Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Middle Resolution Federal PAC Inc.	
	C C00512335
Check if X 24-hour report 48-hour report New report Amends report filed	d on Mam / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
Evans, Alga, , ,	M M / D D / Y Y Y Y
Mailing Address 4214 Riding Place Rd	10 30 2020 Amount
	Amount
City State Zip Code	116.00
Henrico VA 23223	Transaction ID : SE.7468 Date of Disbursement or Obligation
Purpose of Expenditure Phone Banking/Canvassing Category/ Type 004	10 30 / Y Y Y Y Y Y
Name of Federal Candidate Support Offic	e Sought: House District:
TRUMP, DONALD J., , ,	President Senate State:
Calendar Year-To-Date Per Election for Office Sought Disb 2020	ursement For: Primary
Full Name of Payee	Date of Public Distribution/Dissemination
Evans, Alga, , ,	M M / D D / Y Y Y Y
Mailing Address 4214 Riding Place Rd	10 30 2020
4214 Kiuling Flace Ku	Amount
City State Zip Code	116.00
Henrico VA 23223	Transaction ID : SE.7469 Date of Disbursement or Obligation
Purpose of Expenditure Category/ Category/	M = M / D = D / Y = Y = Y
Phone Banking/Canvassing Odd Type 004	10 30 2020
Name of Federal Candidate Support Office	e Sought: House District: 00
GADE, DANIEL, M., ,	President Senate State: VA
2020	ursement For: Primary General
Per Election for Office Sought	Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	232.00
	7 7 7
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
	10 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

ooneddic Ly	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Middle Resolution Federal PAC Inc.	C C00512335
Check if 24-hour report 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y
Full Name of Payee Da	ate of Public Distribution/Dissemination
Evans, Alga, , ,	10 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 4214 Riding Place Rd An	nount
City State Zip Code	116.00
Henrico VA 23223 Tra	ansaction ID : SE.7470 ate of Disbursement or Obligation
Purpose of Expenditure Phone Banking/Canvassing Category/ Type 004	10 30 7 2020
Name of Federal Candidate X Support Office Sou	ught: X House District: 07
FREITAS, NICK, J., , Oppose Pre	esident Senate State: VA
Calendar Year-To-Date Per Election for Office Sought Disbursen 2020	7
	Other (specify) ▶
Full Name of Payee Heller, Ruth, , ,	ate of Public Distribution/Dissemination
Mailing Address 5221 Largo Ct	10 30 2020 mount
Unit 101	
	148.00 Insaction ID : SE.7471
Purpose of Expenditure Category/	ate of Disbursement or Obligation
Phone Banking Category Type 004	10 30 2020
Name of Federal Candidate	ought: House District:
TRUMP, DONALD J., , , Oppose Pre	esident Senate State:
Calendar Year-To-Date Per Election for Office Sought Disburser 2020	ment For:
(a) SUBTOTAL of Itemized Independent Expenditures	264.00
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or party committee) any political party committee or its agent.	
Bach, Catharyne, L., , [Electronically Filed] Date 10	30 2020
Signature	

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OF

Schedule E)	PAGE 3 OF 11 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	EC IDENTIFICATION NUMBER ▼
Middle Resolution Federal PAC Inc.	C00512335
Check if 24-hour report 48-hour report New report Amends report filed on	M / D = D / Y = Y = Y
	Public Distribution/Dissemination
Heller, Ruth, , ,	
Mailing Address 5221 Largo Ct Amount	
Unit 101	140.00
City State Zip Code Wilimington NC 28409 Transact	148.00 tion ID : SE.7472
Date of I	Disbursement or Obligation
Purpose of Expenditure Phone Banking Category/ Type 004	
Name of Federal Candidate X Support Office Sought:	House District: 00
GADE, DANIEL, M., , Oppose President	
Calendar Year-To-Date Per Election for Office Sought Disbursement F 2020 Other	For: Primary X General er (specify) ▶
	Public Distribution/Dissemination
Heller, Ruth, , ,	
Mailing Address 5221 Largo Ct	
Unit 101	
City State Zip Code	148.00
Date of	ion ID : SE.7473 Disbursement or Obligation
Purpose of Expenditure Phone Banking Category/ Type 004	
Name of Federal Candidate	₩ House District:07
FREITAS, NICK, J., , Oppose President	Senate State: VA
Calendar Year-To-Date Per Election for Office Sought Disbursement F 2020 Other	For: Primary X General er (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	296.00
(a) cost of the co	290.00
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7
(c) TOTAL Independent Expenditures	7 1 7 1 7 1
Under penalty of perjury I certify that the independent expenditures reported herein were not made in coowith, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the party committee) any political party committee or its agent.	
Bach, Catharyne, L., , [Electronically Filed] Date 10	30 / 2020

ochedule L)				FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Middle Resolution Federal PAC Inc.				C C00512335
Check if 24-hour report 48-hour report	X New repo	ort Amends repo		T = M / D = D / Y = Y = Y
Full Name of Payee			Date	of Public Distribution/Dissemination
Lindsey, Fiona, , ,				10 30 7 2020
Mailing Address 815 N Almon St			Amou	ınt
City	State	Zip Code		40.00
Moscow	ID	83843		saction ID : SE.7481 of Disbursement or Obligation
Purpose of Expenditure Canvassing		Category/ Type 004		10 30 7 2020
Name of Federal Candidate		x Support	Office Sough	nt: House District:
TRUMP, DONALD J., , ,		Oppose	x Presid	ent Senate State:
Calendar Year-To-Date Per Election for Office Sought		4412.00	Disbursemer 2020	nt For:
Full Name of Payee Lindsey, Fiona, , ,			Date	of Public Distribution/Dissemination
Mailing Address 815 N Almon St			Amou	
City	State	Zip Code	$-\Gamma$	40.00
Moscow	ID	83843		action ID : SE.7482 of Disbursement or Obligation
Purpose of Expenditure Canvassing		Category/ Type 004	_ _	10 30 / Y Y Y Y Y
Name of Federal Candidate		x Support	Office Sough	nt: House District: 00
GADE, DANIEL, M., ,		Oppose	Presid	lent Senate State: VA
Calendar Year-To-Date Per Election for Office Sought		3952.00	Disbursemer 2020	nt For:
(a) SUBTOTAL of Itemized Independent Expendit	ures		· [80.00
(b) SUBTOTAL of Unitemized Independent Expen	ditures		•	
(c) TOTAL Independent Expenditures			•	7 7 7
Under penalty of perjury I certify that the indeper with, or at the request or suggestion of, any candiparty committee) any political party committee or i	idate or authorized			
Bach, Catharyne, L., ,	[Electron	ically Filed] Date	10	30 / 2020
Signature				

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Schedule E)	PAGE 5 OF 11 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	DENTIFICATION NUMBER ▼
Middle Resolution Federal PAC Inc.	C00512335
Check if 24-hour report 48-hour report New report Amends report filed on	/ D = D / Y = Y = Y
Full Name of Payee Lindsey, Fiona, , ,	lic Distribution/Dissemination
Mailing Address 815 N Almon St Amount	30 2020
	40.00 ID : SE.7483
Purpose of Expenditure Canvassing Category/ Type Out Out Out Out Out Out Out Ou	oursement or Obligation / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Foderal Condidate	
FREITAS, NICK, J., , Support Office Sought: President	House District: 07 Senate State: VA
Calendar Year-To-Date Per Election for Office Sought 3412.00 2020	Primary X General
	lic Distribution/Dissemination
Lindsey, Ian, , ,	30 2020
Mailing Address 815 N Almon St Amount	
City State Zip Code	4.00
Moscow ID 83843 Transaction Date of Disk	ID : SE.7484 oursement or Obligation
Purpose of Expenditure Canvassing Category/ Type 004	30 / 2020
Name of Federal Candidate Support Office Sought:	House District:
TRUMP, DONALD J., , , Oppose President	Senate State:
Calendar Year-To-Date Per Election for Office Sought Disbursement For: 2020 Other (s	Primary X General specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	44.00
	4
(b) SUBTOTAL of Unitemized Independent Expenditures	4
(c) TOTAL Independent Expenditures	42
Under penalty of perjury I certify that the independent expenditures reported herein were not made in coopera with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reparty committee) any political party committee or its agent.	
Bach, Catharyne, L., , [Electronically Filed] Date 10 30	2020

,	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Middle Resolution Federal PAC Inc.	C C00512335
Check if 24-hour report 48-hour report New report Amends report	ort filed on M M / D D / Y Y Y Y Y
Full Name of Payee	Date of Public Distribution/Dissemination
Lindsey, lan, , ,	10 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 815 N Almon St	Amount
City State Zip Code	4.00
Moscow ID 83843	Transaction ID : SE.7485 Date of Disbursement or Obligation
Purpose of Expenditure Canvassing Category/ Type 004	M M / D D / Y Y Y Y
Name of Federal Candidate	Office Sought: House District: 00
GADE, DANIEL, M., , Oppose	President State: VA
Calendar Year-To-Date Per Election for Office Sought 3956.00	Disbursement For:
Full Name of Payee	Date of Public Distribution/Dissemination
Lindsey, lan, , ,	10 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 815 N Almon St	Amount
City State Zip Code	4.00
Moscow ID 83843	Transaction ID : SE.7486 Date of Disbursement or Obligation
Purpose of Expenditure Canvassing Category/ Type 004	10 30 2020
Name of Federal Candidate Support	Office Sought:
FREITAS, NICK, J., , Oppose	President Senate State: VA
Calendar Year-To-Date Per Election for Office Sought 3416.00	Disbursement For: ☐ Primary X General 2020 Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	> 8.00
(b) SUBTOTAL of Unitemized Independent Expenditures	- >
(c) TOTAL Independent Expenditures	·· •
Under penalty of perjury I certify that the independent expenditures reported herein were with, or at the request or suggestion of, any candidate or authorized committee or agent committee) any political party committee or its agent.	
Bach, Catharyne, L., , [Electronically Filed] Date	e 10 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

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OF

		FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	F	EC IDENTIFICATION NUMBER ▼
Middle Resolution Federal PAC Inc.		C C00512335
Check if 24-hour report 48-hour report New report A	mends report filed on	M / D = D / Y = Y = Y
Full Name of Payee	Date of	Public Distribution/Dissemination
Pegram, David, , ,	M 10	
Mailing Address 6101 Glenway Ct	Amount	
City State Zip Code		80.00
Richmond VA 23225		ction ID : SE.7477 Disbursement or Obligation
Purpose of Expenditure Phone Banking Category Type	, OO4	M / D D / Y Y Y Y
Name of Federal Candidate	Support Office Sought:	House District:
TRUMP, DONALD J., , ,	Oppose President	
Calendar Year-To-Date Per Election for Office Sought 4372.0	Disbursement F 2020 Othe	For: Primary General er (specify)
Full Name of Payee		Public Distribution/Dissemination
Pegram, David, , ,	M 1	0 30 2020
Mailing Address 6101 Glenway Ct	Amount	
City State Zip Code		80.00
Richmond VA 23225		ion ID : SE.7478 Disbursement or Obligation
Purpose of Expenditure Phone Banking Category Type	004	M / D D / Y Y Y Y
Name of Federal Candidate	Support Office Sought:	House District: 00
GADE, DANIEL, M., ,	Oppose Presiden	t Senate State: VA
Calendar Year-To-Date Per Election for Office Sought 3912.0	Disbursement I 2020 Oth	For: Primary X General er (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	······································	160.00
(b) SUBTOTAL of Unitemized Independent Expenditures	······································	7 7
(c) TOTAL Independent Expenditures	······································	7 1 7 1 7
Under penalty of perjury I certify that the independent expenditures reported hwith, or at the request or suggestion of, any candidate or authorized committee party committee) any political party committee or its agent.		
Bach, Catharyne, L., , [Electronically Filed]	Date 10	30 2020
Signature		

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Schedule E)	PAGE 8 OF 11 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Middle Resolution Federal PAC Inc.	C C00512335	
Check if 24-hour report 48-hour report New report Amends report filed on	/ D = D / Y = Y = Y	
	Public Distribution/Dissemination	
1	M / 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 6101 Glenway Ct Amount	t	
City State Zip Code	80.00	
Richmond VA 23225 Transac	ction ID : SE.7479 Disbursement or Obligation	
	10 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Name of Federal Candidate X Support Office Sought:	₩ House District:07	
FREITAS, NICK, J., , Oppose Presiden	Senate State: VA	
Calendar Year-To-Date Per Election for Office Sought Disbursement 2020 Oth	For: Primary X General ner (specify) ▶	
	Public Distribution/Dissemination	
	10 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 805 W Cary St	t	
Unit 224		
City State Zip Code Richmond VA 23220 Transac	666.67	
	f Disbursement or Obligation	
Calegory 204	0 30 2020	
Name of Federal Candidate Support Office Sought:	House District:	
TRUMP, DONALD J., , , Oppose Presider	nt Senate State:	
Calendar Year-To-Date Per Election for Office Sought Disbursement 2020 Oth	For: Primary ★ General ner (specify) ►	
(a) SUBTOTAL of Itemized Independent Expenditures	746.67	
(b) SUBTOTAL of Unitemized Independent Expenditures	4 4	
(c) TOTAL Independent Expenditures	7 7	
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.		
Bach, Catharyne, L., , [Electronically Filed] Date 10	30 / 2020	

Schedule E)	PAGE 9 OF 11 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	EC IDENTIFICATION NUMBER ▼
Middle Resolution Federal PAC Inc.	C00512335
Check if 24-hour report 48-hour report New report Amends report filed on	M / D = D / Y = Y = Y
	Public Distribution/Dissemination
Ross, Britton, , ,	
Mailing Address 805 W Cary St Amount	
Unit 224	
City State Zip Code Richmond VA 23220 Transact	666.67 tion ID : SE.7488
Date of I	Disbursement or Obligation
Purpose of Expenditure GOTV Consulting Category/ Type 004 10	
Name of Federal Candidate X Support Office Sought:	House District: 00
GADE, DANIEL, M., , Oppose President	
Calendar Year-To-Date Per Election for Office Sought Disbursement F 2020 Other	For: Primary X General er (specify) ▶
	Public Distribution/Dissemination
Ross, Britton, , ,	
Mailing Address 805 W Cary St	
Unit 224	
City State Zip Code	333.33
Date of	ion ID : SE.7489 Disbursement or Obligation
Purpose of Expenditure GOTV Consulting Category/ Type 004	
Name of Federal Candidate	₩ House District:07
FREITAS, NICK, J., , Oppose President	Senate State: VA
Calendar Year-To-Date Per Election for Office Sought Disbursement F 2020 Other	For: Primary X General er (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	1000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	7 1 7 1 7
(c) TOTAL Independent Expenditures	7 1 7 1 7
Under penalty of perjury I certify that the independent expenditures reported herein were not made in coo with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the party committee) any political party committee or its agent.	
Bach, Catharyne, L., , [Electronically Filed] Date 10	30 / 2020

	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Middle Resolution Federal PAC Inc.	C C00512335
Check if 24-hour report 48-hour report New report Amends report file	ed on Man / Dab / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
Walls, Benjamin, , ,	10 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1909 Colgate Ave	Amount
City State Zip Code	44.00
Richmond VA 23226	Transaction ID : SE.7474 Date of Disbursement or Obligation
Purpose of Expenditure Canvassing Category/ Type 004	10 30 / 2020
Name of Federal Candidate Support Of	fice Sought: House District:
TRUMP DONALD I	X President Senate State:
Calendar Year-To-Date Per Election for Office Sought Diagram 4144.00 20	
5 11 11 15	Other (specify)
Full Name of Payee Walls, Benjamin, , ,	Date of Public Distribution/Dissemination
Mailing Address 1909 Colgate Ave	Amount
City State Zip Code	44.00
Richmond VA 23226	Transaction ID : SE.7475 Date of Disbursement or Obligation
Purpose of Expenditure Canvassing Category/ Type 004	10 30 2020
Name of Federal Candidate Support Of	fice Sought: House District: 00
GADE, DANIEL, M., , Oppose	President Senate State: VA
	sbursement For: Primary
(a) SUBTOTAL of Itemized Independent Expenditures	88.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not with, or at the request or suggestion of, any candidate or authorized committee or agent of eit party committee) any political party committee or its agent.	
Bach, Catharyne, L., , [Electronically Filed] Date	10 30 2020
Signature	

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Schedule E)	DITORIES	PAGE 11 OF 11 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Middle Resolution Federal PAC Inc.		C C00512335
Check if X 24-hour report 48-hour report New re	eport Amends report fi	led on Man / Dab / Yayayay
Full Name of Payee Walls, Benjamin, , ,		Date of Public Distribution/Dissemination
Mailing Address 1909 Colgate Ave		10 30 2020 Amount
City State	Zip Code	44.00
Richmond	23226	Transaction ID : SE.7476 Date of Disbursement or Obligation
Purpose of Expenditure Canvassing	Category/ Type 004	10 30 / 2020
Name of Federal Candidate	Support Of	ffice Sought:
FREITAS, NICK, J., ,	Oppose	President Senate State: VA
Calendar Year-To-Date Per Election for Office Sought		sbursement For: Primary ☐ General Other (specify) ☐ Other
Full Name of Payee		Date of Public Distribution/Dissemination
Mailing Address		M = M / D = D / Y = Y = Y
Mailing Address		Amount
City State	Zip Code	
Duran of Emperation	1	Date of Disbursement or Obligation
Purpose of Expenditure	Category/ Type	M M / D D / Y Y Y Y
Name of Federal Candidate	Support Of	ffice Sought: House District:
	Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	Di	isbursement For: Primary General Other (specify) ▶
		Other (specify) F
(a) SUBTOTAL of Itemized Independent Expenditures	·····	44.00
(b) SUBTOTAL of Unitemized Independent Expenditures	······	
(c) TOTAL Independent Expenditures	·	2962.67
Under penalty of perjury I certify that the independent expenditure with, or at the request or suggestion of, any candidate or authorize party committee) any political party committee or its agent.		
	onically Filed] Date	10 30 / 2020
Signature		