAZip Code
71203FEC 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 ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2020

Transaction ID : SA11AI.34216

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

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

C. COOK, LAURIE, , ,

Mailing Address 50B SMITH CORNER RD.

City
NEWTONState
NHZip Code
03858FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MICROSOFTOccupation (for Individual)
CUSTOMER SUCCESS MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 11 / 15 / 2020

Transaction ID : SA11AI.34355

Amount of Each Receipt this Period

20.00

☐ Memo Item
 CONTRIBUTION

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

95.00

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

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

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for each category of the
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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. COTA, GEOFFREY, , ,

Mailing Address 14 FOREST ST

City
MEDFIELD

State
MA

Zip Code
02052

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
US GOVT

Occupation (for Individual)
DISABLED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 31 / 2020

Transaction ID : SA11AI.33863

Amount of Each Receipt this Period

40.00

☐ Memo Item
CONTRIBUTION

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

B. CRARY, MARK, , ,

Mailing Address W2076 COUNTY ROAD K

City
COLUMBUS

State
WI

Zip Code
53925

FEC 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 ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 09 / 2020

Transaction ID : SA11AI.34186

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

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

C. CRESSMAN, PAUL, , ,

Mailing Address 1287 SPRING VALLEY ROAD

City
BETHLEHEM

State
PA

Zip Code
18015

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED

Occupation (for Individual)
LANDSCAPER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 16 / 2020

Transaction ID : SA11AI.33402

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

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

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

115.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. CRESSMAN, PAUL, , ,

Mailing Address 1287 SPRING VALLEY ROAD

City
BETHLEHEMState
PAZip Code
18015FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYEDOccupation (for Individual)
LANDSCAPER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

615.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 16 / 2020

Transaction ID : SA11AI.34377

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

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

B. CRITES, RODNEY, , ,

Mailing Address 2810 PRATT LAKE ROAD

City
GLADWINState
MIZip Code
48624FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ROBINSON INDOccupation (for Individual)
QCMGR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 30 / 2020

Transaction ID : SA11AI.33956

Amount of Each Receipt this Period

20.20

☐ Memo Item
CONTRIBUTION

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

C. DALIA, ROBERT, , ,

Mailing Address 20602 EMILY ROAD APT36U

City
BAYSIDEState
NYZip Code
11360FEC 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 ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 07 / 2020

Transaction ID : SA11AI.34093

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

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

95.20

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

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

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. DAVIS, JAMES, , ,

Mailing Address 9032 DIXIANA VILLA CIRCLE

City
TAMPA

State
FL

Zip Code
33635

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
CARPENTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 21 / 2020

Transaction ID : SA11AI.33703

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

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

B. DAVIS, JAMES, , ,

Mailing Address 9032 DIXIANA VILLA CIRCLE

City
TAMPA

State
FL

Zip Code
33635

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
CARPENTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 21 / 2020

Transaction ID : SA11AI.34718

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

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

C. DAVIS, OSCAR, , ,

Mailing Address 4200 NORTHSIDE PARKWAY BLDG 10

City
ATLANTA

State
GA

Zip Code
30327

FEC 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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 01 / 2020

Transaction ID : SA11AI.33911

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

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

85.00

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

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. DAY, DEBBIE ANN, , ,

Mailing Address 67 PHEASANT RUN TERRACE

City

MOUNTAIN HOME

State

AR

Zip Code

72653

FEC 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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 19 / 2020

Transaction ID : SA11AI.33513

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

B. DAY, DEBBIE ANN, , ,

Mailing Address 67 PHEASANT RUN TERRACE

City

MOUNTAIN HOME

State

AR

Zip Code

72653

FEC 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 ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 19 / 2020

Transaction ID : SA11AI.34767

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. DEBORD, WILLIAM, , ,

Mailing Address 907 ALLENDALE CT

City

STURGIS

State

MI

Zip Code

49091

FEC 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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 21 / 2020

Transaction ID : SA11AI.33727

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

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

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

80.00

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

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. DEBORD, WILLIAM, , ,

Mailing Address 907 ALLENDALE CT

City
STURGIS

State
MI

Zip Code
49091

FEC 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 ▼

330.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 21 / 2020

Transaction ID : SA11AI.34742

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

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

B. DEFREECE, MICHAEL, , ,

Mailing Address 8903 DOUGLAS CT

City
OMAHA

State
NE

Zip Code
68114

FEC 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 ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 16 / 2020

Transaction ID : SA11AI.33507

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

C. DEFREECE, MICHAEL, , ,

Mailing Address 8903 DOUGLAS CT

City
OMAHA

State
NE

Zip Code
68114

FEC 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 ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 16 / 2020

Transaction ID : SA11AI.34510

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

130.00

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

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

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for each category of the
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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. DIMEO CARROLL, DOLORES, , ,

Mailing Address 5 CLARION STREET

City
CRANSTON

State
RI

Zip Code
02920

FEC 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 ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 31 / 2020

Transaction ID : SA11AI.33866

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

B. DONOHUE, MARTIN, , , JR

Mailing Address 885 WEST 20TH STREET

City
SAN PEDRO

State
CA

Zip Code
90731

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UNEMPLOYED

Occupation (for Individual)
N/A

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 15 / 2020

Transaction ID : SA11AI.33584

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. DUNLAP, THOMAS, , ,

Mailing Address 28822 GREENACRES

City
MISSION VIEJO

State
CA

Zip Code
92692

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 08 / 2020

Transaction ID : SA11AI.34312

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

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

70.00

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

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

FOR LINE NUMBER: PAGE 50 OF 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. DURAN, ARMANDO, , ,

Mailing Address 3405 SINTON ROAD

City
COLORADO SPRINGS

State
CO

Zip Code
80907

FEC 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 ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 07 / 2020

Transaction ID : SA11AI.34263

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

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

B. DURRETT, TRICIA, , ,

Mailing Address 106 CHAPARRAL STREET

City
SAN MARCOS

State
TX

Zip Code
78666

FEC 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 ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 21 / 2020

Transaction ID : SA11AI.33777

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

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

C. DURRETT, TRICIA, , ,

Mailing Address 106 CHAPARRAL STREET

City
SAN MARCOS

State
TX

Zip Code
78666

FEC 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 ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 21 / 2020

Transaction ID : SA11AI.34795

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

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

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

120.00

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

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

FOR LINE NUMBER: PAGE 51 OF 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. DWYER, ROBERT, , ,

Mailing Address 221 SPRING VALLEY AWAY

City
ASTON

State
PA

Zip Code
19014

FEC 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 ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 21 / 2020

Transaction ID : SA11AI.33673

Amount of Each Receipt this Period

60.00

☐ Memo Item
CONTRIBUTION

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

B. DWYER, ROBERT, , ,

Mailing Address 221 SPRING VALLEY AWAY

City
ASTON

State
PA

Zip Code
19014

FEC 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 ▼

705.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 22 / 2020

Transaction ID : SA11AI.33672

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

C. DWYER, ROBERT, , ,

Mailing Address 221 SPRING VALLEY AWAY

City
ASTON

State
PA

Zip Code
19014

FEC 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 ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 22 / 2020

Transaction ID : SA11AI.34684

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

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

90.00

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. EAD, CHRISTINE, , ,

Mailing Address 158 WASHINGTON DRIVE

City
WATCHUNG

State
NJ

Zip Code
07069

FEC 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 ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 08 / 2020

Transaction ID : SA11AI.34075

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

B. EATON, RICHARD, , ,

Mailing Address 1397 FOOTHILLS VILLAGE DRIVE

City
HENDERSON

State
NV

Zip Code
89012

FEC 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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 19 / 2020

Transaction ID : SA11AI.33569

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. EATON, RICHARD, , ,

Mailing Address 1397 FOOTHILLS VILLAGE DRIVE

City
HENDERSON

State
NV

Zip Code
89012

FEC 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 ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 19 / 2020

Transaction ID : SA11AI.34816

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

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

150.00

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

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

FOR LINE NUMBER: PAGE 53 OF 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. EIDSON, JOY, , ,

Mailing Address 2091 TANGLEWOOD LANE

City
DELAND

State
FL

Zip Code
32720

FEC 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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 15 / 2020

Transaction ID : SA11AI.33449

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

B. EIDSON, JOY, , ,

Mailing Address 2091 TANGLEWOOD LANE

City
DELAND

State
FL

Zip Code
32720

FEC 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 ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 15 / 2020

Transaction ID : SA11AI.34422

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

C. EIKENBERRY, MELISSA, , ,

Mailing Address 3024 BLANDWOOD ROAD

City
VALDOSTA

State
GA

Zip Code
31602

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED

Occupation (for Individual)
GYM OWNER/TRAINER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 01 / 2020

Transaction ID : SA11AI.33914

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

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

65.00

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

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

FOR LINE NUMBER: PAGE 54 OF 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. ELIAS, KIMBERLY, , ,

Mailing Address 6164 4TH STREET

City

KING GEORGE

State

VA

Zip Code

22485

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF

Occupation (for Individual)

MENTAL HEALTH THERAPIST

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 28 / 2020

Transaction ID : SA11AI.33898

Amount of Each Receipt this Period

30.00

☐ Memo Item
 CONTRIBUTION

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

B. ENYART, BRIAN, , ,

Mailing Address 9852 ORANGEWOOD DRIVE

City

THORNTON

State

CO

Zip Code

80260

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

UNCLE BRIAN'S HOME IMPROVEMENTS

Occupation (for Individual)

REMODELER

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 29 / 2020

Transaction ID : SA11AI.34006

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

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

C. ESTRADA, NATHALIE, , ,

Mailing Address 1524 ANGELUS AVE.

City

LEMON GROVE

State

CA

Zip Code

91945

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SKIN SURGERY MEDICAL GROUP

Occupation (for Individual)

MEDICAL ASSISTANT

Receipt For:

☐ Primary
☐ Other (specify)

General

Aggregate Year-to-Date ▼

805.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 27 / 2020

Transaction ID : SA11AI.33807

Amount of Each Receipt this Period

15.00

☐ Memo Item
 CONTRIBUTION

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

70.00

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

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. ESTRADA, NATHALIE, , ,

Mailing Address 1524 ANGELUS AVE.

City
LEMON GROVEState
CAZip Code
91945FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SKIN SURGERY MEDICAL GROUPOccupation (for Individual)
MEDICAL ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 08 / 2020

Transaction ID : SA11AI.34298

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

B. ESTRADA, NATHALIE, , ,

Mailing Address 1524 ANGELUS AVE.

City
LEMON GROVEState
CAZip Code
91945FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SKIN SURGERY MEDICAL GROUPOccupation (for Individual)
MEDICAL ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

855.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 14 / 2020

Transaction ID : SA11AI.34617

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. FAUNTLEROY, KATE, , ,

Mailing Address 8046 NORTH PROMONTORY RANCH ROAD

City
PARK CITYState
UTZip Code
84098FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 07 / 2020

Transaction ID : SA11AI.34271

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

150.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 56 OF 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. FIGUEIREDO, JOSE, , ,

Mailing Address 212 DELANCY STREET

City
NEWARK

State
NJ

Zip Code
07105

FEC 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 ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 15 / 2020

Transaction ID : SA11AI.33382

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

B. FIGUEIREDO, JOSE, , ,

Mailing Address 212 DELANCY STREET

City
NEWARK

State
NJ

Zip Code
07105

FEC 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 ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 13 / 2020

Transaction ID : SA11AI.34357

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. FIGUEIREDO, JOSE, , ,

Mailing Address 212 DELANCY STREET

City
NEWARK

State
NJ

Zip Code
07105

FEC 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 ▼

470.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 15 / 2020

Transaction ID : SA11AI.34356

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

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

65.00

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

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

FOR LINE NUMBER: PAGE 57 OF 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. FISH, KELLI, , ,

Mailing Address 275 OAKLEY ROAD

City

MOUNTAIN HOME

State

AR

Zip Code

72653

FEC 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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 12 / 2020

Transaction ID : SA11AI.34517

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

B. FISHER, BRIAN, , ,

Mailing Address 2225 RANDOL MILL, 520

City

ARLINGTON

State

TX

Zip Code

76011

FEC 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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 21 / 2020

Transaction ID : SA11AI.34774

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

C. FISHMAN, PEGGY, , ,

Mailing Address 3793 TAYLORSVILLE RD

City

LOUISVILLE

State

KY

Zip Code

40220

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF

Occupation (for Individual)

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 08 / 2020

Transaction ID : SA11AI.34159

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

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

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

75.00

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

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

FOR LINE NUMBER: PAGE 58 OF 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. FLETCHER, PENNY, , ,

Mailing Address 111 N CANAL ST

City
SPENCERVILLE

State
OH

Zip Code
45887

FEC 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 ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 10 / 2020

Transaction ID : SA11AI.34170

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

B. FLETCHER, THOMAS, , ,

Mailing Address P O BOX 156

City
MATHEWS

State
LA

Zip Code
70375

FEC 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 ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 05 / 2020

Transaction ID : SA11AI.34215

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

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

C. FLORA, LYNDA, , ,

Mailing Address 1487 VIA ROJAS

City
HEMET

State
CA

Zip Code
92545

FEC 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 ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 08 / 2020

Transaction ID : SA11AI.34309

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

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

85.00

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

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

FOR LINE NUMBER: PAGE 59 OF 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. FREDERICK, LANA, , ,

Mailing Address 111 E BAHAMA ST

City
SOUTH PADRE ISLAND

State
TX

Zip Code
78597

FEC 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 ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 12 / 2020

Transaction ID : SA11AI.34550

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

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

B. FREUND, KENNETH, , ,

Mailing Address 23457 EAST EXPOSITION AVENUE

City
AURORA

State
CO

Zip Code
80018

FEC 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 ▼

1100.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 08 / 2020

Transaction ID : SA11AI.34256

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

C. FRITTS, COURTNEY, , ,

Mailing Address 510 GOLFVIEW DRIVE

City
PEACHTREE CITY

State
GA

Zip Code
30269

FEC 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 ▼

330.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 10 / 2020

Transaction ID : SA11AI.34131

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

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

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

630.00

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

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

FOR LINE NUMBER: PAGE 60 OF 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. FULMER, ROBERT, , ,

Mailing Address WELLS DRIVE

City
ORANGEBURG

State
SC

Zip Code
29115

FEC 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 ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 31 / 2020

Transaction ID : SA11AI.33905

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

B. GALLAGHER, CECI, , ,

Mailing Address 913 COACH HOUSE DR

City
TUCKER

State
GA

Zip Code
30084

FEC 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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 16 / 2020

Transaction ID : SA11AI.34405

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

C. GAMBLE, KENNETH, , ,

Mailing Address 175 HUGUENOT STREET

City
NEW ROCHELLE

State
NY

Zip Code
10801

FEC 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 ▼

1320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 07 / 2020

Transaction ID : SA11AI.34087

Amount of Each Receipt this Period

120.00

☐ Memo Item
CONTRIBUTION

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

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

165.00

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

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

FOR LINE NUMBER: PAGE 61 OF 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. GARBER, DESIREE, , ,

Mailing Address 15516 N MEADOWGLEN CT

City

SPOKANE

State

WA

Zip Code

99208

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF

Occupation (for Individual)

BODY SHOP OWNER

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 / 09 / 2020

Transaction ID : SA11AI.34343

Amount of Each Receipt this Period

25.00

☐ Memo Item
 CONTRIBUTION

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

B. GARDNER, NORA, , ,

Mailing Address 6326 ST VALLEY VIEW ST

City

LITTLETON

State

CO

Zip Code

80120

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 / 16 / 2020

Transaction ID : SA11AI.34555

Amount of Each Receipt this Period

20.00

☐ Memo Item
 CONTRIBUTION

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

C. GARNER, BRYAN, , ,

Mailing Address 20 EDGEWATER DRIVE

City

AMARILLO

State

TX

Zip Code

79106

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary
☐ Other (specify)

General

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 / 09 / 2020

Transaction ID : SA11AI.34250

Amount of Each Receipt this Period

30.00

☐ Memo Item
 CONTRIBUTION

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

75.00

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 62 OF 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. GEORGE, JUSTINE, , ,

Mailing Address 501 WEST HUMBLE STREET

City
BAYTOWNState
TXZip Code
77520FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYEDOccupation (for Individual)
HEALTHCARE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

615.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 24 / 2020

Transaction ID : SA11AI.33764

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

B. GEORGE, JUSTINE, , ,

Mailing Address 501 WEST HUMBLE STREET

City
BAYTOWNState
TXZip Code
77520FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYEDOccupation (for Individual)
HEALTHCARE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 12 / 2020

Transaction ID : SA11AI.34545

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

C. GIANNE, ALDO, , ,

Mailing Address 7969 NORTHWEST 2ND STREET

City
MIAMIState
FLZip Code
33126FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ALDO GIANNEOccupation (for Individual)
INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1775.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 27 / 2020

Transaction ID : SA11AI.33928

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

165.00

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 63 OF 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. GIANNE, ALDO, , ,

Mailing Address 7969 NORTHWEST 2ND STREET

City
MIAMI

State
FL

Zip Code
33126

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ALDO GIANNE

Occupation (for Individual)
INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1875.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 28 / 2020

Transaction ID : SA11AI.33927

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

B. GILBERT, MICHAEL, , ,

Mailing Address 7752 GAMID DRIVE

City

SPRINGFIELD

State

VA

Zip Code

22153

FEC 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 ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 16 / 2020

Transaction ID : SA11AI.33418

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

C. GILBERT, MICHAEL, , ,

Mailing Address 7752 GAMID DRIVE

City

SPRINGFIELD

State

VA

Zip Code

22153

FEC 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 ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 25 / 2020

Transaction ID : SA11AI.33684

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

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

140.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 64 OF 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. GILBERT, MICHAEL, , ,

Mailing Address 7752 GAMID DRIVE

City
SPRINGFIELD

State
VA

Zip Code
22153

FEC 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 ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 16 / 2020

Transaction ID : SA11AI.34391

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

B. GLASS, JOHN, , ,

Mailing Address 5562 VASSAR DRIVE

City
SAN JOSE

State
CA

Zip Code
95118

FEC 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 ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 21 / 2020

Transaction ID : SA11AI.33822

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

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

C. GLASS, JOHN, , ,

Mailing Address 5562 VASSAR DRIVE

City
SAN JOSE

State
CA

Zip Code
95118

FEC 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 ▼

615.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 01 / 2020

Transaction ID : SA11AI.34046

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

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

80.00

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

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

FOR LINE NUMBER: PAGE 65 OF 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. GLASS, JOHN, , ,

Mailing Address 5562 VASSAR DRIVE

City
SAN JOSE

State
CA

Zip Code
95118

FEC 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 ▼

660.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 21 / 2020

Transaction ID : SA11AI.34847

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

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

B. GLEASON, THOMAS, , ,

Mailing Address 2011 WOODED WAY

City
HYATTSVILLE

State
MD

Zip Code
20783

FEC 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 ▼

202.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 24 / 2020

Transaction ID : SA11AI.33678

Amount of Each Receipt this Period

20.20

☐ Memo Item
CONTRIBUTION

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

C. GOLD, ROBERT, , ,

Mailing Address 5228 W OLD STUMP DRIVE NW

City
GIG HARBOR

State
WA

Zip Code
98332

FEC 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 ▼

202.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 17 / 2020

Transaction ID : SA11AI.33629

Amount of Each Receipt this Period

20.20

☐ Memo Item
CONTRIBUTION

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

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

85.40

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

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

FOR LINE NUMBER: PAGE 66 OF 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. GOLD, ROBERT, , ,

Mailing Address 5228 W OLD STUMP DRIVE NW

City

GIG HARBOR

State

WA

Zip Code

98332

FEC 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 ▼

222.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 17 / 2020

Transaction ID : SA11AI.34654

Amount of Each Receipt this Period

20.20

☐ Memo Item
CONTRIBUTION

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

B. GOMES, LUCIANO, , ,

Mailing Address 551 TWIN LAKE DRIVE

City

SUMMERVILLE

State

SC

Zip Code

29483

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF EMPLOYED

Occupation (for Individual)

CONSTRUCTION

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 17 / 2020

Transaction ID : SA11AI.33428

Amount of Each Receipt this Period

90.00

☐ Memo Item
CONTRIBUTION

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

C. GOMES, LUCIANO, , ,

Mailing Address 551 TWIN LAKE DRIVE

City

SUMMERVILLE

State

SC

Zip Code

29483

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF EMPLOYED

Occupation (for Individual)

CONSTRUCTION

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

990.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 17 / 2020

Transaction ID : SA11AI.34703

Amount of Each Receipt this Period

90.00

☐ Memo Item
CONTRIBUTION

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

200.20

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. GORE, GEORGE, , ,

Mailing Address 285 BUCKBOARD RD S.E

City
DEMING

State
NM

Zip Code
88030

FEC 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 ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 01 / 2020

Transaction ID : SA11AI.34018

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

B. GORE, GEORGE, , ,

Mailing Address 285 BUCKBOARD RD S.E

City
DEMING

State
NM

Zip Code
88030

FEC 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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 08 / 2020

Transaction ID : SA11AI.34281

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. GREEN, MARY, K, ,

Mailing Address P.O. BOX 3168

City
BANDERA

State
TX

Zip Code
78003

FEC 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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 15 / 2020

Transaction ID : SA11AI.33508

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

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

75.00

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. GREEN, MARY, K, ,

Mailing Address P.O. BOX 3168

City
BANDERA

State
TX

Zip Code
78003

FEC 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 ▼

275.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2020

Transaction ID : SA11AI.34512

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

B. GREENE, HAROLD, , ,

Mailing Address 2071 STATE HIGHWAY 253

City
WINFIELD

State
AL

Zip Code
35594

FEC 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 ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2020

Transaction ID : SA11AI.34443

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

C. GUEZ, CHARLES, , ,

Mailing Address 3660 RICHMOND AVE, APT 433

City
HOUSTON

State
TX

Zip Code
77046

FEC 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 ▼

215.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 15 / 2020

Transaction ID : SA11AI.33533

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

60.00

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. GUEZ, CHARLES, , ,

Mailing Address 3660 RICHMOND AVE, APT 433

City
HOUSTON

State
TX

Zip Code
77046

FEC 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 ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 15 / 2020

Transaction ID : SA11AI.34541

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

B. GULA, RON, , ,

Mailing Address PO BOX 335

City
WOODSTOCK

State
MD

Zip Code
21163

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GULA TECH ADVENTURES

Occupation (for Individual)
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 06 / 2020

Transaction ID : SA11AI.34346

Amount of Each Receipt this Period

50000.00

☐ Memo Item
CONTRIBUTION

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

C. GWALTNEY, ROSALIE, , ,

Mailing Address 1531 N. MAIN STREET

City
LOVINGTON

State
NM

Zip Code
88260

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NOR-LEA REGIONAL HOSPITAL

Occupation (for Individual)
NURSE ANESTHETIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1630.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 21 / 2020

Transaction ID : SA11AI.33793

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

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

50070.00

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

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. GWALTNEY, ROSALIE, , ,

Mailing Address 1531 N. MAIN STREET

City
LOVINGTON

State
NM

Zip Code
88260

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NOR-LEA REGIONAL HOSPITAL

Occupation (for Individual)
NURSE ANESTHETIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1730.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 05 / 2020

Transaction ID : SA11AI.34282

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

B. GWALTNEY, ROSALIE, , ,

Mailing Address 1531 N. MAIN STREET

City
LOVINGTON

State
NM

Zip Code
88260

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NOR-LEA REGIONAL HOSPITAL

Occupation (for Individual)
NURSE ANESTHETIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1780.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 21 / 2020

Transaction ID : SA11AI.34814

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

C. HACKER, DAVID, , ,

Mailing Address 11924 MN HWY 4

City
COSMOS

State
MN

Zip Code
56228

FEC 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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 31 / 2020

Transaction ID : SA11AI.33965

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

175.00

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. HAMERSLEY, CAROLYN, , ,

Mailing Address 2900 W LIVE OAK DR

City
PRESCOTT

State
AZ

Zip Code
86305

FEC 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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 19 / 2020

Transaction ID : SA11AI.33567

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

B. HAMERSLEY, CAROLYN, , ,

Mailing Address 2900 W LIVE OAK DR

City
PRESCOTT

State
AZ

Zip Code
86305

FEC 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 ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 19 / 2020

Transaction ID : SA11AI.34812

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. HAMMETT, PEGGY, , ,

Mailing Address 2330 LAKEWOOD YACHT CLUB DR #3

City
SEABROOK

State
TX

Zip Code
77586

FEC 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 ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 19 / 2020

Transaction ID : SA11AI.33540

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

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

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

300.00

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

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. HAMMETT, PEGGY, , ,

Mailing Address 2330 LAKEWOOD YACHT CLUB DR #3

City
SEABROOK

State
TX

Zip Code
77586

FEC 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 ▼

2750.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 19 / 2020

Transaction ID : SA11AI.34788

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

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

B. HANKS, CATHY, L, ,

Mailing Address 500 4TH ST, PO BOX210

City
CROSSVILLE

State
IL

Zip Code
62827

FEC 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 ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 17 / 2020

Transaction ID : SA11AI.33502

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

C. HANKS, CATHY, L, ,

Mailing Address 500 4TH ST, PO BOX210

City
CROSSVILLE

State
IL

Zip Code
62827

FEC 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 ▼

275.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 29 / 2020

Transaction ID : SA11AI.33971

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

280.00

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

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

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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. HANKS, CATHY, L, ,

Mailing Address 500 4TH ST, PO BOX210

City
CROSSVILLE

State
IL

Zip Code
62827

FEC 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 ▼

290.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2020

Transaction ID : SA11AI.34499

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

B. HARKREADER, DONALD, , ,

Mailing Address 367 CR 3467

City
CLARKSVILLE

State
AR

Zip Code
72830

FEC 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 ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 04 / 2020

Transaction ID : SA11AI.34220

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

C. HEATH, DARWIN, , ,

Mailing Address P0 BOX 106

City
CENTER SANDWICH

State
NH

Zip Code
03227

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 30 / 2020

Transaction ID : SA11AI.33867

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

90.00

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

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

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. HENSELER, UDO, , ,

Mailing Address 2901 SW 117TH AVE.

City
DAVIE

State
FL

Zip Code
33330

FEC 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 ▼

580.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 07 / 2020

Transaction ID : SA11AI.34146

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

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

B. HENSELER, UDO, , ,

Mailing Address 2901 SW 117TH AVE.

City
DAVIE

State
FL

Zip Code
33330

FEC 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 ▼

605.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 14 / 2020

Transaction ID : SA11AI.34426

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. HESS, KARON, , ,

Mailing Address 315 SOUTH 1ST STREET

City
MARION

State
KS

Zip Code
95113

FEC 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 ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2020

Transaction ID : SA11AI.33821

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

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

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

85.00

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. HILL, DAVID, , ,

Mailing Address PO BOX 45

City
LAKEVILLE

State
IN

Zip Code
46536

FEC 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 ▼

222.20

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2020

Transaction ID : SA11AI.34175

Amount of Each Receipt this Period

20.20

☐ Memo Item
CONTRIBUTION

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

B. HILL, RICHARD, , ,

Mailing Address 1365 PETERSHAM ROAD

City
ATHOL

State
MA

Zip Code
01331

FEC 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 ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 25 / 2020

Transaction ID : SA11AI.33646

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. HITE, BARBARA, , ,

Mailing Address 7707 VICKIJOHN DRIVE

City
HOUSTON

State
TX

Zip Code
77071

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CITY OF HOUSTON

Occupation (for Individual)
ADMIN ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 13 / 2020

Transaction ID : SA11AI.34542

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

60.20

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. HODGE, VICKI, , ,

Mailing Address 5795 N WELLSRING WAY

City
BOISE

State
ID

Zip Code
83713

FEC 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 ▼

220.00

Date of Receipt

11 / 15 / 2020

Transaction ID : SA11AI.34569

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

B. HOELZEL, GEORGE, , ,

Mailing Address 32035 LAZY GLEN LN

City

TRABUCO CANYON

State

CA

Zip Code

92679

FEC 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 ▼

220.00

Date of Receipt

11 / 20 / 2020

Transaction ID : SA11AI.34839

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

C. HOLBERT, PAMELA, , ,

Mailing Address 3901 CROSS STREETS NORTH

City

ANNISTON

State

AL

Zip Code

36201

FEC 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 ▼

355.00

Date of Receipt

11 / 07 / 2020

Transaction ID : SA11AI.34154

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

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

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

70.00

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

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. HOLLOWAY, GERALD, , ,

Mailing Address 836 E 16TH ST N

City
NEWTON

State
IA

Zip Code
50208

FEC 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 ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 22 / 2020

Transaction ID : SA11AI.33729

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

B. HOLLOWAY, GERALD, , ,

Mailing Address 836 E 16TH ST N

City
NEWTON

State
IA

Zip Code
50208

FEC 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 ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 22 / 2020

Transaction ID : SA11AI.34745

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

C. HOLMES, JANET, , ,

Mailing Address 8604 BARBERRY PLACE

City
PARKER

State
CO

Zip Code
80134

FEC 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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 21 / 2020

Transaction ID : SA11AI.33781

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

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

60.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. HOLMES, JANET, , ,

Mailing Address 8604 BARBERRY PLACE

City
PARKER

State
CO

Zip Code
80134

FEC 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 ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 21 / 2020

Transaction ID : SA11AI.34802

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

B. HOREL, MELINDA, , ,

Mailing Address 812 STONE CANYON CIRCLE

City
INVERNESS

State
IL

Zip Code
60010

FEC 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 ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 09 / 2020

Transaction ID : SA11AI.34199

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. HORNILLA, ESTRELLA, , ,

Mailing Address 151 EAST VISTA AVE.

City
DALY CITY

State
CA

Zip Code
94014

FEC 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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 19 / 2020

Transaction ID : SA11AI.33611

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

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

70.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. HORNSTEIN, MICHAEL, , ,

Mailing Address 29585 KRAEMER LAKE ROAD

City

ST JOSEPH

State

MN

Zip Code

56374

FEC 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 ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 16 / 2020

Transaction ID : SA11AI.33493

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

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

B. HORNSTEIN, MICHAEL, , ,

Mailing Address 29585 KRAEMER LAKE ROAD

City

ST JOSEPH

State

MN

Zip Code

56374

FEC 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 ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 16 / 2020

Transaction ID : SA11AI.34486

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

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

C. HUBBARD, JEREMIAH, , ,

Mailing Address 9500 WEST BAYWATER CT

City

CRYSTAL RIVER

State

FL

Zip Code

34423

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NCO

Occupation (for Individual)

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 07 / 2020

Transaction ID : SA11AI.34150

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

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

120.00

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

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. HUCKE, JON, , ,

Mailing Address 2913 LONG LOOP UNIT C

City
FORT MEADE

State
MD

Zip Code
20755

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
US ARMY

Occupation (for Individual)
SOLDIER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 08 / 2020

Transaction ID : SA11AI.34110

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

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

B. HUMPHREYS, JOSEPH, , ,

Mailing Address 883 CARDINAL POINTE COVE

City
SANFORD

State
FL

Zip Code
32771

FEC 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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 19 / 2020

Transaction ID : SA11AI.33450

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. HUMPHREYS, JOSEPH, , ,

Mailing Address 883 CARDINAL POINTE COVE

City
SANFORD

State
FL

Zip Code
32771

FEC 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 ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 19 / 2020

Transaction ID : SA11AI.34713

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

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

80.00

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

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. HURLEY, ROBERT, , ,

Mailing Address 205B 3RD ST

City
HONOLULU

State
HI

Zip Code
96818

FEC 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 ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 09 / 2020

Transaction ID : SA11AI.34327

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

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

B. HUSKEY, JAMES, , ,

Mailing Address 673 HILLCREST DR

City
BILLINGS

State
MT

Zip Code
59105

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
OWN

Occupation (for Individual)
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 15 / 2020

Transaction ID : SA11AI.34491

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

C. IMMEL, JUDIE, , ,

Mailing Address 1622 S E 46TH AVE-UNIT B

City
PORTLAND

State
OR

Zip Code
97215

FEC 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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 21 / 2020

Transaction ID : SA11AI.34855

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

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

75.00

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

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. IRRIG, GERALD, , ,

Mailing Address 106 WHITE DOVE TRAIL

City
MABANK

State
TX

Zip Code
75156

FEC 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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 18 / 2020

Transaction ID : SA11AI.33523

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

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

B. IRRIG, GERALD, , ,

Mailing Address 106 WHITE DOVE TRAIL

City
MABANK

State
TX

Zip Code
75156

FEC 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 ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 18 / 2020

Transaction ID : SA11AI.34771

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

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

C. IRWIN, PATRICK, , ,

Mailing Address 8426 DRAGON ST

City
SAN ANTONIO

State
TX

Zip Code
78254

FEC 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 ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 25 / 2020

Transaction ID : SA11AI.33771

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

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

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

95.00

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

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. JACKSON, THOMAS, , ,

Mailing Address 1111 MORSE AVENUE, SPC 120

City
SUNNYVALE

State
CA

Zip Code
94089

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 21 / 2020

Transaction ID : SA11AI.33816

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

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

B. JACKSON, THOMAS, , ,

Mailing Address 1111 MORSE AVENUE, SPC 120

City
SUNNYVALE

State
CA

Zip Code
94089

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 21 / 2020

Transaction ID : SA11AI.34842

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

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

C. JACOBSON, WILLIAM, , ,

Mailing Address 555 CAMP PERRIN ROAD

City
LAWRENCEVILLE

State
GA

Zip Code
30043

FEC 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 ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 17 / 2020

Transaction ID : SA11AI.33433

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

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

105.00

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

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. JACOBSON, WILLIAM, , ,

Mailing Address 555 CAMP PERRIN ROAD

City
LAWRENCEVILLE

State
GA

Zip Code
30043

FEC 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 ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2020

Transaction ID : SA11AI.33908

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

B. JIM, MARY, , ,

Mailing Address P O BOX 1523

City
CHINLE

State
AZ

Zip Code
86503

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CHINLE IHS

Occupation (for Individual)
MEDICAL CLERK

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 22 / 2020

Transaction ID : SA11AI.33791

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

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

C. JIM, MARY, , ,

Mailing Address P O BOX 1523

City
CHINLE

State
AZ

Zip Code
86503

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CHINLE IHS

Occupation (for Individual)
MEDICAL CLERK

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 22 / 2020

Transaction ID : SA11AI.34813

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

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

85.00

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

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. JOCHIM, KAREN, , ,

Mailing Address 187RAINBOW DRIVE. #8799

City
LIVINGSTON

State
TX

Zip Code
77399

FEC 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 ▼

371.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 12 / 2020

Transaction ID : SA11AI.34551

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

B. JOHNSON, ELIZABETH, , ,

Mailing Address 45 SMITH AVENUE

City
ORONO

State
MN

Zip Code
55391

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
INTERIOR DESIGNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 28 / 2020

Transaction ID : SA11AI.33963

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

C. JOHNSON, KIRT, , ,

Mailing Address 6529 SO.VAN NESS

City
LOS ANGELES

State
CA

Zip Code
90047

FEC 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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 19 / 2020

Transaction ID : SA11AI.33572

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

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

70.00

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

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. JOHNSON, KIRT, , ,

Mailing Address 6529 SO.VAN NESS

City
LOS ANGELES

State
CA

Zip Code
90047

FEC 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 ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 19 / 2020

Transaction ID : SA11AI.34820

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

B. JOHNSON, KRAIG, , ,

Mailing Address 509 N. HAMPTON AVE.

City
ORLANDO

State
FL

Zip Code
32803

FEC 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
11 / 01 / 2020

Transaction ID : SA11AI.33923

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. JOHNSON, KRAIG, , ,

Mailing Address 509 N. HAMPTON AVE.

City
ORLANDO

State
FL

Zip Code
32803

FEC 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 ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2020

Transaction ID : SA11AI.33924

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

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

75.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. JOHNSON, MARGIE, , ,

Mailing Address PO BOX 5087

City
CAREFREE

State
AZ

Zip Code
85377

FEC 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 ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 25 / 2020

Transaction ID : SA11AI.33789

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

B. JOHNSON, RALPH, , ,

Mailing Address 14806 WEST SKY HAWK DRIVE

City
SUN CITY WEST

State
AZ

Zip Code
85375

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RD JOHNSON

Occupation (for Individual)
PUBLIC ACCOUNTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 27 / 2020

Transaction ID : SA11AI.33788

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. JOHNSON, RALPH, , ,

Mailing Address 14806 WEST SKY HAWK DRIVE

City
SUN CITY WEST

State
AZ

Zip Code
85375

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RD JOHNSON

Occupation (for Individual)
PUBLIC ACCOUNTANT

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
11 / 14 / 2020

Transaction ID : SA11AI.34588

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

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

100.00

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

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. JONES, CHARLES, , ,

Mailing Address 4505 LITTLE RIVER ROAD

City
BIRMINGHAM

State
AL

Zip Code
35213

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BLUESTONE COKE, LLC

Occupation (for Individual)
ENVIRONMENTAL CHEMIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 10 / 2020

Transaction ID : SA11AI.34442

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

B. JONES, CRAIG, , ,

Mailing Address 2021 JAMESTOWN WAY

City
OXNARD

State
CA

Zip Code
93035

FEC 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 ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 10 / 2020

Transaction ID : SA11AI.34635

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

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

C. JUDSON, MARY, , ,

Mailing Address 9145 E CALLE DID E LAS BRISAS

City
SCOTTSDALE

State
AZ

Zip Code
85255

FEC 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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 07 / 2020

Transaction ID : SA11AI.34275

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

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

230.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. KEETON, DEWEY, , ,

Mailing Address 31918 OAK RIDGE PARKWAY

City
BULVERDE

State
TX

Zip Code
78163

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SIG

Occupation (for Individual)
SQE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 06 / 2020

Transaction ID : SA11AI.34245

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

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

B. KLINGE, PATRICIA, , ,

Mailing Address 5428 WHITE ASTER WAY

City
INDIANAPOLIS

State
IN

Zip Code
46237

FEC 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 ▼

435.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 05 / 2020

Transaction ID : SA11AI.34174

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

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

C. KRAFT, YVONNE, , ,

Mailing Address 2986 SE BRANCH RD

City
MALTA

State
OH

Zip Code
43758

FEC 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 ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 28 / 2020

Transaction ID : SA11AI.33949

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

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

90.00

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

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. KRONEWITTER, JAMES, , ,

Mailing Address 3818 134TH PLACE SOUTHWEST

City
LYNNWOOD

State
WA

Zip Code
98087

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
THE BOEING COMPANY

Occupation (for Individual)
QUALITY SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

11 / 08 / 2020

Transaction ID : SA11AI.34337

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

B. KUHLEWEIN, HELEN, , ,

Mailing Address 7819 PATTERSON RD

City
HILLIARD

State
OH

Zip Code
43026

FEC 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 ▼

500.00

Date of Receipt

10 / 23 / 2020

Transaction ID : SA11AI.33719

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

C. KUHLEWEIN, HELEN, , ,

Mailing Address 7819 PATTERSON RD

City
HILLIARD

State
OH

Zip Code
43026

FEC 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 ▼

600.00

Date of Receipt

11 / 23 / 2020

Transaction ID : SA11AI.34731

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

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

300.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

C3 PAC

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

Mailing Address BOX 944

City
GRAND ISLAND

State
NE

Zip Code
68802

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
U.S. POSTAL SERVICE

Occupation (for Individual)
LETTER CARRIER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 28 / 2020

Transaction ID : SA11AI.33976

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

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

Mailing Address 4027 N MONROE AVE

City
KANSAS CITY

State
MO

Zip Code
64117

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FORD MOTOR COMPANY

Occupation (for Individual)
TEAM LEADER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 16 / 2020

Transaction ID : SA11AI.33504

Amount of Each Receipt this Period

60.00

☐ Memo Item
CONTRIBUTION

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

Mailing Address 4027 N MONROE AVE

City
KANSAS CITY

State
MO

Zip Code
64117

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FORD MOTOR COMPANY

Occupation (for Individual)
TEAM LEADER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

665.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 16 / 2020

Transaction ID : SA11AI.34502

Amount of Each Receipt this Period

60.00

☐ Memo Item
CONTRIBUTION

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

130.00

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

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

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. LARSEN, ROBERT, , ,

Mailing Address 50 TENNIS VILLAS

City
DANA POINT

State
CA

Zip Code
92629

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
THE RUSHMORE GROUP

Occupation (for Individual)
CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 06 / 2020

Transaction ID : SA11AI.34311

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

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

B. LATHAM, LARRY, , ,

Mailing Address 1720 NORTH DOWELL ROAD

City
AMARILLO

State
TX

Zip Code
79124

FEC 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 ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2020

Transaction ID : SA11AI.33543

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. LATHAM, LARRY, , ,

Mailing Address 1720 NORTH DOWELL ROAD

City
AMARILLO

State
TX

Zip Code
79124

FEC 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 ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 20 / 2020

Transaction ID : SA11AI.34797

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

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

80.00

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

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. LAWLEY, LINDA, , ,

Mailing Address 5834 CARRIAGE BROOK RD

City
MONTGOMERY

State
AL

Zip Code
36116

FEC 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 ▼

222.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 19 / 2020

Transaction ID : SA11AI.33463

Amount of Each Receipt this Period

20.20

☐ Memo Item
CONTRIBUTION

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

B. LAWLEY, LINDA, , ,

Mailing Address 5834 CARRIAGE BROOK RD

City
MONTGOMERY

State
AL

Zip Code
36116

FEC 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 ▼

224.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 06 / 2020

Transaction ID : SA11AI.34153

Amount of Each Receipt this Period

2.00

☐ Memo Item
CONTRIBUTION

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

C. LAWLEY, LINDA, , ,

Mailing Address 5834 CARRIAGE BROOK RD

City
MONTGOMERY

State
AL

Zip Code
36116

FEC 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 ▼

244.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 19 / 2020

Transaction ID : SA11AI.34726

Amount of Each Receipt this Period

20.20

☐ Memo Item
CONTRIBUTION

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

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

42.40

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

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. LAWRENCE, MARJORIE, , ,

Mailing Address 2223 W CALIRET ST

City
KUNA

State
ID

Zip Code
83634

FEC 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 ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 08 / 2020

Transaction ID : SA11AI.34315

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

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

B. LEDERMAN, ROCHELLE, , ,

Mailing Address 28 TURNER STREET

City

BRIGHTON

State

MA

Zip Code

02135

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LONGS

Occupation (for Individual)
SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 20 / 2020

Transaction ID : SA11AI.34661

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

C. LEON, GUIDO, , ,

Mailing Address 4901 QUAIL RUN

City

LAS CRUCES

State

NM

Zip Code

88011

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED

Occupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

435.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 30 / 2020

Transaction ID : SA11AI.34016

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

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

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

80.00

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

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. LEON, GUIDO, , ,

Mailing Address 4901 QUAIL RUN

City
LAS CRUCES

State
NM

Zip Code
88011

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED

Occupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 30 / 2020

Transaction ID : SA11AI.34017

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

B. LESLIE, MICHAEL, , ,

Mailing Address 306 HARBOUR POINTE DRIVE EAST

City
NOBLESVILLE

State
IN

Zip Code
46062

FEC 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 ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 08 / 2020

Transaction ID : SA11AI.34171

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. LEVITT, DEBBIE, , ,

Mailing Address 19083 BILLFISH AVE.

City
VENICE

State
FL

Zip Code
34292

FEC 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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 19 / 2020

Transaction ID : SA11AI.33458

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

65.00

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

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

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<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)

C3 PAC

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

A. LEVITT, DEBBIE, , ,

Mailing Address 19083 BILLFISH AVE.

City
VENICE

State
FL

Zip Code
34292

FEC 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 ▼

275.00

Date of Receipt

11 / 19 / 2020

Transaction ID : SA11AI.34720

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

B. LEWIS, DALE, , ,

Mailing Address 6203 HIGHCROFT DRIVE

City
NAPLES

State
FL

Zip Code
34119

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFC

Occupation (for Individual)

RN/ADMIN ASST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

10 / 17 / 2020

Transaction ID : SA11AI.33455

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

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

C. LEWIS, DALE, , ,

Mailing Address 6203 HIGHCROFT DRIVE

City
NAPLES

State
FL

Zip Code
34119

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFC

Occupation (for Individual)

RN/ADMIN ASST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

825.00

Date of Receipt

11 / 17 / 2020

Transaction ID : SA11AI.34435

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

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

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

175.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. LEWIS, GAYE, , ,

Mailing Address 2605 S. ROY RD

City
KINGMAN

State
AZ

Zip Code
86401

FEC 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 ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 16 / 2020

Transaction ID : SA11AI.33568

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

B. LITTLE, JAMES, , ,

Mailing Address 2233 W CHANNING ST

City
WEST COVINA

State
CA

Zip Code
91790

FEC 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 ▼

232.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 17 / 2020

Transaction ID : SA11AI.33595

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

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

C. LITTLE, JAMES, , ,

Mailing Address 2233 W CHANNING ST

City
WEST COVINA

State
CA

Zip Code
91790

FEC 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 ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 09 / 2020

Transaction ID : SA11AI.34296

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

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

41.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. LITTLE, JAMES, , ,

Mailing Address 2233 W CHANNING ST

City
WEST COVINA

State
CA

Zip Code
91790

FEC 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 ▼

257.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 10 / 2020

Transaction ID : SA11AI.34616

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

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

B. LITTLE, JAMES, , ,

Mailing Address 2233 W CHANNING ST

City
WEST COVINA

State
CA

Zip Code
91790

FEC 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 ▼

258.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 17 / 2020

Transaction ID : SA11AI.34615

Amount of Each Receipt this Period

1.00

☐ Memo Item
CONTRIBUTION

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

C. LIVELY, ALBERT, , ,

Mailing Address 8408 WAYFARER LN

City
HOUSTON

State
TX

Zip Code
77075

FEC 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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 19 / 2020

Transaction ID : SA11AI.33534

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

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

36.00

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

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. LIVELY, ALBERT, , ,

Mailing Address 8408 WAYFARER LN

City
HOUSTON

State
TX

Zip Code
77075

FEC 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 ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 19 / 2020

Transaction ID : SA11AI.34782

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

B. LIVELY, FRED, , ,

Mailing Address 1545 SUMMER LEE DRIVE

City
ROCKWALL

State
TX

Zip Code
75032

FEC 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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 21 / 2020

Transaction ID : SA11AI.34769

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

C. LOCKE, WILLIAM, , ,

Mailing Address 6600 GLEN FALLS CROSSING

City
MOSELEY

State
VA

Zip Code
23120

FEC 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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 15 / 2020

Transaction ID : SA11AI.34394

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

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

65.00

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

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. LOGAN, WILLIAM, , ,

Mailing Address 29899 JAMES COURT

City
GIBALTAR

State
MI

Zip Code
48173

FEC 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 ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 10 / 2020

Transaction ID : SA11AI.34470

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

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

B. LOJACONO, GREGORY, , ,

Mailing Address 2407 PRO TOUR DR

City
BELLEVILLE

State
IL

Zip Code
62220

FEC 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 ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2020

Transaction ID : SA11AI.34203

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

C. LOJACONO, GREGORY, , ,

Mailing Address 2407 PRO TOUR DR

City
BELLEVILLE

State
IL

Zip Code
62220

FEC 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 ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 13 / 2020

Transaction ID : SA11AI.34497

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

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

60.00

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

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. LUCKS, STEVEN, , ,

Mailing Address 9620 CLOVERCROFT RD., PO BOX 817

City
NOLENSVILLE

State
TN

Zip Code
37135

FEC 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 ▼

202.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 24 / 2020

Transaction ID : SA11AI.33715

Amount of Each Receipt this Period

20.20

☐ Memo Item
CONTRIBUTION

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

B. MACHADO, ARLENE, , ,

Mailing Address 6535 JENNINGS ROAD

City
MODESTO

State
CA

Zip Code
95358

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MACHADO RANXH

Occupation (for Individual)
SELF OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 19 / 2020

Transaction ID : SA11AI.33618

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. MACHADO, ARLENE, , ,

Mailing Address 6535 JENNINGS ROAD

City
MODESTO

State
CA

Zip Code
95358

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MACHADO RANXH

Occupation (for Individual)
SELF OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 19 / 2020

Transaction ID : SA11AI.34849

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

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

70.20

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

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. MACKEY, SUSAN, , ,

Mailing Address 2316 NORTH PATTERSON STREET

City
VALDOSTA

State
GA

Zip Code
31602

FEC 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 ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 10 / 2020

Transaction ID : SA11AI.34414

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

B. MAHAFFEY, REDGE, , ,

Mailing Address 2909 S LAKE

City

DAVIDSONVILLE

State

MD

Zip Code

21035

FEC 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 ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2020

Transaction ID : SA11AI.33411

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. MAHAFFEY, REDGE, , ,

Mailing Address 2909 S LAKE

City

DAVIDSONVILLE

State

MD

Zip Code

21035

FEC 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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 20 / 2020

Transaction ID : SA11AI.34689

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

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

150.00

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

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. MAHINAY, GRISELDA, , ,

Mailing Address 17967 LOST CANYON RD UNIT 67

City

CANYON COUNTRY

State

CA

Zip Code

91387

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AVE H GUEST HOME

Occupation (for Individual)

CAREGIVER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 05 / 2020

Transaction ID : SA11AI.34295

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

B. MANTEIGA, JOSEPH, , ,

Mailing Address 2120 SW 57 TERRACE

City

HOLLYWOOD

State

FL

Zip Code

33023

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 19 / 2020

Transaction ID : SA11AI.33451

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. MARKT, COLLIS, , ,

Mailing Address PO BOX 245

City

VON ORMY

State

TX

Zip Code

78073

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RET

Occupation (for Individual)

NOT EMPLOYED

Receipt For:

☐ Primary
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 08 / 2020

Transaction ID : SA11AI.34242

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

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

65.00

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

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. MARSH, GAIL, , ,

Mailing Address 3023 WOODLAND TRAIL

City
MIDDLETON

State
WI

Zip Code
53562

FEC 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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 19 / 2020

Transaction ID : SA11AI.33488

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

B. MARSH, GAIL, , ,

Mailing Address 3023 WOODLAND TRAIL

City
MIDDLETON

State
WI

Zip Code
53562

FEC 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 ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 19 / 2020

Transaction ID : SA11AI.34746

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. MASON, JUANITA, , ,

Mailing Address 414 WATER ST APT 2402

City
BALTIMORE

State
MD

Zip Code
21202

FEC 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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 06 / 2020

Transaction ID : SA11AI.34112

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

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

100.00

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

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. MASON, JUANITA, , ,

Mailing Address 414 WATER ST APT 2402

City
BALTIMORE

State
MD

Zip Code
21202

FEC 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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 12 / 2020

Transaction ID : SA11AI.34389

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

B. MASON, SCOTT, , ,

Mailing Address 275 HENRY M CHANDLER DR

City
ROCKWALL

State
TX

Zip Code
75032

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LMD MARINE

Occupation (for Individual)
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 25 / 2020

Transaction ID : SA11AI.33751

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

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

C. MASON, SCOTT, , ,

Mailing Address 275 HENRY M CHANDLER DR

City
ROCKWALL

State
TX

Zip Code
75032

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LMD MARINE

Occupation (for Individual)
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

267.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 04 / 2020

Transaction ID : SA11AI.34229

Amount of Each Receipt this Period

20.20

☐ Memo Item
CONTRIBUTION

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

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

75.20

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

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

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(check only one)

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. MASSELLO, MARIE, , ,

Mailing Address 115 NOB HILL DRIVE

City

ELMSFORD

State

NY

Zip Code

10523

FEC 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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 26 / 2020

Transaction ID : SA11AI.33659

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

B. MAULDING, FRANCES, , ,

Mailing Address P. O. BOX 1505

City

HELENDALE

State

CA

Zip Code

92342

FEC 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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 15 / 2020

Transaction ID : SA11AI.34622

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

C. MCCOLLUM, JAMES, , ,

Mailing Address 198 CR 2289

City

CLEVELAND

State

TX

Zip Code

77327

FEC 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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 19 / 2020

Transaction ID : SA11AI.33535

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

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

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

65.00

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

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

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. MCCOLLUM, JAMES, , ,

Mailing Address 198 CR 2289

City
CLEVELAND

State
TX

Zip Code
77327

FEC 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 ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 19 / 2020

Transaction ID : SA11AI.34784

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

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

B. MCDANIEL, MARY, , ,

Mailing Address 131 PERETZ CIRCLE

City
MORRISTOWN

State
AZ

Zip Code
85342

FEC 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 ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 10 / 2020

Transaction ID : SA11AI.34586

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. MCEATHRON, DOUG, , ,

Mailing Address 14422 BRAFFERTON PARKWAY

City
FORT WAYNE

State
IN

Zip Code
46814

FEC 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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 16 / 2020

Transaction ID : SA11AI.33479

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

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

80.00

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

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. MCGETTIGAN, LIDIA, , ,

Mailing Address 11 LAWNSIDE RD

City
CHELTENHAM

State
PA

Zip Code
19012

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EXPRESS BUSINESS

Occupation (for Individual)
TAX ADVISOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 15 / 2020

Transaction ID : SA11AI.33404

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

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

B. MCGETTIGAN, LIDIA, , ,

Mailing Address 11 LAWNSIDE RD

City
CHELTENHAM

State
PA

Zip Code
19012

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EXPRESS BUSINESS

Occupation (for Individual)
TAX ADVISOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 15 / 2020

Transaction ID : SA11AI.34380

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

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

C. MCMAHON, ROBERT, , ,

Mailing Address 3343 HYMAN PLACE

City
NEW ORLEANS

State
LA

Zip Code
70131

FEC 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 ▼

202.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 29 / 2020

Transaction ID : SA11AI.33979

Amount of Each Receipt this Period

20.20

☐ Memo Item
CONTRIBUTION

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

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

110.20

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

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. MCNEAL, TERRI, , ,

Mailing Address 6209 CULVER RD

City
TRAVERSE CITY

State
MI

Zip Code
49685

FEC 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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 21 / 2020

Transaction ID : SA11AI.33728

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

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

B. MEAD, ROBERT, , ,

Mailing Address 1294 W CLEARVIEW LANE

City
COCHISE

State
AZ

Zip Code
85606

FEC 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 ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 19 / 2020

Transaction ID : SA11AI.33564

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

C. MEAD, ROBERT, , ,

Mailing Address 1294 W CLEARVIEW LANE

City
COCHISE

State
AZ

Zip Code
85606

FEC 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 ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 19 / 2020

Transaction ID : SA11AI.34811

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

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

230.00

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

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. MEYER, JEANNE, , ,

Mailing Address 119 E DELAWARE CANAL CT

City
MIDDLETOWN

State
DE

Zip Code
19709

FEC 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 ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 10 / 2020

Transaction ID : SA11AI.34107

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

B. MICKA, ANDY, , ,

Mailing Address 2190 OAK ST

City
BAKER CITY

State
OR

Zip Code
97814

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NEW DIRECTIONS NORTHWEST

Occupation (for Individual)
DRUG AND ALCOHOL COUNSELOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 08 / 2020

Transaction ID : SA11AI.34333

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

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

C. MIKELIUNAS, ADRIAN, , ,

Mailing Address 1724 WESTMORELAND ST

City
MCLEAN

State
VA

Zip Code
22101

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EXPERIS

Occupation (for Individual)
SECURITY ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2020

Transaction ID : SA11AI.33896

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

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

80.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. MILLER, JAMES, , ,

Mailing Address 1900 OAKBROOKE DRIVE, APT 2

City
HOWELL

State
MI

Zip Code
48843

FEC 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 ▼

220.00

Date of Receipt

11 / 15 / 2020

Transaction ID : SA11AI.34474

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

B. MILLER, SHAREN, , ,

Mailing Address 4939 WILLKIE ROAD

City
TERRE HAUTE

State
IN

Zip Code
47802

FEC 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 ▼

275.00

Date of Receipt

11 / 07 / 2020

Transaction ID : SA11AI.34177

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. MILLESON, LENORE, , ,

Mailing Address 4887 NEW BROAD ST, APT 2006

City
ORLANDO

State
FL

Zip Code
32814

FEC 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 ▼

222.20

Date of Receipt

11 / 09 / 2020

Transaction ID : SA11AI.34142

Amount of Each Receipt this Period

20.20

☐ Memo Item
CONTRIBUTION

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

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

65.20

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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<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)

C3 PAC

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

A. MINOR, GEORGE, , ,

Mailing Address 2037 WINDSOR COURT #4

City
PLOVERState
WIZip Code
54467FEC 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 ▼

220.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	15	2020

Transaction ID : SA11AI.34483

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

B. MORGAN, CONNIE JO, , ,

Mailing Address P. O. BOX 93

City
FRANKLINState
ILZip Code
62638FEC 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 ▼

720.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	16	2020

Transaction ID : SA11AI.33501

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

C. MORGAN, CONNIE JO, , ,

Mailing Address P. O. BOX 93

City
FRANKLINState
ILZip Code
62638FEC 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 ▼

770.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	08	2020

Transaction ID : SA11AI.34206

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

90.00

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

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

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. MORGAN, CONNIE JO, , ,

Mailing Address P. O. BOX 93

City
FRANKLIN

State
IL

Zip Code
62638

FEC 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 ▼

790.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 16 / 2020

Transaction ID : SA11AI.34498

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

B. MOSER, MARILEEN, , ,

Mailing Address 12129 E. DEL NORTE

City
YUMA

State
AZ

Zip Code
85367

FEC 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 ▼

725.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2020

Transaction ID : SA11AI.33563

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. MOSER, MARILEEN, , ,

Mailing Address 12129 E. DEL NORTE

City
YUMA

State
AZ

Zip Code
85367

FEC 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 ▼

775.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 09 / 2020

Transaction ID : SA11AI.34276

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

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

95.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. MOSER, MARILEEN, , ,

Mailing Address 12129 E. DEL NORTE

City
YUMAState
AZZip Code
85367FEC 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 M / D D D / Y Y Y Y Y Y
11 / 20 / 2020

Transaction ID : SA11AI.34810

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

B. MOUNTCASTLE, MANUELA, , ,

Mailing Address 3250 ONEAL CR. APT C15

City
BOULDERState
COZip Code
80301FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

TALEM HOME CARE

Occupation (for Individual)

CAREGIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 08 / 2020

Transaction ID : SA11AI.34258

Amount of Each Receipt this Period

60.00

☐ Memo Item
CONTRIBUTION

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

C. MULHOLLEN, RONALD, , ,

Mailing Address 6872 LAINE RD

City
HORNEILLState
NYZip Code
14843FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NYSCC

Occupation (for Individual)

CARPENTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 30 / 2020

Transaction ID : SA11AI.33888

Amount of Each Receipt this Period

2.00

☐ Memo Item
CONTRIBUTION

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

87.00

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

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. MULHOLLEN, RONALD, , ,

Mailing Address 6872 LAINE RD

City
HORSELLState
NYZip Code
14843FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NYSCCOccupation (for Individual)
CARPENTER

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
11 / 01 / 2020

Transaction ID : SA11AI.33887

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

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

B. MULLEN, MABLE, , ,

Mailing Address 6160 N RICHMOND

City
WICHITAState
KSZip Code
67204FEC 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 ▼

302.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 19 / 2020

Transaction ID : SA11AI.33506

Amount of Each Receipt this Period

20.20

☐ Memo Item
CONTRIBUTION

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

C. MULLEN, MABLE, , ,

Mailing Address 6160 N RICHMOND

City
WICHITAState
KSZip Code
67204FEC 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 ▼

327.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 28 / 2020

Transaction ID : SA11AI.33975

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

75.20

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

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

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. MULLEN, MABLE, , ,

Mailing Address 6160 N RICHMOND

City
WICHITA

State
KS

Zip Code
67204

FEC 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 ▼

347.20

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 19 / 2020

Transaction ID : SA11AI.34764

Amount of Each Receipt this Period

20.20

☐ Memo Item
CONTRIBUTION

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

B. MUNGER, PAMELA, , ,

Mailing Address 1525 STARDANCE CIRCLE

City
LONGMONT

State
CO

Zip Code
80504

FEC 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 ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 21 / 2020

Transaction ID : SA11AI.33831

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

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

C. MUNGER, PAMELA, , ,

Mailing Address 1525 STARDANCE CIRCLE

City
LONGMONT

State
CO

Zip Code
80504

FEC 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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 30 / 2020

Transaction ID : SA11AI.34008

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

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

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

35.20

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

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

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. MUNGER, PAMELA, , ,

Mailing Address 1525 STARDANCE CIRCLE

City
LONGMONT

State
CO

Zip Code
80504

FEC 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 ▼

225.00

Date of Receipt

11 / 07 / 2020

Transaction ID : SA11AI.34259

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

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

B. MUNGER, PAMELA, , ,

Mailing Address 1525 STARDANCE CIRCLE

City
LONGMONT

State
CO

Zip Code
80504

FEC 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 ▼

230.00

Date of Receipt

11 / 21 / 2020

Transaction ID : SA11AI.34858

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

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

C. MUNYON, RICK, , ,

Mailing Address 1402 JINETE

City
SAN CLEMENTE

State
CA

Zip Code
92673

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COASTLINE

Occupation (for Individual)
LANDSCAPER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

11 / 10 / 2020

Transaction ID : SA11AI.34630

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

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

30.00

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

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. MURKEN, MELANIE, , ,

Mailing Address 5411 SPAATZ AVE

City
ORLANDO

State
FL

Zip Code
32839

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CRACKER BARREL

Occupation (for Individual)
SERVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 20 / 2020

Transaction ID : SA11AI.33700

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

B. MURKEN, MELANIE, , ,

Mailing Address 5411 SPAATZ AVE

City
ORLANDO

State
FL

Zip Code
32839

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CRACKER BARREL

Occupation (for Individual)
SERVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 28 / 2020

Transaction ID : SA11AI.33925

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

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

C. MURKEN, MELANIE, , ,

Mailing Address 5411 SPAATZ AVE

City
ORLANDO

State
FL

Zip Code
32839

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CRACKER BARREL

Occupation (for Individual)
SERVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 20 / 2020

Transaction ID : SA11AI.34714

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

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

55.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

C3 PAC

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

Mailing Address 825 MERLIN TERRACE

City
PENSACOLA

State
FL

Zip Code
32506

FEC 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 ▼

275.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 08 / 2020

Transaction ID : SA11AI.34139

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

Mailing Address 567 W.CHANNEL ISLANDS BLVD.

City
PORT HUENEME

State
CA

Zip Code
93041

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
ATTORNEY

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
10 / 19 / 2020

Transaction ID : SA11AI.33604

Amount of Each Receipt this Period

90.00

☐ Memo Item
CONTRIBUTION

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

Mailing Address 8003 BENAROYA LANE SW A8

City
HUNTSVILLE

State
AL

Zip Code
35802

FEC 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 ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 16 / 2020

Transaction ID : SA11AI.33462

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

140.00

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

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

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. NUNEZ, JANN, , ,

Mailing Address 8003 BENAROYA LANE SW A8

City
HUNTSVILLE

State
AL

Zip Code
35802

FEC 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 ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 16 / 2020

Transaction ID : SA11AI.34444

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

B. ODOM, SUSAN, , ,

Mailing Address 9884 NW 14TH COURT

City

PEMBROKE PINES

State
FL

Zip Code
33024

FEC 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 ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 21 / 2020

Transaction ID : SA11AI.33701

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

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

C. ODOM, SUSAN, , ,

Mailing Address 9884 NW 14TH COURT

City

PEMBROKE PINES

State
FL

Zip Code
33024

FEC 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 ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 21 / 2020

Transaction ID : SA11AI.34715

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

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

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

115.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. OLMSCHIED, PATRICIA, , ,

Mailing Address 6161 FAIRVIEW PL

City
AGOURA HILLS

State
CA

Zip Code
91301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED

Occupation (for Individual)
HORSE TRAINER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

555.00

Date of Receipt

10 / 16 / 2020

Transaction ID : SA11AI.33588

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

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

B. OLMSCHIED, PATRICIA, , ,

Mailing Address 6161 FAIRVIEW PL

City
AGOURA HILLS

State
CA

Zip Code
91301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED

Occupation (for Individual)
HORSE TRAINER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

10 / 18 / 2020

Transaction ID : SA11AI.33587

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

C. OLMSCHIED, PATRICIA, , ,

Mailing Address 6161 FAIRVIEW PL

City
AGOURA HILLS

State
CA

Zip Code
91301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED

Occupation (for Individual)
HORSE TRAINER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

585.00

Date of Receipt

10 / 20 / 2020

Transaction ID : SA11AI.33802

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

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

60.00

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

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. OLMSCHIED, PATRICIA, , ,

Mailing Address 6161 FAIRVIEW PL

City
AGOURA HILLS

State
CA

Zip Code
91301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED

Occupation (for Individual)
HORSE TRAINER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

615.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 16 / 2020

Transaction ID : SA11AI.34609

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

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

B. OLMSCHIED, PATRICIA, , ,

Mailing Address 6161 FAIRVIEW PL

City
AGOURA HILLS

State
CA

Zip Code
91301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED

Occupation (for Individual)
HORSE TRAINER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 18 / 2020

Transaction ID : SA11AI.34828

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

C. OLMSCHIED, PATRICIA, , ,

Mailing Address 6161 FAIRVIEW PL

City
AGOURA HILLS

State
CA

Zip Code
91301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED

Occupation (for Individual)
HORSE TRAINER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

645.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 20 / 2020

Transaction ID : SA11AI.34827

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

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

60.00

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

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. OSMOTHERLY, SANDRA, , ,

Mailing Address 13871 OLD HWY 79

City
OELRICHS

State
SD

Zip Code
57753

FEC 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 ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 10 / 2020

Transaction ID : SA11AI.34197

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

B. OVERLEASE, CHARLES, , ,

Mailing Address 525 COURT STREET

City
RENO

State
NV

Zip Code
89501

FEC 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 ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 22 / 2020

Transaction ID : SA11AI.34818

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

C. OWEN, PHILLIP, , ,

Mailing Address 21 SOUTH RANDOLPH AVENUE

City
KISSIMMEE

State
FL

Zip Code
34741

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
REAL ESTATE DEV

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 24 / 2020

Transaction ID : SA11AI.33708

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

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

65.00

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

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. OWEN, PHILLIP, , ,

Mailing Address 21 SOUTH RANDOLPH AVENUE

City

KISSIMMEE

State

FL

Zip Code

34741

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF

Occupation (for Individual)

REAL ESTATE DEV

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 24 / 2020

Transaction ID : SA11AI.33709

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

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

B. OWEN, PHILLIP, , ,

Mailing Address 21 SOUTH RANDOLPH AVENUE

City

KISSIMMEE

State

FL

Zip Code

34741

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF

Occupation (for Individual)

REAL ESTATE DEV

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 19 / 2020

Transaction ID : SA11AI.34722

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

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

C. OWEN, PHILLIP, , ,

Mailing Address 21 SOUTH RANDOLPH AVENUE

City

KISSIMMEE

State

FL

Zip Code

34741

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF

Occupation (for Individual)

REAL ESTATE DEV

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 19 / 2020

Transaction ID : SA11AI.34723

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

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

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

75.00

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. PARKS, PAUL, , ,

Mailing Address 4230 CAMINO TICINO

City
SAN DIEGO

State
CA

Zip Code
92122

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GENERAL ATOMICS

Occupation (for Individual)
PHYSICIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 16 / 2020

Transaction ID : SA11AI.33596

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

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

B. PARKS, PAUL, , ,

Mailing Address 4230 CAMINO TICINO

City
SAN DIEGO

State
CA

Zip Code
92122

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GENERAL ATOMICS

Occupation (for Individual)
PHYSICIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 08 / 2020

Transaction ID : SA11AI.34301

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

C. PARKS, PAUL, , ,

Mailing Address 4230 CAMINO TICINO

City
SAN DIEGO

State
CA

Zip Code
92122

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GENERAL ATOMICS

Occupation (for Individual)
PHYSICIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1045.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 16 / 2020

Transaction ID : SA11AI.34619

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

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

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

140.00

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

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

FOR LINE NUMBER: PAGE 126 OF 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. PAULOS, BARBARA, , ,

Mailing Address 4760 HIGHLAND DRIVE

City

SALT LAKE CITY

State

UT

Zip Code

84117

FEC 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 ▼

670.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 16 / 2020

Transaction ID : SA11AI.33556

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

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

B. PAULOS, BARBARA, , ,

Mailing Address 4760 HIGHLAND DRIVE

City

SALT LAKE CITY

State

UT

Zip Code

84117

FEC 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 ▼

685.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 17 / 2020

Transaction ID : SA11AI.33555

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

C. PAULOS, BARBARA, , ,

Mailing Address 4760 HIGHLAND DRIVE

City

SALT LAKE CITY

State

UT

Zip Code

84117

FEC 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 ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 22 / 2020

Transaction ID : SA11AI.33786

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

60.00

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. PAULOS, BARBARA, , ,

Mailing Address 4760 HIGHLAND DRIVE

City

SALT LAKE CITY

State

UT

Zip Code

84117

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

710.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 11 / 2020

Transaction ID : SA11AI.34576

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

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

B. PAULOS, BARBARA, , ,

Mailing Address 4760 HIGHLAND DRIVE

City

SALT LAKE CITY

State

UT

Zip Code

84117

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

740.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 16 / 2020

Transaction ID : SA11AI.34575

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

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

C. PAULOS, BARBARA, , ,

Mailing Address 4760 HIGHLAND DRIVE

City

SALT LAKE CITY

State

UT

Zip Code

84117

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

755.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 17 / 2020

Transaction ID : SA11AI.34574

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

55.00

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. PAULOS, BARBARA, , ,

Mailing Address 4760 HIGHLAND DRIVE

City

SALT LAKE CITY

State

UT

Zip Code

84117

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

770.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 22 / 2020

Transaction ID : SA11AI.34805

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

B. PEARCE, BARBARA, , ,

Mailing Address 35SPRINGST

City

QUITMAN

State

AR

Zip Code

72131

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 14 / 2020

Transaction ID : SA11AI.34514

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. PEARL, TAMI, , ,

Mailing Address 1533 DOWNING ST

City

HASLETT

State

MI

Zip Code

48840

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

HOMEMAKER

Occupation (for Individual)

HOMEMAKER

Receipt For:

☐ Primary
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 19 / 2020

Transaction ID : SA11AI.33482

Amount of Each Receipt this Period

60.00

☐ Memo Item
CONTRIBUTION

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

100.00

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

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. PEARL, TAMI, , ,

Mailing Address 1533 DOWNING ST

City
HASLETT

State
MI

Zip Code
48840

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HOMEMAKER

Occupation (for Individual)
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 19 / 2020

Transaction ID : SA11AI.34741

Amount of Each Receipt this Period

60.00

☐ Memo Item
CONTRIBUTION

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

B. PEARSON, BETSY, , ,

Mailing Address 43623 132ND STREET

City
WEBSTER

State
SD

Zip Code
57274

FEC 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 ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 15 / 2020

Transaction ID : SA11AI.33494

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

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

C. PEARSON, BETSY, , ,

Mailing Address 43623 132ND STREET

City
WEBSTER

State
SD

Zip Code
57274

FEC 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 ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 15 / 2020

Transaction ID : SA11AI.34487

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

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

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

150.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. PERRATTO, BONNIE, , ,

Mailing Address 34745 CATAMARAN LANE

City
LEWES

State
DE

Zip Code
19958

FEC 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 ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 25 / 2020

Transaction ID : SA11AI.33674

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

B. PETERS, GARY, , ,

Mailing Address 305 ROOSEVELT BLVD

City
VILLAS

State
NJ

Zip Code
08251

FEC 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 ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 01 / 2020

Transaction ID : SA11AI.33873

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. PETERS, THEODORA, , ,

Mailing Address 2112 INTHEPINES

City
DUNGANNON

State
VA

Zip Code
25245

FEC 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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 05 / 2020

Transaction ID : SA11AI.34116

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

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

65.00

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)

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. PETERSON, LUANN, , ,

Mailing Address 1112 FALLS BRIDGE DRIVE

City
RALEIGH

State
NC

Zip Code
27614

FEC 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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 19 / 2020

Transaction ID : SA11AI.33423

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

B. PHILLIPS, PAULA, , ,

Mailing Address P O BOX 339

City
NUEVO

State
CA

Zip Code
92567

FEC 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 ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 21 / 2020

Transaction ID : SA11AI.33812

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

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

C. PHILLIPS, PAULA, , ,

Mailing Address P O BOX 339

City
NUEVO

State
CA

Zip Code
92567

FEC 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 ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 21 / 2020

Transaction ID : SA11AI.34837

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

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

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

115.00

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

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

FOR LINE NUMBER: PAGE 132 OF 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. PHILLIPS, ROY, , ,

Mailing Address 3670 CLAIREMONT DR., STE.7

City
SAN DIEGO

State
CA

Zip Code
92117

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
PODIATRIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.20

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 11 / 2020

Transaction ID : SA11AI.34618

Amount of Each Receipt this Period

20.20

☐ Memo Item
CONTRIBUTION

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

B. PIERRE, JEAN, , ,

Mailing Address 805 GLYNN ST S STE 127 #150

City
FAYETTEVILLE

State
GA

Zip Code
30214

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
ENTREPRENEUR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 14 / 2020

Transaction ID : SA11AI.34409

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. PITCHER, SHIRLEY, , ,

Mailing Address 8145 ELIZABETH LANE

City
LA PLATA

State
MD

Zip Code
20646

FEC 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 ▼

775.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 19 / 2020

Transaction ID : SA11AI.33410

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

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

95.20

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)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. PITCHER, SHIRLEY, , ,

Mailing Address 8145 ELIZABETH LANE

City
LA PLATA

State
MD

Zip Code
20646

FEC 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 ▼

790.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 27 / 2020

Transaction ID : SA11AI.33677

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

B. PITCHER, SHIRLEY, , ,

Mailing Address 8145 ELIZABETH LANE

City
LA PLATA

State
MD

Zip Code
20646

FEC 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 ▼

840.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 19 / 2020

Transaction ID : SA11AI.34688

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

C. PLACE, EDYTHE, , ,

Mailing Address 1 SAWYER LANE

City
SALISBURY

State
MA

Zip Code
01952

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ARENT FOX

Occupation (for Individual)
PARALEGAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 16 / 2020

Transaction ID : SA11AI.33378

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

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

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

75.00

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

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. PLACE, EDYTHE, , ,

Mailing Address 1 SAWYER LANE

City
SALISBURY

State
MA

Zip Code
01952

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ARENT FOX

Occupation (for Individual)
PARALEGAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 17 / 2020

Transaction ID : SA11AI.33377

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

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

B. PLACE, EDYTHE, , ,

Mailing Address 1 SAWYER LANE

City
SALISBURY

State
MA

Zip Code
01952

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ARENT FOX

Occupation (for Individual)
PARALEGAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 25 / 2020

Transaction ID : SA11AI.33648

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

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

C. PLACE, EDYTHE, , ,

Mailing Address 1 SAWYER LANE

City
SALISBURY

State
MA

Zip Code
01952

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ARENT FOX

Occupation (for Individual)
PARALEGAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 16 / 2020

Transaction ID : SA11AI.34353

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

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

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

25.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. PLACE, EDYTHE, , ,

Mailing Address 1 SAWYER LANE

City
SALISBURYState
MAZip Code
01952FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ARENT FOXOccupation (for Individual)
PARALEGAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 17 / 2020

Transaction ID : SA11AI.34352

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

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

B. POSKITT, MARILYN, , ,

Mailing Address 33 BERTRAND ISLAND RD

City
MOUNT ARLINGTONState
NJZip Code
07856FEC 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 ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 22 / 2020

Transaction ID : SA11AI.33656

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

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

C. POTIGNANO, CINDY, , ,

Mailing Address 16540 E GUNSIGHT DRIVE UNIT 2003

City
PHOENIXState
AZZip Code
85268FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SOUTHWEST SKIN SPECIALISTSOccupation (for Individual)
OFFICE MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

770.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 15 / 2020

Transaction ID : SA11AI.33561

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

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

65.00

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

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. POTIGNANO, CINDY, , ,

Mailing Address 16540 E GUNSIGHT DRIVE UNIT 2003

City
PHOENIX

State
AZ

Zip Code
85268

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SOUTHWEST SKIN SPECIALISTS

Occupation (for Individual)
OFFICE MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

795.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 19 / 2020

Transaction ID : SA11AI.33559

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

B. POTIGNANO, CINDY, , ,

Mailing Address 16540 E GUNSIGHT DRIVE UNIT 2003

City
PHOENIX

State
AZ

Zip Code
85268

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SOUTHWEST SKIN SPECIALISTS

Occupation (for Individual)
OFFICE MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

810.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 22 / 2020

Transaction ID : SA11AI.33787

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

C. POTIGNANO, CINDY, , ,

Mailing Address 16540 E GUNSIGHT DRIVE UNIT 2003

City
PHOENIX

State
AZ

Zip Code
85268

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SOUTHWEST SKIN SPECIALISTS

Occupation (for Individual)
OFFICE MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 28 / 2020

Transaction ID : SA11AI.34013

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

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

60.00

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

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. POTIGNANO, CINDY, , ,

Mailing Address 16540 E GUNSIGHT DRIVE UNIT 2003

City
PHOENIX

State
AZ

Zip Code
85268

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SOUTHWEST SKIN SPECIALISTS

Occupation (for Individual)
OFFICE MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 15 / 2020

Transaction ID : SA11AI.34584

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

B. POTIGNANO, CINDY, , ,

Mailing Address 16540 E GUNSIGHT DRIVE UNIT 2003

City
PHOENIX

State
AZ

Zip Code
85268

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SOUTHWEST SKIN SPECIALISTS

Occupation (for Individual)
OFFICE MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

875.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 19 / 2020

Transaction ID : SA11AI.34808

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. POTIGNANO, CINDY, , ,

Mailing Address 16540 E GUNSIGHT DRIVE UNIT 2003

City
PHOENIX

State
AZ

Zip Code
85268

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SOUTHWEST SKIN SPECIALISTS

Occupation (for Individual)
OFFICE MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

890.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 22 / 2020

Transaction ID : SA11AI.34807

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

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

60.00

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

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. PRICE, BRENT, , ,

Mailing Address 5634 LANDRUM DRIVE

City
OOLTEWAH

State
TN

Zip Code
37363

FEC 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 ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 13 / 2020

Transaction ID : SA11AI.34451

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

B. PRUNTY, JESSE, , ,

Mailing Address 3634 LAKESIDE DRIVE

City
SHREVEPORT

State
LA

Zip Code
71119

FEC 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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 21 / 2020

Transaction ID : SA11AI.34766

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

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

C. PULLEY, VIKKI, , ,

Mailing Address 22445 JOE MAY RD

City
DENHAM SPRINGS

State
LA

Zip Code
70726

FEC 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 ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 29 / 2020

Transaction ID : SA11AI.33981

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

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

75.00

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

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

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. QUAST, LINDA, , ,

Mailing Address 24 W CAMELBACK RD #A557

City
PHOENIX

State
AZ

Zip Code
85013

FEC 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 ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 13 / 2020

Transaction ID : SA11AI.34578

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

B. QUINN, WAYNE, , ,

Mailing Address 9706 HOLLOWOOD COURT

City
ELLICOTT CITY

State
MD

Zip Code
21042

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ORTHODONTIC ASSOCIATES

Occupation (for Individual)
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 17 / 2020

Transaction ID : SA11AI.33412

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

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

C. QUINN, WAYNE, , ,

Mailing Address 9706 HOLLOWOOD COURT

City
ELLICOTT CITY

State
MD

Zip Code
21042

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ORTHODONTIC ASSOCIATES

Occupation (for Individual)
MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 17 / 2020

Transaction ID : SA11AI.34385

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

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

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

75.00

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

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. REAVES, GERELYN, , ,

Mailing Address 1424 ROYAL MEADOWS TRL

City
FORT WORTH

State
TX

Zip Code
76140

FEC 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 ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 21 / 2020

Transaction ID : SA11AI.33757

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

B. REAVES, GERELYN, , ,

Mailing Address 1424 ROYAL MEADOWS TRL

City
FORT WORTH

State
TX

Zip Code
76140

FEC 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 ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 28 / 2020

Transaction ID : SA11AI.33996

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

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

C. REAVES, GERELYN, , ,

Mailing Address 1424 ROYAL MEADOWS TRL

City
FORT WORTH

State
TX

Zip Code
76140

FEC 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 ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 21 / 2020

Transaction ID : SA11AI.34776

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

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

40.00

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

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for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

C3 PAC

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

A. REHRER, RICHARD, , ,

Mailing Address 6501 17TH AVE. W.

City
BRADENTON

State
FL

Zip Code
34209

FEC 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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 17 / 2020

Transaction ID : SA11AI.33456

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

B. REHRER, RICHARD, , ,

Mailing Address 6501 17TH AVE. W.

City
BRADENTON

State
FL

Zip Code
34209

FEC 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 ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 17 / 2020

Transaction ID : SA11AI.34436

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

C. RENKEY, MEL, , ,

Mailing Address 2004 LADYBANK DR

City
MYRTLE BEACH

State
SC

Zip Code
29575

FEC 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 ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 22 / 2020

Transaction ID : SA11AI.33691

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

65.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

C3 PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RENKEY, MEL, , ,

Mailing Address 2004 LADYBANK DR

City
MYRTLE BEACH

State
SC

Zip Code
29575

FEC 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 ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 30 / 2020

Transaction ID : SA11AI.33907

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RENKEY, MEL, , ,

Mailing Address 2004 LADYBANK DR

City
MYRTLE BEACH

State
SC

Zip Code
29575

FEC 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 ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 22 / 2020

Transaction ID : SA11AI.34704

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RESCINITI, RICHARD, , ,

Mailing Address 2761 TAFT ST APT 211

City
HOLLYWOOD

State
FL

Zip Code
33020

FEC 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 ▼

752.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 28 / 2020

Transaction ID : SA11AI.33926

Amount of Each Receipt this Period

20.20

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

50.20

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

C3 PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RESCINITI, RICHARD, , ,

Mailing Address 2761 TAFT ST APT 211

City
HOLLYWOOD

State
FL

Zip Code
33020

FEC 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 ▼

777.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 10 / 2020

Transaction ID : SA11AI.34144

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. REVUTSKY, MARIA, , ,

Mailing Address 5988 SOUTH STREET ROAD

City
AUBURN

State
NY

Zip Code
13021

FEC 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 ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 27 / 2020

Transaction ID : SA11AI.33666

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. REVUTSKY, MARIA, , ,

Mailing Address 5988 SOUTH STREET ROAD

City
AUBURN

State
NY

Zip Code
13021

FEC 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 ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 28 / 2020

Transaction ID : SA11AI.33885

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

C3 PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ROBBINS, GARY, , ,

Mailing Address 749 SUMMIT AVE N

City
HUDSON

State
WI

Zip Code
54016

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PEACE OF MIND DAYCARE

Occupation (for Individual)
CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 08 / 2020

Transaction ID : SA11AI.34187

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROCK, RON, , ,

Mailing Address E. 1593 POLSTON AVE.

City
POST FALLS

State
ID

Zip Code
83854

FEC 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
10 / 16 / 2020

Transaction ID : SA11AI.33553

Amount of Each Receipt this Period

80.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROCK, RON, , ,

Mailing Address E. 1593 POLSTON AVE.

City
POST FALLS

State
ID

Zip Code
83854

FEC 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 ▼

880.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 16 / 2020

Transaction ID : SA11AI.34572

Amount of Each Receipt this Period

80.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

190.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

C3 PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ROSZMAN, KEITH, , ,

Mailing Address 9235 OLD STATE RD

City
MORRICE

State
MI

Zip Code
48857

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CLEVELAND INTEGRITY

Occupation (for Individual)
I & E INSPECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 06 / 2020

Transaction ID : SA11AI.34183

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RUBIO, NAOMI, , ,

Mailing Address 9495 FARM TO MARKET ROAD 1385

City
PILOT POINT

State
TX

Zip Code
76258

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FRISCO ISD

Occupation (for Individual)
SCHOOL BUS MONITOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 16 / 2020

Transaction ID : SA11AI.33530

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RUBIO, NAOMI, , ,

Mailing Address 9495 FARM TO MARKET ROAD 1385

City
PILOT POINT

State
TX

Zip Code
76258

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FRISCO ISD

Occupation (for Individual)
SCHOOL BUS MONITOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 13 / 2020

Transaction ID : SA11AI.34537

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

65.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

C3 PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RUBIO, NAOMI, , ,

Mailing Address 9495 FARM TO MARKET ROAD 1385

City
PILOT POINT

State
TX

Zip Code
76258

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FRISCO ISD

Occupation (for Individual)
SCHOOL BUS MONITOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 16 / 2020

Transaction ID : SA11AI.34536

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SALAZAR, ORLANDO, , ,

Mailing Address 4445 ARCADE AVE

City
DALLAS

State
TX

Zip Code
75205

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
JLO PROPERTIES

Occupation (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 Y
10 / 30 / 2020

Transaction ID : SA11AI.33857

Amount of Each Receipt this Period

5000.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SAMSON, ANTONIO, , ,

Mailing Address 12417 SPROUL STREET

City
NORWALK

State
CA

Zip Code
90650

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
KAISER PERMANENTE HOSPITAL

Occupation (for Individual)
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 16 / 2020

Transaction ID : SA11AI.33583

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5050.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

C3 PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SAMSON, ANTONIO, , ,

Mailing Address 12417 SPROUL STREET

City
NORWALK

State
CA

Zip Code
90650

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
KAISER PERMANENTE HOSPITAL

Occupation (for Individual)
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 16 / 2020

Transaction ID : SA11AI.34607

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SANDERSON, ELENA, , ,

Mailing Address 3 PALENCIA COURT

City

AMERICAN CANYON

State

CA

Zip Code

94503

FEC 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 ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2020

Transaction ID : SA11AI.34314

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCHEUTZOW, JACK, , ,

Mailing Address 9585 TANAGER DR

City

CHARDON

State

OH

Zip Code

44024

FEC 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 ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 29 / 2020

Transaction ID : SA11AI.33950

Amount of Each Receipt this Period

60.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

C3 PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SCHLEIFFARTH, KAREN, , ,

Mailing Address 1232 DUTCH FIELDS PARKWAY

City
MIDWAY

State
UT

Zip Code
84049

FEC 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 ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 29 / 2020

Transaction ID : SA11AI.34010

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCHLEIFFARTH, KAREN, , ,

Mailing Address 1232 DUTCH FIELDS PARKWAY

City
MIDWAY

State
UT

Zip Code
84049

FEC 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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 07 / 2020

Transaction ID : SA11AI.34270

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCOTT, SUSAN, , ,

Mailing Address 547 PARK PLACE CT

City
FORSYTH

State
IL

Zip Code
62535

FEC 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 ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 07 / 2020

Transaction ID : SA11AI.34205

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

C3 PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SEANEY, SHEILA, , ,

Mailing Address 877 HOLTON WHITEHALL ROAD

City
WHITEHALL

State
MI

Zip Code
49461

FEC 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 ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 08 / 2020

Transaction ID : SA11AI.34184

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SEGO UP, STEVEN, , ,

Mailing Address 3416 LAKEWOOD ROAD

City
TOMAHAWK

State
WI

Zip Code
54487

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
K&D

Occupation (for Individual)
TRUCKING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 22 / 2020

Transaction ID : SA11AI.33731

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SELLERS, BRETT, , ,

Mailing Address 30594 LEE'S CHICKEN LANE

City
MILLSBORO

State
DE

Zip Code
19966

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MOUNTAIRE

Occupation (for Individual)
FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 16 / 2020

Transaction ID : SA11AI.33407

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

C3 PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SELLERS, BRETT, , ,

Mailing Address 30594 LEE'S CHICKEN LANE

City
MILLSBORO

State
DE

Zip Code
19966

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MOUNTAIRE

Occupation (for Individual)
FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 21 / 2020

Transaction ID : SA11AI.33675

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SELLERS, BRETT, , ,

Mailing Address 30594 LEE'S CHICKEN LANE

City
MILLSBORO

State
DE

Zip Code
19966

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MOUNTAIRE

Occupation (for Individual)
FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 08 / 2020

Transaction ID : SA11AI.34108

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SELLERS, BRETT, , ,

Mailing Address 30594 LEE'S CHICKEN LANE

City
MILLSBORO

State
DE

Zip Code
19966

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MOUNTAIRE

Occupation (for Individual)
FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 16 / 2020

Transaction ID : SA11AI.34382

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

40.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

C3 PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SELLERS, BRETT, , ,

Mailing Address 30594 LEE'S CHICKEN LANE

City
MILLSBORO

State
DE

Zip Code
19966

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MOUNTAIRE

Occupation (for Individual)
FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 21 / 2020

Transaction ID : SA11AI.34685

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SHAUGHNESSEY, ROBERT, , ,

Mailing Address 15 ADAMS AV

City
PEMBROKE

State
MA

Zip Code
02359

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MEDFORD WELLINGTON

Occupation (for Individual)
HVAC TECH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 29 / 2020

Transaction ID : SA11AI.33864

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SHAW, JANET, , ,

Mailing Address 3207 WYNDMERE DRIVE

City
RICHARDSON

State
TX

Zip Code
75082

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
REAVIS REALTY LLC

Occupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 09 / 2020

Transaction ID : SA11AI.34231

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

65.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

C3 PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SHELNUTT, BETTY, , ,

Mailing Address 404 TOWER CENTER DR

City
LAGRANGE

State
GA

Zip Code
30241

FEC 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 ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 27 / 2020

Transaction ID : SA11AI.33693

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SHOCKLEY, LOIS, , ,

Mailing Address 7733 LOUIS PASTEUR DRIVE APT 341

City
SAN ANTONIO

State
TX

Zip Code
78229

FEC 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 ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 10 / 2020

Transaction ID : SA11AI.34247

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SHOCKLEY, LOIS, , ,

Mailing Address 7733 LOUIS PASTEUR DRIVE APT 341

City
SAN ANTONIO

State
TX

Zip Code
78229

FEC 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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 22 / 2020

Transaction ID : SA11AI.34792

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SHTOCK, RACHEL, , ,

Mailing Address 2501 EAST 29 STREET

City
BROOKLYN

State
NY

Zip Code
11235

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED

Occupation (for Individual)
CHILD CARE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 18 / 2020

Transaction ID : SA11AI.34675

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SKINNER, THOMAS, , ,

Mailing Address 10075 NAVAJO CREST DR.

City
RENO

State
NV

Zip Code
89506

FEC 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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 16 / 2020

Transaction ID : SA11AI.33570

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SKINNER, THOMAS, , ,

Mailing Address 10075 NAVAJO CREST DR.

City
RENO

State
NV

Zip Code
89506

FEC 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 ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 16 / 2020

Transaction ID : SA11AI.34604

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

70.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SLOWINSKI, MICHELE, , ,

Mailing Address 989 CAMELOT DR

City
CRYSTAL LAKE

State
IL

Zip Code
60014

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CRS GROUP

Occupation (for Individual)
PROJECT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 19 / 2020

Transaction ID : SA11AI.33496

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SLOWINSKI, MICHELE, , ,

Mailing Address 989 CAMELOT DR

City
CRYSTAL LAKE

State
IL

Zip Code
60014

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CRS GROUP

Occupation (for Individual)
PROJECT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 19 / 2020

Transaction ID : SA11AI.34750

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SMALL, BEVERLY, , ,

Mailing Address 409 WEST TYNE DR

City
NASHVILLE

State
TN

Zip Code
37205

FEC 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 ▼

604.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 15 / 2020

Transaction ID : SA11AI.33466

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

70.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SMALL, BEVERLY, , ,

Mailing Address 409 WEST TYNE DR

City
NASHVILLE

State
TN

Zip Code
37205

FEC 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 ▼

644.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 03 / 2020

Transaction ID : SA11AI.34156

Amount of Each Receipt this Period

40.40

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SMALL, BEVERLY, , ,

Mailing Address 409 WEST TYNE DR

City
NASHVILLE

State
TN

Zip Code
37205

FEC 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 ▼

664.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2020

Transaction ID : SA11AI.34449

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SMELGUS, JIM, , ,

Mailing Address 104 SUNRISE BLUFF CT

City
SMITHFIELD

State
VA

Zip Code
23430

FEC 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 ▼

450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 29 / 2020

Transaction ID : SA11AI.33900

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

105.40

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

C3 PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SMITH, JOHN, , ,

Mailing Address 180 FALCONI WAY

City
HOLLISTER

State
CA

Zip Code
95023

FEC 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 ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 14 / 2020

Transaction ID : SA11AI.34641

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SMITH, MONA, , ,

Mailing Address 21071 BLUEGRASS CIRCLE

City
FLINT

State
TX

Zip Code
75762

FEC 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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 19 / 2020

Transaction ID : SA11AI.33524

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SMITH, MONA, , ,

Mailing Address 21071 BLUEGRASS CIRCLE

City
FLINT

State
TX

Zip Code
75762

FEC 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 ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 19 / 2020

Transaction ID : SA11AI.34773

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
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NAME OF COMMITTEE (In Full)

C3 PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SMITH, PATRICIA, , ,

Mailing Address 17130 MCRAE ROAD NORTHWEST

City
ARLINGTON

State
WA

Zip Code
98223

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED

Occupation (for Individual)
FOOD SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2020

Transaction ID : SA11AI.34338

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SMITH, PATRICIA, , ,

Mailing Address 17130 MCRAE ROAD NORTHWEST

City
ARLINGTON

State
WA

Zip Code
98223

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED

Occupation (for Individual)
FOOD SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2020

Transaction ID : SA11AI.34339

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SMITH, WILLIAM, , ,

Mailing Address 206 N HARVEST LANE

City
FLORENCE

State
SC

Zip Code
29501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EVOLUTION OF SC INC

Occupation (for Individual)
HAIRSTYLIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 07 / 2020

Transaction ID : SA11AI.34124

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

180.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

C3 PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SNYDER, DELORES, , ,

Mailing Address 5644 LONDON GROVEPORT RD

City
ORIENT

State
OH

Zip Code
43146

FEC 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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 15 / 2020

Transaction ID : SA11AI.34459

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SOCKO, FRANCIS, , ,

Mailing Address 8531 RADFORD AVENUE

City

ALEXANDRIA

State

VA

Zip Code

22309

FEC 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 ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 16 / 2020

Transaction ID : SA11AI.33419

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SOCKO, FRANCIS, , ,

Mailing Address 8531 RADFORD AVENUE

City

ALEXANDRIA

State

VA

Zip Code

22309

FEC 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 ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 16 / 2020

Transaction ID : SA11AI.34392

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

C3 PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SONG, WILLIAM, , ,

Mailing Address 1156 LAS LOMAS DRIVE

City
LA HABRA

State
CA

Zip Code
90631

FEC 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 ▼

5190.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 15 / 2020

Transaction ID : SA11AI.33581

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SONG, WILLIAM, , ,

Mailing Address 1156 LAS LOMAS DRIVE

City
LA HABRA

State
CA

Zip Code
90631

FEC 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 ▼

5240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 15 / 2020

Transaction ID : SA11AI.33582

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SONG, WILLIAM, , ,

Mailing Address 1156 LAS LOMAS DRIVE

City
LA HABRA

State
CA

Zip Code
90631

FEC 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 ▼

5245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 16 / 2020

Transaction ID : SA11AI.33580

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

C3 PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SONG, WILLIAM, , ,

Mailing Address 1156 LAS LOMAS DRIVE

City
LA HABRA

State
CA

Zip Code
90631

FEC 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 ▼

5320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 17 / 2020

Transaction ID : SA11AI.33578

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SONG, WILLIAM, , ,

Mailing Address 1156 LAS LOMAS DRIVE

City
LA HABRA

State
CA

Zip Code
90631

FEC 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 ▼

5420.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 17 / 2020

Transaction ID : SA11AI.33579

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SONG, WILLIAM, , ,

Mailing Address 1156 LAS LOMAS DRIVE

City
LA HABRA

State
CA

Zip Code
90631

FEC 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 ▼

5470.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 18 / 2020

Transaction ID : SA11AI.33576

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

225.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

C3 PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SONG, WILLIAM, , ,

Mailing Address 1156 LAS LOMAS DRIVE

City
LA HABRA

State
CA

Zip Code
90631

FEC 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 ▼

5520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 18 / 2020

Transaction ID : SA11AI.33577

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SONG, WILLIAM, , ,

Mailing Address 1156 LAS LOMAS DRIVE

City
LA HABRA

State
CA

Zip Code
90631

FEC 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 ▼

5570.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 19 / 2020

Transaction ID : SA11AI.33575

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SONG, WILLIAM, , ,

Mailing Address 1156 LAS LOMAS DRIVE

City
LA HABRA

State
CA

Zip Code
90631

FEC 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 ▼

5615.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 29 / 2020

Transaction ID : SA11AI.34028

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

145.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

C3 PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SONG, WILLIAM, , ,

Mailing Address 1156 LAS LOMAS DRIVE

City
LA HABRA

State
CA

Zip Code
90631

FEC 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 ▼

5715.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2020

Transaction ID : SA11AI.34293

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SONG, WILLIAM, , ,

Mailing Address 1156 LAS LOMAS DRIVE

City
LA HABRA

State
CA

Zip Code
90631

FEC 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 ▼

5718.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 06 / 2020

Transaction ID : SA11AI.34292

Amount of Each Receipt this Period

3.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SONG, WILLIAM, , ,

Mailing Address 1156 LAS LOMAS DRIVE

City
LA HABRA

State
CA

Zip Code
90631

FEC 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 ▼

5743.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 09 / 2020

Transaction ID : SA11AI.34291

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

128.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

C3 PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SONG, WILLIAM, , ,

Mailing Address 1156 LAS LOMAS DRIVE

City
LA HABRA

State
CA

Zip Code
90631

FEC 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 ▼

5748.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 12 / 2020

Transaction ID : SA11AI.34606

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SONG, WILLIAM, , ,

Mailing Address 1156 LAS LOMAS DRIVE

City
LA HABRA

State
CA

Zip Code
90631

FEC 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 ▼

5823.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 22 / 2020

Transaction ID : SA11AI.34825

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SONG, WILLIAM, , ,

Mailing Address 1156 LAS LOMAS DRIVE

City
LA HABRA

State
CA

Zip Code
90631

FEC 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 ▼

5873.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 23 / 2020

Transaction ID : SA11AI.34824

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

130.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

C3 PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STAFFORD, ANN, , ,

Mailing Address 200 MESQUITE DR

City
BRANSON

State
MO

Zip Code
65616

FEC 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 ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 16 / 2020

Transaction ID : SA11AI.34507

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STEINBERG, DAVID, , ,

Mailing Address 7050 E CALLE TOLOSA

City
TUCSON

State
AZ

Zip Code
85750

FEC 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 ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 16 / 2020

Transaction ID : SA11AI.33566

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STEINBERG, DAVID, , ,

Mailing Address 7050 E CALLE TOLOSA

City
TUCSON

State
AZ

Zip Code
85750

FEC 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 ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 16 / 2020

Transaction ID : SA11AI.34594

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

C3 PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STEPNOWSKI, KRISTINE, , ,

Mailing Address 25 HIGHLAND LANE

City
CHAGRIN FALLS

State
OH

Zip Code
44022

FEC 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 ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 21 / 2020

Transaction ID : SA11AI.33721

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STEPNOWSKI, KRISTINE, , ,

Mailing Address 25 HIGHLAND LANE

City
CHAGRIN FALLS

State
OH

Zip Code
44022

FEC 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 ▼

335.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 27 / 2020

Transaction ID : SA11AI.33720

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STEPNOWSKI, KRISTINE, , ,

Mailing Address 25 HIGHLAND LANE

City
CHAGRIN FALLS

State
OH

Zip Code
44022

FEC 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 ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 21 / 2020

Transaction ID : SA11AI.34732

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

C3 PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STEWART, SHERYL, , ,

Mailing Address 2609 HILLSHIRE DR.

City
DEER PARK

State
TX

Zip Code
77536

FEC 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 ▼

202.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 24 / 2020

Transaction ID : SA11AI.33765

Amount of Each Receipt this Period

20.20

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STOKES, CHARLES, , ,

Mailing Address 76 CHAFFEE RD N

City
JAX

State
FL

Zip Code
32220

FEC 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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 15 / 2020

Transaction ID : SA11AI.34418

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STRAIGHT, SANDY, , ,

Mailing Address 3218 NORTH THOMPSON STREET

City
SPRINGDALE

State
AR

Zip Code
72764

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STRAIGHTS LAWN & GARDEN

Occupation (for Individual)
BUINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

590.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 09 / 2020

Transaction ID : SA11AI.34219

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

65.20

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

C3 PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STRAIGHT, SANDY, , ,

Mailing Address 3218 NORTH THOMPSON STREET

City
SPRINGDALE

State
AR

Zip Code
72764

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STRAIGHTS LAWN & GARDEN

Occupation (for Individual)
BUINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

620.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 10 / 2020

Transaction ID : SA11AI.34518

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SULLIVAN, PATRICIA, , ,

Mailing Address 550 SMALL CEDAR DRIVE

City
LEAGUE CITY

State
TX

Zip Code
77573

FEC 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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 15 / 2020

Transaction ID : SA11AI.34546

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SUPULSKI, TED, , ,

Mailing Address 2483 YOUNGERS CREEK RD

City
ELIZABETHTOWN

State
KY

Zip Code
42701

FEC 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 ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 21 / 2020

Transaction ID : SA11AI.33718

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

C3 PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SUPULSKI, TED, , ,

Mailing Address 2483 YOUNGERS CREEK RD

City

ELIZABETHTOWN

State

KY

Zip Code

42701

FEC 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 ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 21 / 2020

Transaction ID : SA11AI.34730

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SURACI, FRANK, , ,

Mailing Address 13505 SIERRA RD

City

VICTORVILLE

State

CA

Zip Code

92392

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
IN HOME SUPPORTIVE SERVICES

Occupation (for Individual)

CARETAKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 10 / 2020

Transaction ID : SA11AI.34308

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SUTPHIN, LORRAINE, , ,

Mailing Address 33 4TH ST

City

FRENCHTOWN

State

NJ

Zip Code

08825

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

DHMC

Occupation (for Individual)

APRN

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 18 / 2020

Transaction ID : SA11AI.33380

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

C3 PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SUTPHIN, LORRAINE, , ,

Mailing Address 33 4TH ST

City
FRENCHTOWNState
NJZip Code
08825FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DHMCOccupation (for Individual)
APRN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 18 / 2020

Transaction ID : SA11AI.34663

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SVOR, ROXANN, , ,

Mailing Address 14618 PRAIRIE DRIVE

City
LITTLE FALLSState
MNZip Code
56345FEC 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 ▼

215.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 27 / 2020

Transaction ID : SA11AI.33734

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SVOR, ROXANN, , ,

Mailing Address 14618 PRAIRIE DRIVE

City
LITTLE FALLSState
MNZip Code
56345FEC 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 ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2020

Transaction ID : SA11AI.33967

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

40.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

C3 PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SVOR, ROXANN, , ,

Mailing Address 14618 PRAIRIE DRIVE

City
LITTLE FALLS

State
MN

Zip Code
56345

FEC 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 ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 01 / 2020

Transaction ID : SA11AI.33966

Amount of Each Receipt this Period

5.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SWANSON, LOUISE, , ,

Mailing Address 1030 WINDSOR DRIVE

City
THOUSAND OAKS

State
CA

Zip Code
91360

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PACIFIC EDGE MARKETING GROUP

Occupation (for Individual)
ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 10 / 2020

Transaction ID : SA11AI.34611

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SYKES, DOUG, , ,

Mailing Address 716 4 TH STREET

City
NEW MARTINSVILLE

State
WV

Zip Code
26155

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GRYPHON

Occupation (for Individual)
SAFETY REP, OIL AND GAS

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

725.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 07 / 2020

Transaction ID : SA11AI.34119

Amount of Each Receipt this Period

60.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

95.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

C3 PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TEEL, BONNIE, , ,

Mailing Address 270 MYERS ST S

City
SALEM

State
OR

Zip Code
97302

FEC 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 ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 20 / 2020

Transaction ID : SA11AI.33830

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TEEL, BONNIE, , ,

Mailing Address 270 MYERS ST S

City
SALEM

State
OR

Zip Code
97302

FEC 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 ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 05 / 2020

Transaction ID : SA11AI.34331

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TEEL, BONNIE, , ,

Mailing Address 270 MYERS ST S

City
SALEM

State
OR

Zip Code
97302

FEC 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 ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 20 / 2020

Transaction ID : SA11AI.34856

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

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 172 OF 199
(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
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NAME OF COMMITTEE (In Full)

C3 PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TEXTER, GUY, , ,

Mailing Address 5428 STARLING DR

City
JURUPA VALLEYState
CAZip Code
91752FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
VETERANS HOSPITALOccupation (for Individual)
SCIENTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M	D D	Y Y Y Y Y Y
10	28	2020

Transaction ID : SA11AI.34033

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. THERIOT, PATRICIA, , ,

Mailing Address 737 EAST A STREET

City
OAKDALEState
CAZip Code
95361FEC 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 ▼

275.00

Date of Receipt

M M	D D	Y Y Y Y Y Y
11	03	2020

Transaction ID : SA11AI.34320

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. THOMPSON, DONALD, , ,

Mailing Address 2561 STEESE HWY

City
FAIRBANKSState
AKZip Code
99712FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
KINROSSOccupation (for Individual)
TEMP DISABLED MECHANIC

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M	D D	Y Y Y Y Y Y
11	06	2020

Transaction ID : SA11AI.34345

Amount of Each Receipt this Period

60.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

110.00

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 Page

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(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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

C3 PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. THOMPSON, KENNETH, , ,

Mailing Address 3924 JONES ROAD

City
MACONState
GAZip Code
31216FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CITY OF WARNER ROBINSOccupation (for Individual)
BUILDING OFFICIAL

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
10	/	24	/	2020

Transaction ID : SA11AI.33695

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. THREADGILL, DANIEL, , ,

Mailing Address 2690 N. FM 2980

City
YORKTOWNState
TXZip Code
78164FEC 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 ▼

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	10	/	2020

Transaction ID : SA11AI.34246

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TIPPS, KRISTIN, , ,

Mailing Address 26251 MCCALL BLVD

City
SUN CITYState
CAZip Code
92586FEC 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 ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2020

Transaction ID : SA11AI.34038

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION
SUBTOTAL of Receipts This Page (optional)..... ►

95.00

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 174 OF 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TOW, JAMES, , ,

Mailing Address 8210 CALLE CALZADA

City

SAN DIEGO

State

CA

Zip Code

92126

FEC 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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 17 / 2020

Transaction ID : SA11AI.33597

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TRACHSEL, THOMAS, , ,

Mailing Address 910 COUNCIL ROCK DRIVE

City

SOUTH LAKE TAHOE

State

CA

Zip Code

96150

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

ALPINE CARPET ONE

Occupation (for Individual)

SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 09 / 2020

Transaction ID : SA11AI.34326

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TRAN, DUNG, , ,

Mailing Address 7142 PARK STREET APTA

City

WESTMINSTER

State

CA

Zip Code

92683

FEC 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 Y
11 / 13 / 2020

Transaction ID : SA11AI.34631

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

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NAME OF COMMITTEE (In Full)

C3 PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. URBAN, JOE, , ,

Mailing Address 3616 ELIOT LANE

City
NAPERVILLE

State
IL

Zip Code
60564

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NOKIA

Occupation (for Individual)
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 19 / 2020

Transaction ID : SA11AI.33499

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. URBAN, JOE, , ,

Mailing Address 3616 ELIOT LANE

City
NAPERVILLE

State
IL

Zip Code
60564

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NOKIA

Occupation (for Individual)
ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 19 / 2020

Transaction ID : SA11AI.34754

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VANCINA, SIMON, , ,

Mailing Address 167 COTTONWOOD PLACE

City
NEW LENOX

State
IL

Zip Code
60451

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
INSPECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 14 / 2020

Transaction ID : SA11AI.34495

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

85.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

C3 PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VANPELT, GARY, , ,

Mailing Address 4890 FM 1013

City
KIRBYVILLE

State
TX

Zip Code
75956

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
A P E COMPANIES

Occupation (for Individual)
TECHNICAL CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 13 / 2020

Transaction ID : SA11AI.34528

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VARVARO, CHARLES, , ,

Mailing Address 4026 RIDGE AVENUE

City
EGG HARBOR TOWNSHIP

State
NJ

Zip Code
08234

FEC 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 ▼

1320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 05 / 2020

Transaction ID : SA11AI.34084

Amount of Each Receipt this Period

120.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VAUGHT, JOHN, , ,

Mailing Address 2920 DEMINGTON AVENUE NORTHWEST

City
CANTON

State
OH

Zip Code
44718

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TRI-CAST

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 08 / 2020

Transaction ID : SA11AI.34165

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

175.00

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)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VEGA, JOANNA, , ,

Mailing Address 3128 BAYER STREET APT 8

City
MARINA

State
CA

Zip Code
93933

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
IHSS

Occupation (for Individual)
CARE PROVIDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 15 / 2020

Transaction ID : SA11AI.34639

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WADDELL, FRANKLIN, , ,

Mailing Address 255 CR 3203

City
QUITMAN

State
TX

Zip Code
75783

FEC 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 ▼

444.40

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2020

Transaction ID : SA11AI.34233

Amount of Each Receipt this Period

40.40

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WAGNER, KATHERINE, , ,

Mailing Address 2445 EAST DEL MAR BOULEVARD

City
PASADENA

State
CA

Zip Code
91107

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FISHER PHILLIPS

Occupation (for Individual)
LEGAL SECRETARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 21 / 2020

Transaction ID : SA11AI.33801

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

105.40

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WAGNER, KATHERINE, , ,

Mailing Address 2445 EAST DEL MAR BOULEVARD

City
PASADENAState
CAZip Code
91107FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FISHER PHILLIPSOccupation (for Individual)
LEGAL SECRETARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 / 21 / 2020

Transaction ID : SA11AI.34826

Amount of Each Receipt this Period

45.00

☐ Memo Item
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WALLACE, JANICE, , ,

Mailing Address P.O BOX 1307

City
SPRINGFIELDState
TNZip Code
37172FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RE/MAX 1ST CHOICEOccupation (for Individual)
REALTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 19 / 2020

Transaction ID : SA11AI.33465

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WALLACE, JANICE, , ,

Mailing Address P.O BOX 1307

City
SPRINGFIELDState
TNZip Code
37172FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RE/MAX 1ST CHOICEOccupation (for Individual)
REALTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 / 19 / 2020

Transaction ID : SA11AI.34727

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

145.00

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

C3 PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WALSH, LORI, , ,

Mailing Address 1004 PINE MEADOW COURT

City
SOUTHLAKE

State
TX

Zip Code
76092

FEC 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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 15 / 2020

Transaction ID : SA11AI.34532

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WARHOLA, ARLEEN, , ,

Mailing Address 2226 DANIEL ISLAND DRIVE

City
CHARLESTON

State
SC

Zip Code
29492

FEC 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 ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 03 / 2020

Transaction ID : SA11AI.34123

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WEI, MARIA, , ,

Mailing Address 50 LONGWOOD AVENUE

City
BROOKLINE

State
MA

Zip Code
02446

FEC 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 ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 22 / 2020

Transaction ID : SA11AI.33650

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

70.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

C3 PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WEI, MARIA, , ,

Mailing Address 50 LONGWOOD AVENUE

City
BROOKLINE

State
MA

Zip Code
02446

FEC 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 ▼

385.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 22 / 2020

Transaction ID : SA11AI.34662

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WELCH, BEVERLY, , ,

Mailing Address 396 CANDICE DRIVE NORTHWEST

City
PIEDMONT

State
OK

Zip Code
73078

FEC 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 ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2020

Transaction ID : SA11AI.34519

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WELLS, BRETT, , ,

Mailing Address 133 D & RG DR.

City
DURANGO

State
CO

Zip Code
81303

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
JEANNE PARKS LIVING TRUST

Occupation (for Individual)
RANCH MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 27 / 2020

Transaction ID : SA11AI.33782

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WELLS, BRETT, , ,

Mailing Address 133 D & RG DR.

City
DURANGO

State
CO

Zip Code
81303

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
JEANNE PARKS LIVING TRUST

Occupation (for Individual)
RANCH MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 10 / 2020

Transaction ID : SA11AI.34265

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WENTZ, CARL, , ,

Mailing Address 10539 W K BAR T DR

City
BOISE

State
ID

Zip Code
83709

FEC 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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 16 / 2020

Transaction ID : SA11AI.33551

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WENTZ, CARL, , ,

Mailing Address 10539 W K BAR T DR

City
BOISE

State
ID

Zip Code
83709

FEC 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 ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 16 / 2020

Transaction ID : SA11AI.34568

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

65.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

C3 PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WHEMPNER, FRANK, , ,

Mailing Address 18421 SULKY LN

City
TEHACHAPI

State
CA

Zip Code
93561

FEC 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 ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 13 / 2020

Transaction ID : SA11AI.34637

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WILCZEK, SHIRLEY, , ,

Mailing Address 378 NORTH DRIVE

City
SEVERNA PARK

State
MD

Zip Code
21146

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED

Occupation (for Individual)
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 24 / 2020

Transaction ID : SA11AI.33680

Amount of Each Receipt this Period

20.20

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WILLIAMS, GARY, , ,

Mailing Address P.O. BOX 10565

City
CONWAY

State
AR

Zip Code
72034

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
TRUCK DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

725.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 01 / 2020

Transaction ID : SA11AI.33983

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

100.20

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

C3 PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WILLIAMS, GARY, , ,

Mailing Address P.O. BOX 10565

City
CONWAY

State
AR

Zip Code
72034

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF

Occupation (for Individual)

TRUCK DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 01 / 2020

Transaction ID : SA11AI.33984

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WILSON, CAROL, , ,

Mailing Address 1108 2 MILE CIRCLE WEST

City

WILMINGTON

State

NC

Zip Code

28405

FEC 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 ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 25 / 2020

Transaction ID : SA11AI.33690

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WILT, RHONDA, , ,

Mailing Address 1139 NE CLUBHOUSE CRT

City

LEES SUMMIT

State

MO

Zip Code

64086

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

VA MEDICAL CENTER

Occupation (for Individual)

NURSE PRACTITIONER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 19 / 2020

Transaction ID : SA11AI.33503

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 184 OF 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

C3 PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WILT, RHONDA, , ,

Mailing Address 1139 NE CLUBHOUSE CRT

City
LEES SUMMIT

State
MO

Zip Code
64086

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
VA MEDICAL CENTER

Occupation (for Individual)
NURSE PRACTITIONER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 29 / 2020

Transaction ID : SA11AI.33974

Amount of Each Receipt this Period

15.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WILT, RHONDA, , ,

Mailing Address 1139 NE CLUBHOUSE CRT

City
LEES SUMMIT

State
MO

Zip Code
64086

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
VA MEDICAL CENTER

Occupation (for Individual)
NURSE PRACTITIONER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 19 / 2020

Transaction ID : SA11AI.34760

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WINK, KATHLEEN, , ,

Mailing Address 2013 DENNING WAY

City
NORTH VERSAILLES

State
PA

Zip Code
15137

FEC 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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 08 / 2020

Transaction ID : SA11AI.34100

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

C3 PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WITKIN, JACK, , ,

Mailing Address 1535 HIGH ST

City
BOULDER

State
CO

Zip Code
80304

FEC 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 ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 16 / 2020

Transaction ID : SA11AI.33548

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WITKIN, JACK, , ,

Mailing Address 1535 HIGH ST

City
BOULDER

State
CO

Zip Code
80304

FEC 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 ▼

825.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 16 / 2020

Transaction ID : SA11AI.34557

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WODZICKI, SUSAN, , ,

Mailing Address 1352 FOXWOOD DR

City
LUTZ

State
FL

Zip Code
33549

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COLOR IMAGE DESIGNS

Occupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 19 / 2020

Transaction ID : SA11AI.33453

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

C3 PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WODZICKI, SUSAN, , ,

Mailing Address 1352 FOXWOOD DR

City
LUTZ

State
FL

Zip Code
33549

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COLOR IMAGE DESIGNS

Occupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 19 / 2020

Transaction ID : SA11AI.34717

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WOLFSON, VALERIE, , ,

Mailing Address 16 WASHINGTON RD.

City

OGDENSBURG

State

NJ

Zip Code

07439

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
KELLER WILLIAMS

Occupation (for Individual)
REALTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 08 / 2020

Transaction ID : SA11AI.34077

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WOO, WINSTON, , ,

Mailing Address 1913 DOUGLAS AVENUE

City

ALLEN

State

TX

Zip Code

75013

FEC 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 ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 07 / 2020

Transaction ID : SA11AI.34228

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

105.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

C3 PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WOTMAN, CAROLYNN, , ,

Mailing Address 4181 W HEMLOCK STREET

City
OXNARD

State
CA

Zip Code
93035

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

MORGAN, DAGGETT & WOTMAN LLP

Occupation (for Individual)

OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 29 / 2020

Transaction ID : SA11AI.34043

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WRIDE, RICHARD, , ,

Mailing Address P. O. BOX 322

City
GARFIELD

State
WA

Zip Code
99130

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

CITY OF GARFIELD

Occupation (for Individual)

PROPERTY MAINTENANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

622.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 06 / 2020

Transaction ID : SA11AI.34342

Amount of Each Receipt this Period

2.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WRIDE, RICHARD, , ,

Mailing Address P. O. BOX 322

City
GARFIELD

State
WA

Zip Code
99130

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

CITY OF GARFIELD

Occupation (for Individual)

PROPERTY MAINTENANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

682.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 08 / 2020

Transaction ID : SA11AI.34341

Amount of Each Receipt this Period

60.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

107.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

C3 PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WYATT, EDDY, , ,

Mailing Address 7110 ALLENS PARK DRIVE

City
COLORADO SPRINGS

State
CO

Zip Code
80922

FEC 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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 14 / 2020

Transaction ID : SA11AI.34564

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. YOUTSEY, MARK, , ,

Mailing Address 6769 LOST STAR LANE

City
FORT WORTH

State
TX

Zip Code
76132

FEC 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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 19 / 2020

Transaction ID : SA11AI.33528

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. YOUTSEY, MARK, , ,

Mailing Address 6769 LOST STAR LANE

City
FORT WORTH

State
TX

Zip Code
76132

FEC 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 ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 19 / 2020

Transaction ID : SA11AI.34775

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

70.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

C3 PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ZACK, ANNE, , ,

Mailing Address 29 CIRCLE DRIVE

City
RUMSON

State
NJ

Zip Code
07760

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 07 / 2020

Transaction ID : SA11AI.34080

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ZELLER, CLARENCE, , ,

Mailing Address 2605 PFISTER HWY

City
ADRIAN

State
MI

Zip Code
49221

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
METRO AVIATION

Occupation (for Individual)
EMS HELICOPTER PILOT UOFM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 16 / 2020

Transaction ID : SA11AI.34475

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ZEMAN, MARILYN, , ,

Mailing Address 3513 HARLEM AVENUE A2

City
BERWYN

State
IL

Zip Code
60402

FEC 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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 07 / 2020

Transaction ID : SA11AI.34200

Amount of Each Receipt this Period

20.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

65.00

72738.20

**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 190 OF 199

<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)

C3 PAC

Full Name (Last, First, Middle Initial)

A. BB&T

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		22		2020

Mailing Address 200 WEST SECOND ST

City
WINSTON-SALEMState
NCZip Code
27101Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

FEC Identification Number

C**Transaction ID : SB21B.33634**

Amount of Each Disbursement this Period

1.00

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. BB&T

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2020

Mailing Address 200 WEST SECOND ST

City
WINSTON-SALEMState
NCZip Code
27101Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

FEC Identification Number

C**Transaction ID : SB21B.33835**

Amount of Each Disbursement this Period

15.00

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. BB&T

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		02		2020

Mailing Address 200 WEST SECOND ST

City
WINSTON-SALEMState
NCZip Code
27101Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

FEC Identification Number

C**Transaction ID : SB21B.34055**

Amount of Each Disbursement this Period

17.00

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

33.00

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 PageFOR LINE NUMBER:
(check only one)

PAGE 191 OF 199

<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)

C3 PAC

Full Name (Last, First, Middle Initial)

A. BB&T

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			23			2020			

Mailing Address 200 WEST SECOND ST

City
WINSTON-SALEMState
NCZip Code
27101Purpose of Disbursement
BANK FEE

Candidate Name

Category/
Type

FEC Identification Number

C**Transaction ID : SB21B.34659**

Amount of Each Disbursement this Period

40.00

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. INTUIT

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			20			2020			

Mailing Address 2700 COAST AVE

City
MOUNTAIN VIEWState
CAZip Code
94043Purpose of Disbursement
SUBSCRIPTION

Candidate Name

Category/
Type

FEC Identification Number

C**Transaction ID : SB21B.33633**

Amount of Each Disbursement this Period

70.00

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. INTUIT

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			20			2020			

Mailing Address 2700 COAST AVE

City
MOUNTAIN VIEWState
CAZip Code
94043Purpose of Disbursement
SUBSCRIPTION

Candidate Name

Category/
Type

FEC Identification Number

C**Transaction ID : SB21B.34862**

Amount of Each Disbursement this Period

70.00

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

180.00

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 PageFOR LINE NUMBER:
(check only one)

PAGE 192 OF 199

<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)

C3 PAC

Full Name (Last, First, Middle Initial)

A. REVV

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		19		2020

Mailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Category/
Type

FEC Identification Number

C**Transaction ID : SB21B.33374**

Amount of Each Disbursement this Period

4737.71

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. REVV

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		26		2020

Mailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Category/
Type

FEC Identification Number

C**Transaction ID : SB21B.33641**

Amount of Each Disbursement this Period

2863.85

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. REVV

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		02		2020

Mailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Category/
Type

FEC Identification Number

C**Transaction ID : SB21B.33855**

Amount of Each Disbursement this Period

3330.09

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

10931.65

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 PageFOR LINE NUMBER:
(check only one)

PAGE 193 OF 199

<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)

C3 PAC

Full Name (Last, First, Middle Initial)

A. REVV

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	9		2	0	2	0

Mailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C**Transaction ID : SB21B.34062**

Amount of Each Disbursement this Period

5230.03

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. REVV

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	6		2	0	2	0

Mailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C**Transaction ID : SB21B.34348**

Amount of Each Disbursement this Period

5187.12

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. REVV

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	3		2	0	2	0

Mailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C**Transaction ID : SB21B.3466t**

Amount of Each Disbursement this Period

3870.62

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

14287.77

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 194 OF 199

<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)

C3 PAC

Full Name (Last, First, Middle Initial)

A. THE GOBER GROUP

Mailing Address PO BOX 341016

City
AUSTINState
TXZip Code
78734Purpose of Disbursement
LEGAL CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M		D	D		Y	Y	Y	Y	Y	Y
1	1		1	7		2	0	2	0		

FEC Identification Number

C**Transaction ID : SB21B.34347**

Amount of Each Disbursement this Period

1587.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M		D	D		Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M		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).....▶**TOTAL** This Period (last page this line number only).....▶

1587.00

27019.42

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 195 OF 199
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) C3 PAC				FEC IDENTIFICATION NUMBER ▼ C C00680314	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y	
Full Name of Payee END GAME CONSULTING			<input type="checkbox"/> Memo Item		
Mailing Address 22261 N 440 RD			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y 10 / 22 / 2020		
City NOWATA		State OK	Zip Code 74048		Amount 17000.00
Purpose of Expenditure CANVASSERS			Category/Type 		Transaction ID : SE.33635 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y 10 / 22 / 2020
Name of Federal Candidate: ROY, CHIP, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 21 <input type="checkbox"/> President <input type="checkbox"/> Senate State: TX
Calendar Year-To-Date Per Election for Office Sought			17000.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶
Full Name of Payee HARWAITH COMMUNICATIONS			<input type="checkbox"/> Memo Item		
Mailing Address 1956 LONGWOOD DR			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y 11 / 02 / 2020		
City BATON ROUGE		State LA	Zip Code 70808		Amount 125.00
Purpose of Expenditure DIGITAL ADS			Category/Type 		Transaction ID : SE.33848 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y 11 / 02 / 2020
Name of Federal Candidate: BOEBERT, LAUREN, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CO
Calendar Year-To-Date Per Election for Office Sought			10125.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures					17125.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures					
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.					
OZANUS, WILLIAM, K, , Signature			[Electronically Filed]		Date M M / D D / Y Y Y Y Y 12 / 03 / 2020

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 196 OF 199
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) C3 PAC				FEC IDENTIFICATION NUMBER ▼ C C00680314	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee HARWAITH COMMUNICATIONS			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 02 / 2020		
Mailing Address 1956 LONGWOOD DR			Amount 125.00		
City BATON ROUGE	State LA	Zip Code 70808	Transaction ID : SE.33850		
Purpose of Expenditure DIGITAL ADS		Category/Type 	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 02 / 2020		
Name of Federal Candidate: MITSCH BUSH, DIANE MS., , ,			Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CO		
Calendar Year-To-Date Per Election for Office Sought 10250.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee OLYMPIC MEDIA LLC			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 02 / 2020		
Mailing Address 2402 POTOMAC AVE UNIT 102			Amount 31.20		
City ALEXANDRIA	State VA	Zip Code 22301	Transaction ID : SE.33642		
Purpose of Expenditure WEB ADS		Category/Type 	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 02 / 2020		
Name of Federal Candidate: OMAR, ILHAN, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 05 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MN		
Calendar Year-To-Date Per Election for Office Sought 31.20			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			156.20		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures					
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.					
Signature OZANUS, WILLIAM, K, ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 12 / 03 / 2020	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 197 OF 199
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) C3 PAC				FEC IDENTIFICATION NUMBER ▼ C C00680314	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y	
Full Name of Payee OLYMPIC MEDIA LLC			<input type="checkbox"/> Memo Item		
Mailing Address 2402 POTOMAC AVE UNIT 102			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y 11 / 02 / 2020		
City ALEXANDRIA		State VA	Zip Code 22301		Amount 56.00
Purpose of Expenditure WEB ADS			Category/Type 		Transaction ID : SE.33644 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y 11 / 02 / 2020
Name of Federal Candidate: BIDEN, JOE R, ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought			56.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____
Full Name of Payee PERSUASION PERFECTED			<input type="checkbox"/> Memo Item		
Mailing Address 600 F ST NW 5TH FLOOR			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y 10 / 30 / 2020		
City WASHINGTON		State DC	Zip Code 20004		Amount 10000.00
Purpose of Expenditure DIGITAL ADS			Category/Type 		Transaction ID : SE.33836 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y 10 / 29 / 2020
Name of Federal Candidate: GONZALEZ, VICENTE, ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 15 <input type="checkbox"/> President <input type="checkbox"/> Senate State: TX
Calendar Year-To-Date Per Election for Office Sought			10000.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____
(a) SUBTOTAL of Itemized Independent Expenditures					10056.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures					
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.					
OZANUS, WILLIAM, K, , Signature			[Electronically Filed]		Date M M / D D / Y Y Y Y Y 12 / 03 / 2020

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 198 OF 199
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) C3 PAC				FEC IDENTIFICATION NUMBER ▼ C C00680314	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y	
Full Name of Payee PERSUASION PERFECTED			<input type="checkbox"/> Memo Item		
Mailing Address 600 F ST NW 5TH FLOOR			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y 10 / 29 / 2020		
City WASHINGTON	State DC	Zip Code 20004	Amount 5000.00		
Purpose of Expenditure DIGITAL ADS		Category/ Type 	Transaction ID : SE.33838 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y 10 / 29 / 2020		
Name of Federal Candidate: BOEBERT, LAUREN, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 03 State: CO		
Calendar Year-To-Date Per Election for Office Sought 5000.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee PERSUASION PERFECTED			<input type="checkbox"/> Memo Item		
Mailing Address 600 F ST NW 5TH FLOOR			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y 10 / 29 / 2020		
City WASHINGTON	State DC	Zip Code 20004	Amount 5000.00		
Purpose of Expenditure DIGITAL ADS		Category/ Type 	Transaction ID : SE.33840 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y 10 / 29 / 2020		
Name of Federal Candidate: MITSCH BUSH, DIANE MS., , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President District: 03 State: CO		
Calendar Year-To-Date Per Election for Office Sought 10000.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			10000.00		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			 		
(c) TOTAL Independent Expenditures			 		
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.					
OZANUS, WILLIAM, K, , Signature		[Electronically Filed]		Date M M / D D / Y Y Y Y Y 12 / 03 / 2020	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 199 OF 199
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) C3 PAC			FEC IDENTIFICATION NUMBER ▼ C C00680314		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report			New report <input type="checkbox"/> Amends report filed on <input type="text" value="MM/DD/YYYY"/>		
Full Name of Payee PERSUASION PERFECTED <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <input type="text" value="MM/DD/YYYY"/> 11 / 03 / 2020		
Mailing Address 600 F ST NW 5TH FLOOR			Amount <input type="text" value="5000.00"/>		
City WASHINGTON	State DC	Zip Code 20004	Transaction ID : SE.33851		
Purpose of Expenditure DIGITAL ADS		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text" value="MM/DD/YYYY"/> 11 / 02 / 2020		
Name of Federal Candidate: MOWERS, MATT, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>01</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NH</u>		
Calendar Year-To-Date Per Election for Office Sought		<input type="text" value="5000.00"/>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <input type="text" value="MM/DD/YYYY"/>		
Mailing Address			Amount <input type="text"/>		
City	State	Zip Code	Date of Disbursement or Obligation <input type="text" value="MM/DD/YYYY"/>		
Purpose of Expenditure		Category/ Type <input type="text"/>			
Name of Federal Candidate:		<input type="checkbox"/> Support <input type="checkbox"/> Oppose	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		<input type="text"/>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			<input type="text" value="5000.00"/>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<input type="text"/>		
(c) TOTAL Independent Expenditures			<input type="text" value="42337.20"/>		
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.					
Signature OZANUS, WILLIAM, K, ,		[Electronically Filed]		Date <input type="text" value="MM/DD/YYYY"/> 12 / 03 / 2020	