

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS
For Other Than An Authorized Committee

RECEIVED
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Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

AFOGNAK NATIVE CORPORATION - ALUTIIQ PAC

ADDRESS (number and street) 3909 ARCTIC BVD.
 Check if different than previously reported. (ACC) SUITE 500
ANCHORAGE AK 99503

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

C 00443937

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 checked="" 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 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 / 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) |
|--|---------------------------------------|--|

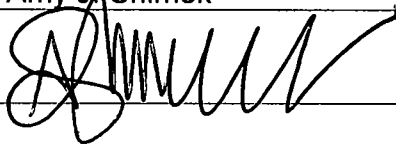
Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period 04 / 01 / 2020 through 06 / 30 / 2020

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: Amy J Shimek

Signature of Treasurer



Date

07 / 13 / 2020

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

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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

AFOGNAK NATIVE CORPORATION - ALUTIIQ 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="2020"/>		39,205.14
(b) Cash on Hand at Beginning of Reporting Period.....	39,575.14	
(c) Total Receipts (from Line 19).....	760.00	1,805.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	40,335.14	41,010.14
7. Total Disbursements (from Line 31).....	0.00	675.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	40,335.14	40,335.14
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	85.00	

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

For further information contact:

Federal Election Commission
1050 First Street, N.E.
Washington, DC 20463

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

AFOGNAK NATIVE CORPORATION - ALUTIIQ PAC

Report Covering the Period: From: MM / DD / YYYY 04 / 01 / 2020 To: MM / DD / YYYY 06 / 30 / 2020

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).....	760.00	1,805.00
(ii) Unitemized.....	0	0
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	760.00	1,805.00
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶	760.00	1,805.00
12. Transfers From Affiliated/Other Party Committees.....	0	0
13. All Loans Received.....	0	0
14. Loan Repayments Received.....	0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0	0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0	0
17. Other Federal Receipts (Dividends, Interest, etc.).....	0	0
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0	0
(b) Levin Funds (from Schedule H5).....	0	0
(c) Total Transfers (add 18(a) and 18(b))..	0	0
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	760.00	1,805.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	760.00	1,805.00

2025 RELEASE UNDER E.O. 14176

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	0
(ii) Non-Federal Share	0	0
(b) Other Federal Operating Expenditures	0	0
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0	0
22. Transfers to Affiliated/Other Party Committees	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees	0	0
24. Independent Expenditures (use Schedule E)	0	0
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)	0	0
26. Loan Repayments Made	0	0
27. Loans Made	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0	675.00
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs)	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0	675.00
29. Other Disbursements (Including Non-Federal Donations)	0	0
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0	0
(ii) "Levin" Share	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds	0	0
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	0	675.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	0	675.00

DETAILED SUMMARY PAGE
of Disbursements

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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)	760.00	1,805.00
34. Total Contribution Refunds (from Line 28(d))	0	675.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0	1,130.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0	0
37. Offsets to Operating Expenditures (from Line 15, page 3)	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0	0

NOT RECORDED IN THE PUBLIC RECORDS

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 1 OF 2

(check only one)

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

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)

AFOGNAK NATIVE CORPORATION - ALUTIIQ PAC

<p>A. BARNES, ELIJAH Full Name of Individual (Last, First, Middle Initial) or Full Organization Name</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y Y</p>		
<p>Mailing Address 2348 COURT CIRCLE</p>			<p>Amount of Each Receipt this Period 120.00</p>		
<p>City VIRGINIA BEACH</p>	<p>State VA</p>	<p>Zip Code 23453</p>	<p><input type="checkbox"/> Memo Item</p>		
<p>FEC ID number of contributing federal political committee. C</p>			<p>*\$20 payroll deduction 4/10, 4/24, 5/8, 5/22, 6/10, 6/25</p>		
<p>Name of Employer (for Individual) ALUTIIQ, LLC</p>		<p>Occupation (for Individual) Subject Matter Expert</p>			
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Aggregate Year-to-Date ▼ 260.00</p>			

<p>B. Brewer, Darrell G. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y Y</p>		
<p>Mailing Address 6629 Stella Road</p>			<p>Amount of Each Receipt this Period 40.00</p>		
<p>City Goodsprings</p>	<p>State TN</p>	<p>Zip Code 38460</p>	<p><input type="checkbox"/> Memo Item</p>		
<p>FEC ID number of contributing federal political committee. C</p>			<p>*\$40 payroll deduction 4/10</p>		
<p>Name of Employer (for Individual) Alutiiq, LLC</p>		<p>Occupation (for Individual) Consultant</p>			
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Aggregate Year-to-Date ▼ 320.00</p>			

<p>C. Hambright, Greg Full Name of Individual (Last, First, Middle Initial) or Full Organization Name</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y Y</p>		
<p>Mailing Address 4982 Cape Seville</p>			<p>Amount of Each Receipt this Period 300.00</p>		
<p>City Anchorage</p>	<p>State AK</p>	<p>Zip Code 99516</p>	<p><input type="checkbox"/> Memo Item</p>		
<p>FEC ID number of contributing federal political committee. C</p>			<p>*\$50 payroll deduction 4/10, 4/24, 5/8, 5/22, 6/10, 6/25</p>		
<p>Name of Employer (for Individual) Afognak Native Corporation</p>		<p>Occupation (for Individual) President/CEO</p>			
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>		<p>Aggregate Year-to-Date ▼ 600.00</p>			

<p>SUBTOTAL of Receipts This Page (optional).....▶</p>	<p>460.00</p>
<p>TOTAL This Period (last page this line number only).....▶</p>	<p></p>

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 2 OF 2
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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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)
AFOGNAK NATIVE CORPORATION - ALUTIIQ PAC

A. Drabek, Alisha
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
1522 E. Kouskov St.

City Kodiak State AK Zip Code 99615

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

Name of Employer (for Individual) Afognak Native Corporation Occupation (for Individual) Executive Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period
150.00

Memo Item
*\$25 payroll deduction 4/10, 4/24, 5/8, 5/22, 6/10, 6/25

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

Mailing Address
10101 Road 2611

City Philadelphia State MS Zip Code 39350

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

Name of Employer (for Individual) Alutiiq, LLC Occupation (for Individual) Chief Operating Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period
150.00

Memo Item
*\$25 payroll deduction 4/10, 4/24, 5/8, 5/22, 6/10, 6/25

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 Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 300.00

TOTAL This Period (last page this line number only).....▶ 760.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
AFOGNAK NATIVE CORPORATION - ALUTHIQ PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor BARNES, ELIJAH			Nature of Debt (Purpose): Non-deposit of employee contribution within 30 days of receipt
Mailing Address 2348 COURT CIRCLE			
City VIRGINIA BEACH	State VA	Zip Code 23453	

Outstanding Balance Beginning This Period 20.00	Amount Incurred This Period 0	Payment This Period 0	Outstanding Balance at Close of This Period 20.00
---	---	---------------------------------	---

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor BREWER, DARRELL G.			Nature of Debt (Purpose): Non-deposit of employee contribution within 30 days of receipt
Mailing Address 6629 STELLA ROAD			
City GOODSPRINGS	State TN	Zip Code 38460	

Outstanding Balance Beginning This Period 40.00	Amount Incurred This Period 0	Payment This Period 0	Outstanding Balance at Close of This Period 40.00
---	---	---------------------------------	---

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor HINES, ALLEN			Nature of Debt (Purpose): Non-deposit of employee contribution within 30 days of receipt
Mailing Address 10101 ROAD 2611			
City PHILADELPHIA	State MS	Zip Code 39350	

Outstanding Balance Beginning This Period 25.00	Amount Incurred This Period 0	Payment This Period 0	Outstanding Balance at Close of This Period 25.00
---	---	---------------------------------	---

1) SUBTOTALS This Period This Page (optional).....▶	85.00
2) TOTALS This Period (last page this line number only).....▶	85.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)▶	85.00

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TINA FISHER
ALUTIIQ LLC
3909 ARCTIC BLVD. SUITE 500

SHIP DATE: 13JUL20
ACTWGT: 1.00 LB
CAD: 101570928/NET4220

ANCHORAGE, AK 99503
UNITED STATES US

BILL SENDER

TO

FEDERAL ELECTION COMMISSION
1050 FIRST STREET, N.E.

WASHINGTON DC 20002

(202) 694-1100

REF: PAC REPORT 2ND QTR

INV:

PO:

DEPT:

56B.I3/06/46/FE/A



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Express



201120040117

WED - 15 JUL AA
STANDARD OVERNIGHT

7709 3943 5120

C YKNA

20002
DC-US
IAD

JUL 3:00P
RNIGHT

20002
IAD



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1 15:00 5120
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<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): Fed Ex	Shipping Date 7/13/20 Next Business Day Delivery <input checked="" type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
<i>SPM</i> PREPARER	7/17/20 DATE PREPARED

(3/2015)