

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

EDPAC

ADDRESS (number and street) 415 New Jersey Avenue, SE
#1
 Check if different than previously reported. (ACC) Washington DC 20003

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00467837

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:
- | | | | |
|--------------------------------------|---|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input checked="" type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> 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:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> 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 06 / 01 / 2019 through M M M / D D D / Y Y Y Y Y Y 06 / 30 / 2019

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

Type or Print Name of Treasurer _____

Signature of Treasurer Giarraputo, Holly, , , [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y 07 / 19 / 2019

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									
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

EDPAC

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="2019"/>		13013.69
(b) Cash on Hand at Beginning of Reporting Period.....	21354.86	
(c) Total Receipts (from Line 19)	20000.00	56000.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	41354.86	69013.69
7. Total Disbursements (from Line 31).....	22825.81	50484.64
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	18529.05	18529.05
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

EDPAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
06 / 01 / 2019 To: M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

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).....	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	20000.00	56000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	20000.00	56000.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	20000.00	56000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	20000.00	56000.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	1825.81	19484.64
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1825.81	19484.64
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	20000.00	30000.00
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).....	1000.00	1000.00
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)) ..	22825.81	50484.64
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	22825.81	50484.64

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	20000.00	56000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	20000.00	56000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1825.81	19484.64
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1825.81	19484.64

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 18
<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

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)
EDPAC

A. Bank Of New York Mellon
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **BNY MELLON CENTER**
Rm 3225

City **Pittsburgh** State **PA** Zip Code **15258-0001**

FEC ID number of contributing federal political committee. **C C00017558**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
06 / 27 / 2019

Transaction ID : 1914539

Amount of Each Receipt this Period
1000.00

Memo Item

B. Council Of Insurance Agents & Brokers
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **701 Pennsylvania Ave NW**
Ste 750

City **Washington** State **DC** Zip Code **20004-2661**

FEC 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 ▼
2500.00

Date of Receipt
06 / 30 / 2019

Transaction ID : 1926337

Amount of Each Receipt this Period
2500.00

Memo Item

C. Depository Trust & Clearing Corp PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **1455 Pennsylvania Ave NW**
Ste 725

City **Washington** State **DC** Zip Code **20004-1036**

FEC ID number of contributing federal political committee. **C C00497917**

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
06 / 08 / 2019

Transaction ID : 1710397

Amount of Each Receipt this Period
1500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	5000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 18
<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)
EDPAC

A. Investment Company Institute PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1401 H St NW # 1200
City Washington State DC Zip Code 20005-2110
FEC ID number of contributing federal political committee. **C** C00105981
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **05 / 31 / 2019**
Transaction ID : 1710398
Amount of Each Receipt this Period 2500.00
 Memo Item
* Earmarked Contribution: See Below

B. New Democrat Coalition PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 233 Pennsylvania Ave SE
City Washington State DC Zip Code 20003-1121
FEC ID number of contributing federal political committee. **C** C00409730
Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **06 / 08 / 2019**
Transaction ID : 1710398E
Amount of Each Receipt this Period 2500.00
 Memo Item
Note: Above Contribution earmarked through this organization.

C. National Multifamily Housing Council PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1850 M St NW Ste 540
City Washington State DC Zip Code 20036-5816
FEC ID number of contributing federal political committee. **C** C00130773
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **06 / 28 / 2019**
Transaction ID : 1922499
Amount of Each Receipt this Period 2500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	5000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 18
<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)
EDPAC

A. NELNET INC PAC (NELNET PAC)
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 Connecticut Ave NW
 FI 10
 City Washington State DC Zip Code 20036-5334
 FEC ID number of contributing federal political committee. **C** C00370015
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 26 / 2019
Transaction ID : 1909375
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. Real Estate Investment Trusts PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1875 I St NW
 Ste 600
 City Washington State DC Zip Code 20006-5413
 FEC ID number of contributing federal political committee. **C** C00303339
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 19 / 2019
Transaction ID : 1817767
 Amount of Each Receipt this Period 2500.00
 Memo Item

C. USBancorp
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 950 F St NW
 Ste 750
 City Washington State DC Zip Code 20004-1487
 FEC ID number of contributing federal political committee. **C** C00018036
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 28 / 2019
Transaction ID : 1922373
 Amount of Each Receipt this Period 2500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	10000.00
TOTAL This Period (last page this line number only).....	20000.00

**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 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)
EDPAC

Full Name (Last, First, Middle Initial) A. Campaign Compliance, Inc.		Date of Disbursement MM / DD / YYYY 06 / 02 / 2019	
Mailing Address 3242 Cummins Way		FEC Identification Number C [] Transaction ID : 500262197	
City Missoula	State MT	Zip Code 59802-3222	Amount of Each Disbursement this Period [] 1000.00
Purpose of Disbursement Accounting fee		Category/ Type []	Memo Item <input type="checkbox"/>
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: []		

Full Name (Last, First, Middle Initial) B. Campaign Compliance, Inc.		Date of Disbursement MM / DD / YYYY 06 / 02 / 2019	
Mailing Address 3242 Cummins Way		FEC Identification Number C [] Transaction ID : 500262198	
City Missoula	State MT	Zip Code 59802-3222	Amount of Each Disbursement this Period [] 822.81
Purpose of Disbursement Reimbursement(vendors that aggregate over \$200 listed below)		Category/ Type []	Memo Item <input type="checkbox"/>
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: []		

Full Name (Last, First, Middle Initial) C. NGP VAN Inc.		Date of Disbursement MM / DD / YYYY 06 / 02 / 2019	
Mailing Address 1445 New York Ave NW Ste 200		FEC Identification Number C [] Transaction ID : 500262200	
City Washington	State DC	Zip Code 20005-2158	Amount of Each Disbursement this Period [] 300.00
Purpose of Disbursement Computer software		Category/ Type []	Memo Item <input checked="" type="checkbox"/>
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: []		

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

1822.81

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EDPAC

Full Name (Last, First, Middle Initial) A. Southwest Airlines		Date of Disbursement MM / DD / YYYY 06 / 02 / 2019
Mailing Address PO Box 36647 # 1CR		FEC Identification Number C Transaction ID : 500262199 Amount of Each Disbursement this Period 489.96
City Dallas	State TX	
Zip Code 75235-1647	Purpose of Disbursement Airfare	Amount of Each Disbursement this Period 489.96
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Amount of Each Disbursement this Period
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Amount of Each Disbursement this Period
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	1822.81

**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)
EDPAC

A. ANDY KIM FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 211

M M M	/	D D D	/	Y Y Y Y Y
06		26		2019

City Marlon State NJ Zip Code 08053-0211

FEC Identification Number

Purpose of Disbursement
Contribution

C	C00648220
---	-----------

Candidate Name
KIM, ANDY, , ,

Category/
Type

Transaction ID : 500262194

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: NJ District: 03

1000.00

Memo Item

B. ANGIE CRAIG FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 22116

M M M	/	D D D	/	Y Y Y Y Y
06		26		2019

City Eagan State MN Zip Code 55122-0116

FEC Identification Number

Purpose of Disbursement
Contribution

C	C00575209
---	-----------

Candidate Name
CRAIG, ANGELA, DAWN, ,

Category/
Type

Transaction ID : 500262195

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: MN District: 02

1000.00

Memo Item

C. BETSY DIRKSEN LONDRIGAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 275

M M M	/	D D D	/	Y Y Y Y Y
06		26		2019

City Springfield State IL Zip Code 62705-0275

FEC Identification Number

Purpose of Disbursement
Contribution

C	C00649483
---	-----------

Candidate Name
LONDRIGAN, BETSY, DIRKSEN, ,

Category/
Type

Transaction ID : 500262190

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: IL District: 13

1000.00

Memo Item

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

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

3000.00

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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)
EDPAC

A. CASTEN FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address 928 Warren Ave

City Downers Grove

State IL

Zip Code 60515-3631

Purpose of Disbursement Contribution

Candidate Name

CASTEN, SEAN, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: IL District: 06

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	6		2	0	1	9

FEC Identification Number

C C00648493

Transaction ID : 500262186

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Memo Item

B. CISNEROS FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 40

City Placentia

State CA

Zip Code 92871-0040

Purpose of Disbursement Contribution

Candidate Name

CISNEROS, GILBERT, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: CA District: 39

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	6		2	0	1	9

FEC Identification Number

C C00650648

Transaction ID : 500262205

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
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Memo Item

C. COLIN ALLRED FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 601631

City Dallas

State TX

Zip Code 75360-1631

Purpose of Disbursement Contribution

Candidate Name

ALLRED, COLIN, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: TX District: 32

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	6		2	0	1	9

FEC Identification Number

C C00637868

Transaction ID : 500262182

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
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Memo Item

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

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

3	0	0	0	0	0	0	0	0	0
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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)
EDPAC

A. DR KIM SCHRIER FOR CONGRESS

Full Name (Last, First, Middle Initial)
Date of Disbursement: MM / DD / YYYY
06 / 26 / 2019

Mailing Address PO Box 2728

City Issaquah State WA Zip Code 98027-0125

Purpose of Disbursement Contribution
FEC Identification Number: C00652628
Transaction ID : 500262192
Amount of Each Disbursement this Period: 1000.00

Candidate Name: SCHRIER, KIM, DR., ,
Category/Type: Memo Item

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

State: WA District: 08

B. JASON CROW FOR CONGRESS

Full Name (Last, First, Middle Initial)
Date of Disbursement: MM / DD / YYYY
06 / 26 / 2019

Mailing Address PO Box 32145

City Aurora State CO Zip Code 80041-2145

Purpose of Disbursement Contribution
FEC Identification Number: C00637363
Transaction ID : 500262187
Amount of Each Disbursement this Period: 1000.00

Candidate Name: CROW, JASON, , ,
Category/Type: Memo Item

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

State: CO District: 06

C. JIM COSTA FOR CONGRESS

Full Name (Last, First, Middle Initial)
Date of Disbursement: MM / DD / YYYY
06 / 26 / 2019

Mailing Address 2037 W Bullard Ave # 355

City Fresno State CA Zip Code 93711-1200

Purpose of Disbursement Contribution
FEC Identification Number: C00391029
Transaction ID : 500262188
Amount of Each Disbursement this Period: 1000.00

Candidate Name: COSTA, JIM, , ,
Category/Type: Memo Item

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

State: CA District: 16

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 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)
EDPAC

Full Name (Last, First, Middle Initial) A. KATIE HILL FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 26 / 2019	
Mailing Address 1327 SE Tacoma St # 247			
City Portland	State OR	Zip Code 97202-6639	
Purpose of Disbursement Contribution		Category/ Type	FEC Identification Number C00634212 Transaction ID : 500262206
Candidate Name HILL, KATHERINE, LAUREN, ,			Amount of Each Disbursement this Period 1000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA District: 25	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. KATIE PORTER FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 26 / 2019	
Mailing Address PO Box 5176			
City Irvine	State CA	Zip Code 92616-5176	
Purpose of Disbursement Contribution		Category/ Type	FEC Identification Number C00636571 Transaction ID : 500262204
Candidate Name PORTER, KATHERINE, , ,			Amount of Each Disbursement this Period 1000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA District: 45	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. MAX ROSE FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 26 / 2019	
Mailing Address PO Box 100496			
City Staten Island	State NY	Zip Code 10310-0496	
Purpose of Disbursement Contribution		Category/ Type	FEC Identification Number C00652248 Transaction ID : 500262183
Candidate Name ROSE, MAX, , ,			Amount of Each Disbursement this Period 1000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: NY District: 11	<input type="checkbox"/> Memo Item		

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

3000.00

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

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

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)
EDPAC

A. MIKE LEVIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 555 Capitol Mall
Ste 400

M M M	/	D D D	/	Y Y Y Y Y
06		26		2019

City Sacramento State CA Zip Code 95814-4503

FEC Identification Number

Purpose of Disbursement
Contribution

C	C00634253
---	-----------

Candidate Name
LEVIN, MIKE, , ,

Category/
Type

Transaction ID : 500262203

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: CA District: 49

1000.00

Memo Item

B. MIKIE SHERRILL FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 43032

M M M	/	D D D	/	Y Y Y Y Y
06		26		2019

City Montclair State NJ Zip Code 07043-0032

FEC Identification Number

Purpose of Disbursement
Contribution

C	C00640003
---	-----------

Candidate Name
SHERRILL, MIKIE, , ,

Category/
Type

Transaction ID : 500262185

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: NJ District: 11

1000.00

Memo Item

C. People For Ben

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 31129

M M M	/	D D D	/	Y Y Y Y Y
06		26		2019

City Santa Fe State NM Zip Code 87594-1129

FEC Identification Number

Purpose of Disbursement
Contribution

C	C00443689
---	-----------

Candidate Name
LUJAN, BEN, , ,

Category/
Type

Transaction ID : 500262191

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: NM District: 03

1000.00

Memo Item

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

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

3000.00

**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)
EDPAC

Full Name (Last, First, Middle Initial) A. RITA HART FOR IOWA		Date of Disbursement MM / DD / YYYY 06 / 26 / 2019
Mailing Address PO Box 333		FEC Identification Number C 000706457 Transaction ID : 500262189
City Wheatland	State IA	Zip Code 52777-0333
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name HART, RITA, , ,		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: IA	District: 02	

Full Name (Last, First, Middle Initial) B. SHARICE FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 26 / 2019
Mailing Address 13851 W 63Rd St Num 303		FEC Identification Number C 000670034 Transaction ID : 500262196
City Shawnee	State KS	Zip Code 66216-3800
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name DAVIDS, SHARICE, , ,		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: KS	District: 03	

Full Name (Last, First, Middle Initial) C. TJ COX FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 26 / 2019
Mailing Address PO Box 804		FEC Identification Number C 000648956 Transaction ID : 500262207
City Selma	State CA	Zip Code 93662-0804
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name COX, TERRANCE, (TJ), ,		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: CA	District: 21	

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

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

3000.00

**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)
EDPAC

A. TOM MALINOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 263

M M M	/	D D D	/	Y Y Y Y Y
06		26		2019

City Somerville State NJ Zip Code 08876-0263

FEC Identification Number

Purpose of Disbursement Contribution

C	C00656686
---	-----------

Candidate Name MALINOWSKI, TOM, , ,

Category/Type

Transaction ID : 500262193

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

1000.00

State: NJ District: 07

Memo Item

B. XOCHITL FOR NEW MEXICO

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 2250

M M M	/	D D D	/	Y Y Y Y Y
06		26		2019

City Las Cruces State NM Zip Code 88004-2250

FEC Identification Number

Purpose of Disbursement Contribution

C	C00666149
---	-----------

Candidate Name TORRES SMALL, XOCHITL, , ,

Category/Type

Transaction ID : 500262184

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

1000.00

State: NM District: 02

Memo Item

C.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

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

City State Zip Code

FEC Identification Number

Purpose of Disbursement

C	
---	--

Candidate Name

Category/Type

Amount of Each Disbursement this Period

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

--

State: District:

Memo Item

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

2000.00

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

20000.00

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

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NAME OF COMMITTEE (In Full)
EDPAC

A. Young Survivor Coalition

Full Name (Last, First, Middle Initial)

Mailing Address 75 Broad St
Rm 409

City New York State NY Zip Code 10004-3252

Purpose of Disbursement Nonfederal contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 19 / 2019

FEC Identification Number: C

Transaction ID : 500262202

Amount of Each Disbursement this Period: 1000.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

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).....▶	1000.00