

**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

Republican Governance Group/Tuesday Group PAC

ADDRESS (number and street)

610 S Boulevard

Check if different  
than previously  
reported. (ACC)

Tampa

FL

33606-2647

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C

C00433060

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

April 15  
Quarterly Report (Q1)July 15  
Quarterly Report (Q2)October 15  
Quarterly Report (Q3)January 31  
Year-End Report (YE)July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)Termination Report  
(TER)(b) Monthly  
Report  
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)  
(Non-Election  
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)  
(Non-Election  
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y

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

General (30G)



Runoff (30R)



Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y

02

01

2024

02

29

2024

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

Type or Print Name of Treasurer

Kelly, Sue W., , ,

Signature of Treasurer

Kelly, Sue W., , ,

Date

M M M /

D D D /

Y Y Y Y Y Y

03

14

2024

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

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

Republican Governance Group/Tuesday Group PAC

Report Covering the Period:

From:

MM / DD / YYYY  
02 / 01 / 2024

To:

MM / DD / YYYY  
02 / 29 / 2024

|  | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand<br>January 1, 2024   |                         | 70702.96                          |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....  | 201701.98               |                                   |
| (c) Total Receipts (from Line 19) .....  | 214525.00               | 361825.00                         |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | 416226.98               | 432527.96                         |
| 7. Total Disbursements (from Line 31) .....  | 44052.82                | 60353.80                          |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....                        | 372174.16               | 372174.16                         |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                   |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | 0.00                    |                                   |



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

For further information, contact the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov)

DETAILED SUMMARY PAGE  
of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Republican Governance Group/Tuesday Group PAC

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y  
02 01 2024

To:

M M / D D / Y Y Y Y Y  
02 29 2024

## I. Receipts

COLUMN A  
Total This PeriodCOLUMN B  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

3000.00

7000.00

(ii) Unitemized .....

25.00

25.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

3025.00

7025.00

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

207500.00

350800.00

(d) Total Contributions (add Lines

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

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

210525.00

357825.00

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

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

0.00

0.00

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

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

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

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

4000.00

4000.00

## 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)) .....

214525.00

361825.00

## 20. Total Federal Receipts

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

214525.00

361825.00

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

| II. Disbursements  | COLUMN A<br>Total This Period | COLUMN B<br>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 .....   | 31052.82                      | 47353.80                          |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 31052.82                      | 47353.80                          |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 13000.00                      | 13000.00                          |
| 24. Independent Expenditures (use Schedule E) .....  | 0.00                          | 0.00                              |
| 25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....                | 0.00                          | 0.00                              |
| 26. Loan Repayments Made.....  | 0.00                          | 0.00                              |
| 27. Loans Made.....  | 0.00                          | 0.00                              |
| 28. Refunds of Contributions To:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees .....                                  | 0.00                          | 0.00                              |
| (b) Political Party Committees .....   | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....   | 0.00                          | 0.00                              |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....                            | 0.00                          | 0.00                              |
| 29. Other Disbursements (Including Non-Federal Donations).....                                 | 0.00                          | 0.00                              |
| 30. Federal Election Activity (52 U.S.C. § 30101(20))  |                               |                                   |
| (a) Allocated Federal Election Activity (from Schedule H6)                                     |                               |                                   |
| (i) Federal Share .....  | 0.00                          | 0.00                              |
| (ii) "Levin" Share.....  | 0.00                          | 0.00                              |
| (b) Federal Election Activity Paid Entirely With Federal Funds .....                           | 0.00                          | 0.00                              |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....            | 0.00                          | 0.00                              |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..      | 44052.82                      | 60353.80                          |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 44052.82                      | 60353.80                          |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

| <b>III. Net Contributions/<br/>Operating Expenditures</b>                            | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>Calendar Year-to-Date</b> |
|--|---------------------------------------|---|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....        | 210525.00                             | 357825.00                                 |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                            | 0.00                                  | 0.00                                      |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....    | 210525.00                             | 357825.00                                 |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... | 31052.82                              | 47353.80                                  |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                 | 0.00                                  | 0.00                                      |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....              | 31052.82                              | 47353.80                                  |

**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 30

(check only one)

|  |                              |                              |                             |
|--|------------------------------|------------------------------|-----------------------------|
| <input checked="checked" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13                    | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 |
| <input type="checkbox"/> 17                    |                              |                              |                             |

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

NAME OF COMMITTEE (In Full)

Republican Governance Group/Tuesday Group PAC

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

**A. Askew, Whitaker, , ,**

Mailing Address 7614 Holiday Drive

City  
AlexandriaState  
VAZip Code  
22308FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AVOQOccupation (for Individual)  
partner

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  
02 / 01 / 2024

Transaction ID : AB91D7EC2975E4B92B4D

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

**B. Hazlett, Katie, , ,**

Mailing Address 9316 Old Mansion Road

City  
AlexandriaState  
VAZip Code  
22309-2729FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Commonwealth Strategic PartnersOccupation (for Individual)  
government affairs

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  
02 / 15 / 2024

Transaction ID : A533A11956957471B890

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

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

3000.00

3000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 7 OF 30  
(check only one)

|                              |                              |   |                             |
|------------------------------|------------------------------|---|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16 |
|                              |                              |   | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)

**Republican Governance Group/Tuesday Group PAC**

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

**A. Abbvie Political Action Committee**

Mailing Address 1 N. Waukegan Road

City  
North ChicagoState  
ILZip Code  
60064-1802FEC ID number of contributing  
federal political committee.**C** C00536573

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 05 / 2024**Transaction ID : A81B1E2FF00DC41E7B51**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

**B. Amer. Assn. of Nurse Anesthetists Fund**

Mailing Address 222 S. Prospect Avenue

City  
Park RidgeState  
ILZip Code  
60068FEC ID number of contributing  
federal political committee.**C** C00173153

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 24 / 2024**Transaction ID : AD34C025497EC4B5299B**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

**C. American Academy of Dermatology Association PAC (SkinPAC)**Mailing Address 1201 Pennsylvania Ave NW  
Ste 540City  
WashingtonState  
DCZip Code  
20004-2463FEC ID number of contributing  
federal political committee.**C** C00359539

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 06 / 2024**Transaction ID : A695745FF18CE4B9D8F8**

Amount of Each Receipt this Period

5000.00

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

15000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 8 OF 30  
(check only one)

|                              |                              |   |                             |
|------------------------------|------------------------------|---|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16 |
|                              |                              |   | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)

**Republican Governance Group/Tuesday Group PAC**

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

**A. American College of Cardiology PAC**

Mailing Address 2400 N. Street, N.W.

City  
WashingtonState  
DCZip Code  
20037FEC ID number of contributing  
federal political committee.**C**

C00375360

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2024**Transaction ID : A4E850D59519949089FB**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

**B. American Road & Transportation Builders Association PAC**

Mailing Address 250 E Street, S.W., #900

City  
WashingtonState  
DCZip Code  
20024FEC ID number of contributing  
federal political committee.**C**

C00118208

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2024**Transaction ID : A4A3737837A8F458681E**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

**C. ANCOR DC PAC**

Mailing Address PO Box 75357

City  
WashingtonState  
DCZip Code  
20013-0357FEC ID number of contributing  
federal political committee.**C**

C00638122

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2024**Transaction ID : A64FD9FCBB4CA44F6B00**

Amount of Each Receipt this Period

5000.00

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

15000.00

**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 PageFOR LINE NUMBER: PAGE 9 OF 30  
(check only one)

|                              |                              |   |                             |
|------------------------------|------------------------------|---|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16 |
|                              |                              |   | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)

Republican Governance Group/Tuesday Group PAC

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

**A. Anywhere Real Estate Inc. PAC**

Mailing Address 175 Park Avenue

City  
MadisonState  
NJZip Code  
07940FEC ID number of contributing  
federal political committee.

C

C00424218

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2024

Transaction ID : AFDE5A4BE90AD4247AC0

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

**B. BASF Corporation Employees Political Action Comm.**Mailing Address 1350 I St NW  
Ste 850City  
WashingtonState  
DCZip Code  
20005-3346FEC ID number of contributing  
federal political committee.

C

C00340075

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2024

Transaction ID : AD7ACDF73604D4CEFB9B

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

**C. Biotechnology Innovation Organization PAC**

Mailing Address 1201 New York Avenue, N.W., #1300

City  
WashingtonState  
DCZip Code  
20005FEC ID number of contributing  
federal political committee.

C

C00355677

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

General

Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2024

Transaction ID : AD3CEB581A3674528AF0

Amount of Each Receipt this Period

5000.00

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

15000.00

**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 PageFOR LINE NUMBER: PAGE 10 OF 30  
(check only one)

|                              |                              |   |                             |
|------------------------------|------------------------------|---|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16 |
|                              |                              |   | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)

Republican Governance Group/Tuesday Group PAC

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

**A. Career Education Colleges and Universities PAC**

Mailing Address 1530 Wilson Blvd., #1050

City  
ArlingtonState  
VAZip Code  
22209FEC ID number of contributing  
federal political committee.

C

C00213066

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2024

Transaction ID : A8168ECED55F14E3DB4F

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

**B. Cargill, Incorporated Political Action Committee**

Mailing Address P. O. Box 9300

City  
MinneapolisState  
MNZip Code  
55440FEC ID number of contributing  
federal political committee.

C

C00067884

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2024

Transaction ID : A57CDA5C6601D4089903

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

**C. Cigna Group Employee Political Action Committee**

Mailing Address 701 Pennsylvania Avenue, N.W., #72

City  
WashingtonState  
DCZip Code  
20004FEC ID number of contributing  
federal political committee.

C

C00085316

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2024

Transaction ID : A54C774D1D0904F76979

Amount of Each Receipt this Period

5000.00

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

15000.00

**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 11 OF 30

(check only one)

|                              |                              |   |                             |
|------------------------------|------------------------------|---|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16 |
|                              |                              |   | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)

**Republican Governance Group/Tuesday Group PAC**

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

**A. CMS Energy Corporation Employees for Better Government**

Mailing Address One Energy Plaza

City  
JacksonState  
MIZip Code  
49201-2357FEC ID number of contributing  
federal political committee.**C** C00075473

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 05 / 2024**Transaction ID : A67A0098ED4C448C0A4E**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

**B. College of American Pathologists PAC**

Mailing Address 1001 G Street, N.W., #425-W

City  
WashingtonState  
DCZip Code  
20001FEC ID number of contributing  
federal political committee.**C** C00274944

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 21 / 2024**Transaction ID : A236B7933BF03429B86B**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

**C. CULAC the PAC of Credit Union Natl. Assn.**Mailing Address 99 M St SE  
Ste 300City  
WashingtonState  
DCZip Code  
20003-3957FEC ID number of contributing  
federal political committee.**C** C00007880

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 12 / 2024**Transaction ID : A72B0844008984E27AC3**

Amount of Each Receipt this Period

5000.00

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

15000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 12 OF 30  
(check only one)  

|                              |                              |   |                             |
|------------------------------|------------------------------|---|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16 |
|                              |                              |   | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)

Republican Governance Group/Tuesday Group PAC

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

**A. Delta Air Lines PAC**

Mailing Address 1212 New York Avenue, N.W., #200

City  
WashingtonState  
DCZip Code  
20005FEC ID number of contributing  
federal political committee.

C

C00104802

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

☐ General

Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 05 / 2024

Transaction ID : AE6E0C1822DEE4DE1855

Amount of Each Receipt this Period

2500.00

☐

Memo Item

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

**B. Dropbox Inc. PAC**

Mailing Address 1455 Pennsylvania Avenue, N.W., #8

City  
WashingtonState  
DCZip Code  
20004FEC ID number of contributing  
federal political committee.

C

C00695304

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

☐ General

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 01 / 2024

Transaction ID : A475DEA88D98C48088B0

Amount of Each Receipt this Period

5000.00

☐

Memo Item

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

**C. Ecolab Inc. Political Action Committee**

Mailing Address 1 Ecolab Place

City  
Saint PaulState  
MNZip Code  
55120FEC ID number of contributing  
federal political committee.

C

C00101485

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

☐ General

Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2024

Transaction ID : AE01CACD674E5434892E

Amount of Each Receipt this Period

5000.00

☐

Memo Item

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

12500.00

**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 PageFOR LINE NUMBER: PAGE 13 OF 30  
(check only one)  

|                              |                              |   |                             |
|------------------------------|------------------------------|---|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16 |
|                              |                              |   | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)

**Republican Governance Group/Tuesday Group PAC**

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

**A. Equipment Leasing & Finance Assn. PAC**Mailing Address 1825 K St NW  
Ste 900City  
WashingtonState  
DCZip Code  
20006-1231FEC ID number of contributing  
federal political committee.

C

C00132282

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 29 / 2024

Transaction ID : AE2A898C6026845ED979

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

**B. Fresenius Medical Care Holdings Inc.PAC**Mailing Address 801 Pennsylvania Ave NW  
#820City  
WashingtonState  
DCZip Code  
20004-2615FEC ID number of contributing  
federal political committee.

C

C00401299

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2024

Transaction ID : AB098C3BBFDE74EC9B07

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

**C. Huntington Ingalls Industries, Inc. Employees PAC**Mailing Address 300 M St SE  
Ste 350City  
WashingtonState  
DCZip Code  
20003-3436FEC ID number of contributing  
federal political committee.

C

C00325092

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2024

Transaction ID : A84E89A1DECCD4BCDB39

Amount of Each Receipt this Period

5000.00

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

15000.00

**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 PageFOR LINE NUMBER: PAGE 14 OF 30  
(check only one)  

|                              |                              |   |                             |
|------------------------------|------------------------------|---|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16 |
|                              |                              |   | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)

Republican Governance Group/Tuesday Group PAC

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

**A. International Paper PAC**

Mailing Address 1101 Pennsylvania Avenue, N.W., #2

City  
WashingtonState  
DCZip Code  
20004FEC ID number of contributing  
federal political committee.

C C00034405

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2024

Transaction ID : A616F370C93574A8EB84

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

**B. International Warehouse Logistics Assn. PAC**Mailing Address 2800 S River Rd  
Ste 260City  
Des PlainesState  
ILZip Code  
60018-6003FEC ID number of contributing  
federal political committee.

C C00303032

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 21 / 2024

Transaction ID : AD1538AF1C468401D850

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

**C. KPMG Partners/Principals and Employees PAC**

Mailing Address 1801 K Street, N.W.

City  
WashingtonState  
DCZip Code  
20006FEC ID number of contributing  
federal political committee.

C C00280222

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 16 / 2024

Transaction ID : AFAB1F787EEB7468888D

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

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

15000.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 15 OF 30  
(check only one)

|                              |                              |   |                             |
|------------------------------|------------------------------|---|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16 |
|                              |                              |   | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)

Republican Governance Group/Tuesday Group PAC

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

**A. Medicaid Health Plans of America PAC**

Mailing Address 1575 Eye Street, N.W., Suite 300

City  
WashingtonState  
DCZip Code  
20005FEC ID number of contributing  
federal political committee.

C

C00475426

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2024

Transaction ID : A6CD659264F1A42D2A41

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

**B. Merck & Co., Inc. Employees Political Action Committee**

Mailing Address 601 Pennsylvania Ave, N.W., #1200

City  
WashingtonState  
DCZip Code  
20004FEC ID number of contributing  
federal political committee.

C

C00097485

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2024

Transaction ID : AB246E151EFA44321989

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

**C. National Active and Retired Federal Employees Association PAC**

Mailing Address 606 N. Washington Street

City  
AlexandriaState  
VAZip Code  
22314FEC ID number of contributing  
federal political committee.

C

C00091561

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 13 / 2024

Transaction ID : AF779EAB94AD54DE38A0

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

15000.00

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 16 OF 30

(check only one)

|                              |                              |   |                             |
|------------------------------|------------------------------|---|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16 |
| <input type="checkbox"/> 17  |                              |   |                             |

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NAME OF COMMITTEE (In Full)

Republican Governance Group/Tuesday Group PAC

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

**A. National Association of Benefits and Insurance Professionals PAC**Mailing Address 999 E St NW  
Ste 400City  
WashingtonState  
DCZip Code  
20004-2007FEC ID number of contributing  
federal political committee.

C C00283135

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2024

Transaction ID : AC2EB6BEBB28F4DFFB4C

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

**B. National Association of Convenience Stores PAC**

Mailing Address 1600 Duke Street

City  
AlexandriaState  
VAZip Code  
22314FEC ID number of contributing  
federal political committee.

C C00126763

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2024

Transaction ID : A06C23CA6C7D74CACAA70

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

**C. National Automobile Dealers Association PAC**

Mailing Address 8484 Westpark Drive, #500

City  
TysonsState  
VAZip Code  
22102FEC ID number of contributing  
federal political committee.

C C00040998

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2024

Transaction ID : AFF3A4A9B7EA3415D8EB

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

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

15000.00



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

FOR LINE NUMBER: PAGE 17 OF 30

(check only one)

|                              |                              |   |                             |
|------------------------------|------------------------------|---|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16 |
|                              |                              |   | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)

**Republican Governance Group/Tuesday Group PAC**

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

**A. National Emergency Medicine PAC**

Mailing Address 4950 W. Royal Lane

City  
IrvingState  
TXZip Code  
75038FEC ID number of contributing  
federal political committee.

C

C00140061

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2024

Transaction ID : AE099FBD101E449DE892

Amount of Each Receipt this Period

5000.00

☐

Memo Item

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

**B. National Marine Manufacturers Assn. PAC**

Mailing Address 650 Massachusetts Avenue, N.W., #5

City  
WashingtonState  
DCZip Code  
20001FEC ID number of contributing  
federal political committee.

C

C00245548

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 23 / 2024

Transaction ID : AF34663721B2C4BDABF1

Amount of Each Receipt this Period

5000.00

☐

Memo Item

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

**C. North America's Building Trades Unions Political Education Fund**

Mailing Address 815 16th Street, N.W., #600

City  
WashingtonState  
DCZip Code  
20006FEC ID number of contributing  
federal political committee.

C

C00003160

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

General

Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 15 / 2024

Transaction ID : A154DAE049E2E43A2B85

Amount of Each Receipt this Period

2500.00

☐

Memo Item

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

12500.00

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 PageFOR LINE NUMBER: PAGE 18 OF 30  
(check only one)  

|                              |                              |   |                             |
|------------------------------|------------------------------|---|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16 |
|                              |                              |   | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)

Republican Governance Group/Tuesday Group PAC

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

**A. PG&E Corporation Employees Energy PAC**

Mailing Address 77 Beale Street, #B29H

City  
San FranciscoState  
CAZip Code  
94105FEC ID number of contributing  
federal political committee.

C

C00177469

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 24 / 2024

Transaction ID : AFB1C13ED3ED14671AAE

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

**B. Tenet Healthcare Corporation PAC**

Mailing Address 14201 Dallas Parkway

City  
DallasState  
TXZip Code  
75254FEC ID number of contributing  
federal political committee.

C

C00119354

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2024

Transaction ID : A6731AAE7AE254B9D864

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

**C. The Boeing Company PAC**

Mailing Address 929 Long Bridge Drive

City  
ArlingtonState  
VAZip Code  
22202FEC ID number of contributing  
federal political committee.

C

C00142711

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2024

Transaction ID : A4D74A2BE013C4201A33

Amount of Each Receipt this Period

5000.00

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

15000.00

**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 PageFOR LINE NUMBER: PAGE 19 OF 30  
(check only one)

|                              |                              |   |                             |
|------------------------------|------------------------------|---|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16 |
|                              |                              |   | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)

**Republican Governance Group/Tuesday Group PAC**

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

**A. The Chemours Company Political Action Committee**

Mailing Address 10 G Street, N.E., #600

City  
WashingtonState  
DCZip Code  
20002FEC ID number of contributing  
federal political committee.

C

C00656868

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 20 / 2024**Transaction ID : A56205DF0E13A4435B8D**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

**B. The Council of Insurance Agents & Brokers PAC**

Mailing Address 701 Pennsylvania Avenue, N.W., #75

City  
WashingtonState  
DCZip Code  
20004-2661FEC ID number of contributing  
federal political committee.

C

C00039578

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2024**Transaction ID : A351C3C0BDDAC4794897**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

**C. Transport Workers Union of America Political Contributions Committee**

Mailing Address 1220 19th Street, N.W., #600

City  
WashingtonState  
DCZip Code  
20036FEC ID number of contributing  
federal political committee.

C

C00008268

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2024**Transaction ID : A020661241B154DCA9E0**

Amount of Each Receipt this Period

5000.00

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

15000.00

**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 PageFOR LINE NUMBER: PAGE 20 OF 30  
(check only one)  

|                              |                              |   |                             |
|------------------------------|------------------------------|---|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16 |
|                              |                              |   | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)

**Republican Governance Group/Tuesday Group PAC**

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

**A. Union Pacific Corp. Fund for Effective Gov**

Mailing Address 700 13th Street, N.W., #350

City  
WashingtonState  
DCZip Code  
20005FEC ID number of contributing  
federal political committee.

C

C00010470

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 10 / 2024**Transaction ID : AFDCBD7061BC24ADB9A:**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

**B. United Mine Workers of America-Coal Miners PAC**

Mailing Address 18354 Quantico Gateway Drive, #200

City  
TriangleState  
VAZip Code  
22172FEC ID number of contributing  
federal political committee.

C

C00013342

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 02 / 2024**Transaction ID : A07743F70D75141D6B3C**

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

**C. UnitedHealth Group, Inc. PAC**

Mailing Address 701 Pennsylvania Avenue, N.W., #20

City  
WashingtonState  
DCZip Code  
20004FEC ID number of contributing  
federal political committee.

C

C00274431

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 05 / 2024**Transaction ID : A7B029F7EB296455BA6E**

Amount of Each Receipt this Period

5000.00

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

12500.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 21 OF 30

|                              |                              |   |                             |
|------------------------------|------------------------------|---|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16 |
|                              |                              |   | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)

Republican Governance Group/Tuesday Group PAC

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

**A. Zeneca Inc. Political Action Committee**

Mailing Address 1800 Concord Pike, P. O. Box 15437

City  
WilmingtonState  
DEZip Code  
19850FEC ID number of contributing  
federal political committee.

C

C00279455

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 12 / 2024

Transaction ID : AD704414D90C64D03B68

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

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

5000.00

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

207500.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 22 OF 30  
(check only one)

|                              |                              |                              |                             |                             |                             |                             |  |                             |
|------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|--|-----------------------------|
| <input 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 checked="" type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|--|-----------------------------|

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NAME OF COMMITTEE (In Full)

Republican Governance Group/Tuesday Group PAC

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

**A.** Todos Con Jenniffer, Inc.

Mailing Address P. O. Box 367111

City  
San JuanState  
PRZip Code  
00936FEC ID number of contributing  
federal political committee.

C

C00588392

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2024

Transaction ID : ADA511240B00A46588AB

Amount of Each Receipt this Period

4000.00

☐ Memo Item  
contributions refunded

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

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary  
☐ Other (specify) ▼☐ General

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary  
☐ Other (specify) ▼☐ General

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

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

4000.00

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

4000.00

**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 23 OF 30

|   |                              |                              |                             |                              |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)

Republican Governance Group/Tuesday Group PAC

Full Name (Last, First, Middle Initial)

**A. Anedot**

Mailing Address P. O. Box 84314

City  
Baton RougeState  
LAZip Code  
70884

Purpose of Disbursement

credit card fees

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

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

FEC Identification Number

**C**

Transaction ID : BCF16070E9

Amount of Each Disbursement this Period

87.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Anedot**

Mailing Address P. O. Box 84314

City  
Baton RougeState  
LAZip Code  
70884

Purpose of Disbursement

credit card fees

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

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

FEC Identification Number

**C**

Transaction ID : B329B0BC45I

Amount of Each Disbursement this Period

17.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Delaney, Regan, E., ,**

Mailing Address 1514 K Street, S.E., Unit 2

City  
WashingtonState  
DCZip Code  
20003

Purpose of Disbursement

communications consulting

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

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

FEC Identification Number

**C**

Transaction ID : BD260662D3

Amount of Each Disbursement this Period

1000.00

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

1105.60

**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 24 OF 30

|   |                              |                              |                             |                              |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)

Republican Governance Group/Tuesday Group PAC

Full Name (Last, First, Middle Initial)

**A. Osborne Events**

Mailing Address 10 S. King Street, #205

City  
LeesburgState  
VAZip Code  
20175Purpose of Disbursement  
event expense/transportation

Candidate Name

Category/  
TypeOffice Sought: 

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : B77A6FD0BA

Amount of Each Disbursement this Period

3087.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Robert Watkins & Company, P.A.**

Mailing Address 610 S. Boulevard

City  
TampaState  
FLZip Code  
33606Purpose of Disbursement  
accounting services

Candidate Name

Category/  
TypeOffice Sought: 

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 

|                          |                 |                          |         |
|--------------------------|-----------------|--------------------------|---------|
| <input type="checkbox"/> | Primary         | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) |                          |         |

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : BA419F84E5f

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. The Endicott Group, LLC**

Mailing Address 124 16th Street, S.E.

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
fundraising consulting

Candidate Name

Category/  
TypeOffice Sought: 

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : BF2E54BCDI

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

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

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

10087.50



**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 25 OF 30

|   |                              |                              |                             |                              |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)

Republican Governance Group/Tuesday Group PAC

Full Name (Last, First, Middle Initial)

**A. The Endicott Group, LLC**

Mailing Address 124 16th Street, S.E.

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
fundraising expenses

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : B8C7240F191

Amount of Each Disbursement this Period

5489.72

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. The Endicott Group, LLC**

Mailing Address 124 16th Street, S.E.

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
fundraising consulting

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : BA30A3C9931

Amount of Each Disbursement this Period

14370.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

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

19859.72

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

31052.82

**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 26 OF 30

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

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NAME OF COMMITTEE (In Full)

Republican Governance Group/Tuesday Group PAC

Full Name (Last, First, Middle Initial)

**A. Brian Fitzpatrick for All of Us**

Mailing Address P. O. Box 939

City  
LanghorneState  
PAZip Code  
19047Purpose of Disbursement  
contribution-PA01

011

Candidate Name

Fitzpatrick, Brian, , ,

Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2024  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: PA District: 01

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |      |
|---|---|---|---|---|---|---|---|---|---|---|---|------|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y    |
| 0 | 2 |   |   | 0 | 1 |   |   |   |   |   |   | 2024 |

FEC Identification Number

**C** C00607416**Transaction ID : BAEB689198**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Cliff Bentz for Congress**

Mailing Address 660 Morgan Avenue

City  
OntarioState  
ORZip Code  
97914Purpose of Disbursement  
contribution-OR02

011

Candidate Name

Bentz, Cliff, , ,

Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2024  
☐ Primary ☒ General  
☐ Other (specify)

State: OR District: 02

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |      |
|---|---|---|---|---|---|---|---|---|---|---|---|------|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y    |
| 0 | 2 |   |   | 0 | 1 |   |   |   |   |   |   | 2024 |

FEC Identification Number

**C** C00725465**Transaction ID : B46BF8059B**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Curtis for Congress**

Mailing Address P.O. Box 296

City  
ProvoState  
UTZip Code  
84603-0296Purpose of Disbursement  
contribution-UT03

011

Candidate Name

Curtis, John, , ,

Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2024  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Convention

State: UT District: 03

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |      |
|---|---|---|---|---|---|---|---|---|---|---|---|------|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y    |
| 0 | 2 |   |   | 0 | 1 |   |   |   |   |   |   | 2024 |

FEC Identification Number

**C** C00647339**Transaction ID : B2F59AC2A**

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

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

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

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NAME OF COMMITTEE (In Full)

Republican Governance Group/Tuesday Group PAC

Full Name (Last, First, Middle Initial)

**A. Don Bacon for Congress**

Mailing Address P. O. Box 391368

City  
OmahaState  
NEZip Code  
68139Purpose of Disbursement  
contribution-NE02

011

Candidate Name

Bacon, Don, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NE

District: 02

Date of Disbursement

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

FEC Identification Number

C C00575167

Transaction ID : B421ECBCB

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Friends of Dave Joyce**

Mailing Address 9856 Archer Lane

City  
DublinState  
OHZip Code  
43017Purpose of Disbursement  
contribution-OH14

011

Candidate Name

Joyce, David, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH

District: 14

Date of Disbursement

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

FEC Identification Number

C C00527457

Transaction ID : B4C7F24CDE

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Garbarino for Congress**

Mailing Address P. O. Box 101

City  
BayportState  
NYZip Code  
11705Purpose of Disbursement  
contribution-NY02

011

Candidate Name

Garbarino, Andrew, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NY

District: 02

Date of Disbursement

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

FEC Identification Number

C C00729954

Transaction ID : BA1FAF9564

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

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

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

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NAME OF COMMITTEE (In Full)

Republican Governance Group/Tuesday Group PAC

Full Name (Last, First, Middle Initial)

**A. Jay Obernolte for Congress**Mailing Address 824 S. Milledge Avenue  
Suite 101City  
AthensState  
GAZip Code  
30605Purpose of Disbursement  
contribution-CA23

011

Category/  
Type

Candidate Name

Obernolte, Jay, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA

District: 23

Date of Disbursement

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

FEC Identification Number

C C00720078

Transaction ID : B1CAC5D54E

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Kean for Congress, Inc.**

Mailing Address P. O. Box 999

City  
EdisonState  
NJZip Code  
08818Purpose of Disbursement  
contribution-NJ07

011

Category/  
Type

Candidate Name

Kean, Thomas H., , , Jr.

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NJ

District: 07

Date of Disbursement

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

FEC Identification Number

C C00703058

Transaction ID : BDD1709E83I

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Lawler for Congress**

Mailing Address P. O. Box 87

City  
South SalemState  
NYZip Code  
10590Purpose of Disbursement  
contribution-NY17

011

Category/  
Type

Candidate Name

Lawler, Michael Vincent, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NY

District: 17

Date of Disbursement

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

FEC Identification Number

C C00815415

Transaction ID : BE070CB644

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

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

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

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NAME OF COMMITTEE (In Full)

Republican Governance Group/Tuesday Group PAC

Full Name (Last, First, Middle Initial)

**A. Marc for US, Inc.**

Mailing Address P. O. Box 5158

City  
PoughkeepsieState  
NYZip Code  
12602Purpose of Disbursement  
contribution-NY19

011

Category/  
Type

Candidate Name

Molinaro, Marcus J., , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NY

District: 19

Date of Disbursement

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

FEC Identification Number

C C00789586

Transaction ID : B110C254EB

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Mike Bost for Congress Committee**

Mailing Address P. O. Box 1212

City  
MurphysboroState  
ILZip Code  
62966Purpose of Disbursement  
contribution-IL12

011

Category/  
Type

Candidate Name

Bost, Michael, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IL

District: 12

Date of Disbursement

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

FEC Identification Number

C C00546499

Transaction ID : BF2F18949E6

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Miller-Meeks for Congress**

Mailing Address P. O. Box 33

City  
OttumwaState  
IAZip Code  
52501Purpose of Disbursement  
contribution-IA01

011

Category/  
Type

Candidate Name

Miller-Meeks, Mariannette Jane, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA

District: 01

Date of Disbursement

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

FEC Identification Number

C C00558825

Transaction ID : BDD07DE9A

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

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

PAGE 30 OF 30

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

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NAME OF COMMITTEE (In Full)

Republican Governance Group/Tuesday Group PAC

Full Name (Last, First, Middle Initial)

**A. Young Kim for Congress**

Mailing Address PO Box 17490

City  
AnaheimState  
CAZip Code  
92817-7490Purpose of Disbursement  
contribution-CA40

011

Category/  
Type

Candidate Name

Kim, Young, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA

District: 40

Date of Disbursement

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

FEC Identification Number

C C00665638

Transaction ID : B78B9E4878I

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

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

1000.00

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

13000.00