

# 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**  
406 PAC

ADDRESS (number and street) PO BOX 4907  
HELENA MT 59604  
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C** C00764431 3. IS THIS REPORT  NEW (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 [MM] / [DD] / [YYYY] in the State of [ ]  
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on [MM] / [DD] / [YYYY] in the State of [ ]

5. Covering Period [09] / [01] / [2022] through [09] / [30] / [2022]

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

Signature of Treasurer DENOWH, CHARLES, , , [Electronically Filed] Date [10] / [20] / [2022]

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**406 PAC**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2022"/>	<input type="text" value="43110.21"/>	<input type="text" value="43110.21"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="80101.97"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="21399.50"/>	<input type="text" value="136128.22"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="101501.47"/>	<input type="text" value="179238.43"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="27795.00"/>	<input type="text" value="105531.96"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="73706.47"/>	<input type="text" value="73706.47"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**406 PAC**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	2500.00	32500.00
(ii) Unitemized .....	0.00	151.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	2500.00	32651.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	2500.00	32651.00
12. Transfers From Affiliated/Other Party Committees.....	18899.50	103477.22
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	21399.50	136128.22
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	21399.50	136128.22

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	2195.00	14031.96
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	2195.00	14031.96
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	25600.00	89500.00
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	2000.00
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)) ..	27795.00	105531.96
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	27795.00	105531.96

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	2500.00	32651.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	2500.00	32651.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	2195.00	14031.96
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	2195.00	14031.96

**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 15  
(check only one)

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

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)  
**406 PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
WILSEY, DIANE, B., MS.,

Mailing Address 2590 JACKSON ST

City SAN FRANCISCO	State CA	Zip Code 94115-1121
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) A. WILSEY PROPERTIES COMPANY	Occupation (for Individual) OWNER/C.E.O.
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
09		27		2022

**Transaction ID : SA11A.71689**

Amount of Each Receipt this Period  
2500.00

Memo Item CONTRIBUTION

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

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
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

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

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
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 15
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**406 PAC**

**A. ROSENDALE VICTORY FUND**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1390 CHAIN BRIDGE RD STE 515

City MCLEAN	State VA	Zip Code 22101-3904
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00749788

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
103477.22

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 08 / 2022  
**Transaction ID : SA12.71550**

Amount of Each Receipt this Period  
18899.50

Memo Item  
TRANSFER

**B. HARRIS, JAY, S., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 3611 POWDERHORN CIR

City BILLINGS	State MT	Zip Code 59102-0372
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)  
YELLOWSTONE BANK BANKER

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  
08 / 11 / 2022  
**Transaction ID : SA.71414.6.RV12**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER  
TRANSFER FROM ROSENDALE VICTORY

**C. HARRIS, JOEL, S., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address P.O. BOX 372  
110 CARR AVE

City COLUMBUS	State MT	Zip Code 59019-0372
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)  
YELLOWSTONE BANK BANKER

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2100.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
08 / 11 / 2022  
**Transaction ID : SA.71416.6.RV12**

Amount of Each Receipt this Period  
2100.00

Memo Item  
TRANSFER  
TRANSFER FROM ROSENDALE VICTORY

<b>SUBTOTAL</b> of Receipts This Page (optional).....	18899.50
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

**A. OBUS, NELSON, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 291 RUSSELL RD  
 City PRINCETON State NJ Zip Code 08540-6733  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) FINANCE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2100.00

Date of Receipt **08 / 24 / 2022**  
**Transaction ID : SA.71491.6.RV12**  
 Amount of Each Receipt this Period 2100.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM ROSENDALE VICTORY

**B. RYAN, THOMAS, C., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3210 W. MACDONALD DR.  
 City BILLINGS State MT Zip Code 59102-0554  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SHINBONE RANCH CO., LLC Occupation (for Individual) CATTLE RANCHING  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2900.00

Date of Receipt **07 / 28 / 2022**  
**Transaction ID : SA.71371.6.RV12**  
 Amount of Each Receipt this Period 2900.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM ROSENDALE VICTORY

**C. TAYLOR, JULIE, K., MRS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 605 W 14TH ST  
 City LAUREL State MT Zip Code 59044-9605  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) YELLOWSTONE BANK Occupation (for Individual) VICE PRESIDENT  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **08 / 11 / 2022**  
**Transaction ID : SA.71415.6.RV12**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM ROSENDALE VICTORY

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00  
**TOTAL** This Period (last page this line number only)..... ▶



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 15
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**406 PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. WILSON, WILLIAM, E., MR.,</b>		Date of Receipt MM / DD / YYYY 08 / 29 / 2022
Mailing Address 10955 HORSEBACK RIDGE ROAD		<b>Transaction ID : SA.71493.6.RV12</b>
City MISSOULA	State MT	Zip Code 59804-5862
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 4000.00
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	<input checked="" type="checkbox"/> Memo Item TRANSFER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4000.00	TRANSFER FROM ROSENDALE VICTORY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B.</b>		Date of Receipt MM / DD / YYYY
Mailing Address		Amount of Each Receipt this Period
City	State	Zip Code
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual)	Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C.</b>		Date of Receipt MM / DD / YYYY
Mailing Address		Amount of Each Receipt this Period
City	State	Zip Code
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual)	Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	18899.50

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**406 PAC**

Full Name (Last, First, Middle Initial)  
**A. INTUIT**

Mailing Address **2700 COAST AVE**

City **MOUNTAIN VIEW** State **CA** Zip Code **94043**

Purpose of Disbursement  
**SUBSCRIPTION**

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: **09 / 06 / 2022**

FEC Identification Number: **C**

**Transaction ID : SB.1**

Amount of Each Disbursement this Period: **55.00**

Memo Item

Full Name (Last, First, Middle Initial)  
**B. RIGHTSIDE COMPLIANCE**

Mailing Address **PO BOX 341027**

City **AUSTIN** State **TX** Zip Code **78734**

Purpose of Disbursement  
**COMPLIANCE CONSULTING**

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: **09 / 08 / 2022**

FEC Identification Number: **C**

**Transaction ID : SB.2**

Amount of Each Disbursement this Period: **1540.00**

Memo Item

Full Name (Last, First, Middle Initial)  
**C. RIGHTSIDE COMPLIANCE**

Mailing Address **PO BOX 341027**

City **AUSTIN** State **TX** Zip Code **78734**

Purpose of Disbursement  
**COMPLIANCE CONSULTING**

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: **09 / 21 / 2022**

FEC Identification Number: **C**

**Transaction ID : SB.3**

Amount of Each Disbursement this Period: **550.00**

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ **2145.00**

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
**406 PAC**

Full Name (Last, First, Middle Initial)

### A. CMDI

Mailing Address 1593 SPRING HILL RD STE 400

City  
VIENNA

State  
VA

Zip Code  
22182

Purpose of Disbursement  
DATABASE MANAGEMENT SERVICE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB.12

Amount of Each Disbursement this Period

50.00

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	/	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	/	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).....▶

50.00

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

2195.00

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

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

FOR LINE NUMBER:  
(check only one)

<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)  
**406 PAC**

**A. ALEK FOR OREGON**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 347

City WINCHESTER State OR Zip Code 97495

Purpose of Disbursement CONTRIBUTION

Candidate Name SKARLATOS, ALEK, , ,

Office Sought:  House  Senate  President

Disbursement For: 2022  Primary  General  Other (specify) ▼

State: OR District: 04

Date of Disbursement: 09 / 22 / 2022

FEC Identification Number: C00715854  
**Transaction ID : SB.4**  
Amount of Each Disbursement this Period: 2000.00

Memo Item

**B. CAPTAIN HIGGINS FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 61747

City LAFAYETTE State LA Zip Code 70596

Purpose of Disbursement CONTRIBUTION

Candidate Name HIGGINS, CLAY, , ,

Office Sought:  House  Senate  President

Disbursement For: 2022  Primary  General  Other (specify) ▼

State: LA District: 03

Date of Disbursement: 09 / 22 / 2022

FEC Identification Number: C00617662  
**Transaction ID : SB.5**  
Amount of Each Disbursement this Period: 2000.00

Memo Item

**C. FALLON FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 614

City CELINA State TX Zip Code 75009

Purpose of Disbursement CONTRIBUTION

Candidate Name FALLON, PATRICK, , ,

Office Sought:  House  Senate  President

Disbursement For: 2022  Primary  General  Other (specify) ▼

State: TX District: 04

Date of Disbursement: 09 / 22 / 2022

FEC Identification Number: C00750307  
**Transaction ID : SB.6**  
Amount of Each Disbursement this Period: 5000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 9000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**406 PAC**

**A. GOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 117

City LOVINGSTON State VA Zip Code 22949

Purpose of Disbursement CONTRIBUTION

Candidate Name **GOOD, ROBERT, , ,**

Office Sought:  House  Senate  President

Disbursement For: 2022  Primary  General  Other (specify) ▼

State: VA District: 05

Date of Disbursement: 09 / 22 / 2022

FEC Identification Number: **C** C00721308  
**Transaction ID : SB.7**  
Amount of Each Disbursement this Period: 2500.00

Memo Item

**B. JOHN JAMES FOR CONGRESS, INC.**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 628

City ST CLAIR SHORES State MI Zip Code 48080

Purpose of Disbursement CONTRIBUTION

Candidate Name **JAMES, JOHN, , ,**

Office Sought:  House  Senate  President

Disbursement For: 2022  Primary  General  Other (specify) ▼

State: MI District: 10

Date of Disbursement: 09 / 22 / 2022

FEC Identification Number: **C** C00803502  
**Transaction ID : SB.8**  
Amount of Each Disbursement this Period: 1000.00

Memo Item

**C. MILLER-MEEKS FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 33

City OTTUMWA State IA Zip Code 52501

Purpose of Disbursement CONTRIBUTION

Candidate Name **MILLER-MEEKS, MARIANNETTE, , ,**

Office Sought:  House  Senate  President

Disbursement For: 2022  Primary  General  Other (specify) ▼

State: IA District: 01

Date of Disbursement: 09 / 22 / 2022

FEC Identification Number: **C** C00558825  
**Transaction ID : SB.9**  
Amount of Each Disbursement this Period: 2500.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 6000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**406 PAC**

**A. MOONEY FOR CONGRESS 2022**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 1863

M M M	/	D D D	/	Y Y Y Y Y
09		22		2022

City MARTINSBURG State WV Zip Code 25402

FEC Identification Number

Purpose of Disbursement CONTRIBUTION

C	C00768705
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Candidate Name MOONEY, ALEXANDER, , ,

Category/Type

Transaction ID : SB.10

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
 Disbursement For: 2022  Primary  General  Other (specify) ▼  
 State: WV District: 02

5000.00
---------

Memo Item

**B. YVETTE4CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1111 10TH ST #404

M M M	/	D D D	/	Y Y Y Y Y
09		22		2022

City ALAMOGORDO State NM Zip Code 88310

FEC Identification Number

Purpose of Disbursement CONTRIBUTION

C	C00655571
---	-----------

Candidate Name HERRELL, STELLA YVETTE, , ,

Category/Type

Transaction ID : SB.11

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
 Disbursement For: 2022  Primary  General  Other (specify) ▼  
 State: NM District: 02

2100.00
---------

Memo Item

**C. ELI CRANE FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 1950

M M M	/	D D D	/	Y Y Y Y Y
09		30		2022

City CORTARO State AZ Zip Code 85652

FEC Identification Number

Purpose of Disbursement CONTRIBUTION

C	C00784934
---	-----------

Candidate Name CRANE, ELI, , ,

Category/Type

Transaction ID : SB.13

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
 Disbursement For: 2022  Primary  General  Other (specify) ▼  
 State: AZ District: 02

1000.00
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Memo Item

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

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

8100.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**406 PAC**

Full Name (Last, First, Middle Initial)  
**A. JEFF DUNCAN FOR CONGRESS**

Date of Disbursement  
MM / DD / YYYY  
09 / 30 / 2022

Mailing Address PO BOX 845

City LAURENS State SC Zip Code 29360

Purpose of Disbursement CONTRIBUTION

Candidate Name DUNCAN, JEFFREY, , ,

Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify) ▼

State: DC District: 03

FEC Identification Number  
**C** C00460550  
**Transaction ID : SB.14**  
Amount of Each Disbursement this Period  
1000.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. SCHMITT FOR SENATE**

Date of Disbursement  
MM / DD / YYYY  
09 / 30 / 2022

Mailing Address 101 W ARGONNE DR, #24

City ST LOUIS State MO Zip Code 63122

Purpose of Disbursement CONTRIBUTION

Candidate Name SCHMITT, ERIC, , ,

Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify) ▼

State: MO District: 00

FEC Identification Number  
**C** C00775015  
**Transaction ID : SB.15**  
Amount of Each Disbursement this Period  
1500.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C.**

Date of Disbursement  
MM / DD / YYYY

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

State: District:

FEC Identification Number  
**C**

Amount of Each Disbursement this Period

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	25600.00