Image# 202209189528506629				PAGE 1 / 57
FEC AN	EPORT OF R ND DISBURS Other Than An Author	EMENTS	c	Office Use Only
1. NAME OF TYP COMMITTEE (in full)	PE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5	
				C
ADDRESS (number and street)	444 COUNTY RD M.			
Check if different than previously reported. (ACC)	REDONIA			53021 – L
2. FEC IDENTIFICATION NUMB	ER V CITY		STATE 🔺	ZIP CODE
C C00622472	3. IS TH REPO		AMEN (A)	NDED
 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: Mar 20 Apr 20 (c) 12-Day PRE-Election Report for the: Election or (d) 30-Day POST-Election Report for the: Election or Election or Report for the: Election or Election	(M3) Jun 20 (I (M4) Jul 20 (N Primary (12P) Convention (12C) General (30G)	M6) Sep 20	(M9) Dec 20 (M12) (Non-Election Year Only) (M10) Jan 31 (YE) 2G) Runoff (12R) S) in the State of
	eport and to the best of my PIARO, ROBERT, , ,	through 04		2022 complete.
Type or Print Name of Treasurer	OBERT, , ,	[Electronically Filed]	Date 09	/ D D / Y Y Y Y 16 2022
NOTE: Submission of false, erroneous	, or incomplete information ma	ay subject the person signi		penalties of 52 U.S.C. § 30108 FEC FORM 3X Rev. 05/2016

09/18/2022 16 : 55

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC

R	Report Covering the Period: From: 04		b: 04 / D D / Y Y Y Y Y 2022
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2022		69819.15
	(b) Cash on Hand at Beginning of Reporting Period	195812.02	
	(c) Total Receipts (from Line 19)	661673.88	1092457.88
	 (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) 	857485.90	1162277.03
7.	Total Disbursements (from Line 31)	631292.10	936083.23
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	226193.80	226193.80
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)	52742.39	

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

Image#	2022091	89528506631
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DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC

R	eport Covering the Period: From:	/ D D / Y Y Y Y 01 / 2022 To:	M M / D D / Y						
	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)	1735.00	12350.00						
	(ii) Unitemized	659938.88	1080107.88						
	(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	661673.88	1092457.88						
	(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								
10	Totals to Line 33, page 5)►	661673.88	1092457.88						
12.	Party Committees	0.00	0.00						
13.	All Loans Received	0.00	0.00						
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00						
16.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00						
17	to Federal Candidates and Other Political Committees	0.00	0.00						
	Other Federal Receipts (Dividends, Interest, etc.) Transfers from Non-Federal and Levin Funds	0.00	0.00						
	(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))►	661673.88	1092457.88						
20.	Total Federal Receipts								

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

661673.88

1092457.88

Page 3

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016) Page 4 COLUMN A COLUMN B **II. Disbursements Total This Period Calendar Year-to-Date** 21. Operating Expenditures: Allocated Federal/Non-Federal (a) Activity (from Schedule H4) 0.00 0.00 Federal Share (i) 0.00 0.00 (ii) Non-Federal Share..... (b) Other Federal Operating 651301.09 Expenditures 435458.56 (c) Total Operating Expenditures 651301.09 (add 21(a)(i), (a)(ii), and (b)) 435458.56 22. Transfers to Affiliated/Other Party Committees..... 0.00 0.00 23 Contributions to Federal Candidates/Committees 0.00 and Other Political Committees... 0.00 24. Independent Expenditures (use Schedule E)..... Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).... 195508.54 284047.14 25. 0.00 0.00 26. Loan Repayments Made..... 0.00 0.00 19 Loans Made..... Refunds of Contributions To: (a) Individuals/Persons Other 0.00 27. 28. 0.00 Than Political Committees 735.00 325.00 (b) Political Party Committees 0.00 0.00 Other Political Committees (C) (such as PACs)..... 0.00 0.00 Total Contribution Refunds (d) (add Lines 28(a), (b), and (c))...... 325.00 735.00 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 Total Federal Election Activity (add (C) 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)).. 631292.10 936083.23 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... 631292.10 936083.23

DETAILED SUMMARY PAGE

of Disbursements

COLUMN A

Total This Period

FFC	Form	3X	(Rev	05/2016)
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III. Net Contributions/ Operating Expenditures

33.	Total Contributions (other than loans)
	(from Line 11(d), page 3)
34.	Total Contribution Refunds
	(from Line 28(d))
35.	Net Contributions (other than loans)
	(subtract Line 34 from Line 33)
36.	Total Federal Operating Expenditures
	(add Line 21(a)(i) and Line 21(b))
37.	Offsets to Operating Expenditures
	(from Line 15, page 3)
38.	Net Operating Expenditures

(subtract Line 37 from Line 36)

					661673.88
	-7			-7	
					325.00
				-7	
					661348.88
-	7	1	1	-	001040.00
1					435458.56
_	-7			-7	435458.56
_	-7	-	-	-	435458.56 0.00
-	-7-		-		
	-	-	+		

1092457.88 735.00 1091722.88
735.00
1091722.88
1091722.88
054004.00
651301.09
0.00
651301.09

COLUMN B

Calendar Year-to-Date

Page 5

:97 `A=G79 @@5 B9CIG`H9LH`F9 @5 H98 `HC`5`F9DCFHžG7<98 I@9`CF`+H9A=N5 H=CB

Form/Schedule: F3XA Transaction ID :

> BEST EFFORTS PROCEDURES - ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS / C00622472 1. Initial solicitation for a contribution is made via phone call and solicitor additionally states during the solicitation call that as a part of compliance, the PAC is required to inform the contributor that "Federal law requires us to use our best efforts to collect and report the name, mailing address, occupation and name of employer of individuals whose contributions exceed \$200 in a calendar year". Following acceptance to provide a contribution, a follow-up invoice letter is mailed to the contributor which includes a clear and conspicuous request for contributor's employer and occupation information to be written in and returned when they mail back their contribution. 2. Secondarily, if employer/occupation information was still not provided within the above steps, a follow up phone call would be placed to the contributor within 30 days of receipt of the contribution via a separate pre-addressed post card sent in the US Mail to the contributor, again clearly requesting the name of employer and occupation, without solicitation of a contribution. 3. Lastly, the third/final step if employer/occupation information was still not provided, a follow up phone call is placed to the contributor during which the missing information is clearly requested (without solicitation of a contribution) as an FEC compliance requirement. 4. The missing employer/occupation information, if/when obtained, will be uploaded and we would subsequently update our reports to include the missing information. In instances where all efforts outlined above fail to obtain this information, the words "unavailable" or "refused" will be uploaded for these fields. In either scenario, the PAC will either file a memo Schedule A with its next regularly scheduled report, listing all contributions for which new contributor information has been received, or file an amendment to the original report.

Form/Schedule: F3XA Transaction ID:

The purpose of this amendment is to 1) correct the Schedule E aggregate totals, which were calculating incorrect due to a software bug. 2) Include the "off the top" credit card processing fee from "RallyPay" 3) Include the MEMO Schedule E's from the previous period, as non-memo, since they have been paid.

:97 `A=G79 @@5 B9CIG`H9LH`F9 @5 H98 `HC`5 `F9DCFHžG7<98 I@9 `CF`=H9A=N5 H=CB

Form/Schedule: F3XA Transaction ID :

The purpose of Amendment 2 is to include additional RallyPay fees that were previously not known. These additional RallyPays were recently created to encapsulate special projects of AFERF. We were not made aware until recently, that these special projects were not being included in the primary RallyPay account data.

Form/Schedule: F3XA Transaction ID:

The purpose of Amendment 3 is to correct an issue recently discovered with the RallyPay reports, regarding refunds and chargebacks. The caging company isn't being notified of the donors that were refunded/charged back through RallyPay, resulting in donors being reported that should not have been. This series of amendments will remove those donors, and recalculate Schedule A's, and adjust the opening/closing balance accordingly.

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

				Detailed Summary Page	×	11a		11b		11c		12				
_						13		14		15		16	17			
	y information copied from such Reports and St for commercial purposes, other than using the															
	NAME OF COMMITTEE (In Full) ASSOCIATION FOR EMERGEN		SP	ONDERS AND FIRE	FIG	HTE	RS	S PA	١C							
Α.	Full Name of Individual (Last, First, Middle Initi HARRINGTON, CHERYL, , ,	al) or Full O	Drga	nization Name	1	Date of Receipt										
	Mailing Address 503 CORONADO WAY				04 / D D / Y Y Y Y 2022											
	City SATELLITE BEACH	State FL		Zip Code 32937	Transaction ID : SA11AI-27289894 Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	С				250.00										
	Name of Employer (for Individual) RETIRED	Occi RE1		tion (for Individual) ED		М	emc	tem	I							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 250.00												
в.	Full Name of Individual (Last, First, Middle Initi HENDRICKSON, DOUGLAS, , ,	al) or Full O	Drga	nization Name		Date o	f Re	eceipt								
	Mailing Address 5503 HUNTINGTON PKWY				04 / D D / Y Y Y Y 2022						Y					
	City BETHESDA	State MD		Zip Code 20814	/	Transaction ID : SA11AI-27303910 Amount of Each Receipt this Period 315.00 Memo Item										
	FEC ID number of contributing federal political committee.	С														
	Name of Employer (for Individual) RETIRED	Occ RE		tion (for Individual) ED												
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 315.00												
с.	Full Name of Individual (Last, First, Middle Initi MCNAIRY, BOBBIE, , ,	al) or Full O	Drga	nization Name		Date o	f Re	eceipt								
	Mailing Address 2 GALESVILLE CT					^M 04	/		D D1	/ Y)22	Y			
	City GAITHERSBURG	State MD		Zip Code 20878						SA11AI- eceipt th						
	FEC ID number of contributing federal political committee.	С						y		,	_	205.0	0			
	Name of Employer (for Individual) RETIRED	Occi RET	•	tion (for Individual) D		M	emo	o Item	1							
	Receipt For: Primary General Other (specify)	Aggregate	Yea	ar-to-Date ▼ 205.00												
s	UBTOTAL of Receipts This Page (optional)			•				7		, ,	-	770.0	0			
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SCHEDULE A (FEC Form 3X) ľ

Use separate schedule(s)

FOR LINE NUMBER:

PAGE

9 OF

57

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11				or each category of the Detailed Summary Page		¥ 11a 13		11b 14	11c		12 16	17	
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay ne	ot be sold or used by any pe ess of any political committee	ersor to s	n for the	pur ntrit	pose of	solicitin	g cont	tributi	ons	
	NAME OF COMMITTEE (In Full) ASSOCIATION FOR EMERGEN		SPO	ONDERS AND FIRE	FI	GHTE	R	S PAC	;				
Α.	Full Name of Individual (Last, First, Middle Initi NARCISSE, DALTON, , ,	ial) or Full O	Orgar	nization Name		Date of Receipt							
	Mailing Address 4948 GASTON AVE APT G					04	/	D D D 25	/ Y	Y 202	22	Y	
	City DALLAS	State TX		Zip Code 75214	_			i on ID : Each R					
	FEC ID number of contributing federal political committee.	С				<u> </u>		-		2	200.0	0	
	Name of Employer (for Individual) RETIRED		upat TIRE	ion (for Individual) D		M	lem	o Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 225.00									
в.	Full Name of Individual (Last, First, Middle Initi OCALLAGHAN, MICHAEL, , ,	ial) or Full O	Drgar	nization Name		Date o	f Re	eceipt					
	Mailing Address PO BOX 221					04 / D D / Y Y Y Y 04 12 2022							
	City HUMAROCK	State MA	+	Transaction ID : SA11AI-27305306 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С			265.00								
	Name of Employer (for Individual) PROCESS FACILITIES GROUP	Occ EN0		Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼											
с.	Full Name of Individual (Last, First, Middle Initi RUSSELL, JOSEPH, , ,	ial) or Full O	Orgar	nization Name		Date o	f Re	eceipt					
	Mailing Address 4014 MANCHESTER RD					04 15 2022							
	City MADISON	State WI		Zip Code 53719	-			tion ID : Each R					
	FEC ID number of contributing federal political committee.	С						9		2	250.0	0	
	Name of Employer (for Individual) DISABLED		upat ABLI	ion (for Individual) ED		N	lem	o Item					
	Receipt For: Primary General Other (specify)	Aggregate	Yea	r-to-Date ▼ 250.00									
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SCHEDULE A	(FEC	Form	3X)
ITEMIZED REC	EIPTS	;	

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 10 OF

	EMIZED RECEIPTS			or each category of the Detailed Summary Page	×	11a		11b	11c	12					
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	NAME OF COMMITTEE (In Full) ASSOCIATION FOR EMERGENO	CY RES	SPO	ONDERS AND FIRE	FIG	нте	RS	S PA	С						
Α.	Full Name of Individual (Last, First, Middle Initial) WILLIS, THOMAS J, , , Mailing Address 358 MOON RANCH ST) or Full O	orgar	nization Name		Date of Receipt									
	City	State		Zip Code	-										
	BAKERSFIELD	CA		93314		Transaction ID : SA11AI-27285168 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С				250.00									
	Name of Employer (for Individual) San Joaquin Veterinary Hospital	Occu Owr	•	ion (for Individual) /et		N	lemc	ltem							
	Receipt For: // Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 250.00											
В.	Full Name of Individual (Last, First, Middle Initial)) or Full O	rgar	nization Name		Date c	f Re	ceipt							
	Mailing Address			_											
	City	State		Zip Code		Amour	t of	Each	Receipt th	is Perioc	 I				
	FEC ID number of contributing federal political committee.	С													
	Name of Employer (for Individual)	Осси	upat	tion (for Individual)	Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ır-to-Date ▼											
<u>с.</u>	Full Name of Individual (Last, First, Middle Initial)) or Full O	rgar	nization Name		Date c	f Re	ceipt							
	Mailing Address					M	/	D	D / Y	YYY	Y				
	City	State		Zip Code		Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С													
	Name of Employer (for Individual)	Осси	upat	ion (for Individual)		Memo Item									
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s	UBTOTAL of Receipts This Page (optional)			•••••						250.	.00				
т	OTAL This Period (last page this line number onl	y)		····· •	-			_		1735	.00				

SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 11 OF 57					
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check only 21b 28a						
Any information copied from such Reports and State or for commercial purposes, other than using the na			ed by any perso	on for the purpose of soliciting contributions					
	CY RESP	PONDERS A	ND FIREF	IGHTERS PAC					
Full Name (Last, First, Middle Initial) A. Piaro, Robert R, , ,									
Mailing Address 8444 County Road M	-	_		04 / D D / Y Y Y Y 024 11 2022					
City Fredonia	State WI	Zip Code 53021		FEC Identification Number					
Purpose of Disbursement Payroll			001	C Transaction ID : SB21B-71880					
Candidate Name			Category/ Type	Amount of Each Disbursement this Period					
Office Sought: House Disburst Senate President	ement For: Primary Other (spe	General ecify) ▼		780.88					
State: District: Full Name (Last, First, Middle Initial)				Memo Item					
B. Piaro, Robert R, , , Mailing Address 8444 County Road M				Date of Disbursement					
City Fredonia Purpose of Disbursement Payroll Candidate Name	State WI	Zip Code 53021	001 Category/ Type	FEC Identification Number C Transaction ID : SB21B-71877 Amount of Each Disbursement this Period					
Office Sought: House Disburst Senate President State: District:	ement For: Primary Other (spe	General ccify)		780.89 Memo Item					
Full Name (Last, First, Middle Initial) C. Piaro, Robert R, , ,				Date of Disbursement					
Mailing Address 8444 County Road M				04 25 2022					
City Fredonia Purpose of Disbursement Payroll Candidate Name	State WI	Zip Code 53021	001 Category/ Type	FEC Identification Number C Transaction ID : SB21B-71878 Amount of Each Disbursement this Period					
Office Sought: House Disburs Senate President District:	ement For: Primary Other (spe	General ecify) ▼		780.87 Memo Item					
SUBTOTAL of Disbursements This Page (optional)			····· ►	2342.64					
TOTAL This Period (last page this line number onl	y)								

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	CHEDULE B (FEC Form 3X)		arate schedule(s)	-	E NUMBER: PAGE 12 OF 57						
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	y information copied from such Reports and State for commercial purposes, other than using the na										
	NAME OF COMMITTEE (In Full) ASSOCIATION FOR EMERGENO	CY RESF	ONDERS A	ND FIREF	IGHTERS PAC						
Α.	Full Name (Last, First, Middle Initial) Piaro, Robert R, , ,				Date of Disbursement						
	Mailing Address 8444 County Road M				04 25 2022						
	City Fredonia	State WI	Zip Code 53021		FEC Identification Number						
	Purpose of Disbursement Payroll			001	C Transaction ID : SB21B-71881						
	Candidate Name			Category/ Type	Amount of Each Disbursement this Period						
	Office Sought: House Disburse Senate President	ement For: Primary Other (spe	General Gify) ▼		780.89						
	State: District:		- ,, ,		Memo Item						
B.	Full Name (Last, First, Middle Initial) Cloud Data Services Mailing Address 1009 Whitney Ranch Dr		Date of Disbursement								
	City	Zip Code		FEC Identification Number							
	Henderson Purpose of Disbursement Leads/Phone Lists	NV	89014	003	C						
	Candidate Name			Category/ Type	Transaction ID : SB21B-71885 Amount of Each Disbursement this Period						
	Office Sought: House Disburse Senate President	ement For: Primary Other (spe	General Cify)		33374.09						
	State: District:				Memo Item						
C.	Full Name (Last, First, Middle Initial) Cloud Data Services				Date of Disbursement						
	Mailing Address 1009 Whitney Ranch Dr				04 13 2022						
	City Henderson	State NV	Zip Code 89014		FEC Identification Number						
	Purpose of Disbursement Leads/Phone Lists Candidate Name	003 Category/ Type	Transaction ID : SB21B-7188(Amount of Each Disbursement this Period								
	Office Sought: House Disburse Senate President	ement For: Primary	General	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	32879.25						
	State: District:	Other (spe	uiy) ▼		Memo Item						
⊢	UBTOTAL of Disbursements This Page (optional) OTAL This Period (last page this line number only			r	67034.23						

S	CHEDULE B (FEC Form 3X)			FOR LINE I	NUMBER [·] PAGE 13 OF 57							
	EMIZED DISBURSEMENTS		arate schedule(s)	(check only	nly one)							
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$\left \right\rangle$	NAME OF COMMITTEE (In Full)		A 18									
	ASSOCIATION FOR EMERGENC	Y RESP	ONDERS A	ND FIREF	IGHTERS PAC							
Δ	Full Name (Last, First, Middle Initial)				Date of Disbursement							
Λ.	Cioud Data Services											
	Mailing Address 1009 Whitney Ranch Dr				04 20 2022							
	City Henderson	State NV	Zip Code 89014		FEC Identification Number							
	Purpose of Disbursement				С							
	Leads/Phone Lists			003	Transaction ID : SB21B-71883							
	Candidate Name			Category/ Type	Amount of Each Disbursement this Period							
	Office Sought: House Disburse	ment For:			47435.69							
	Senate	Primary Other (spec	General									
	State: District:		Memo Item									
_	Full Name (Last, First, Middle Initial)											
В.	Cloud Data Services				Date of Disbursement							
	Mailing Address 1009 Whitney Ranch Dr				04 27 2022							
	Walking Address 1009 Whithey Ranch Di											
	City		FEC Identification Number									
	Henderson Purpose of Disbursement		С									
	Leads/Phone Lists			003	Transaction ID : SB21B-71875 Amount of Each Disbursement this Period							
	Candidate Name			Category/								
	Office Sought: House Disburse	ment For:		Туре	45087.60							
	Senate	Primary	General									
	President	Other (spec	cify)		Memo Item							
	State: District: Full Name (Last, First, Middle Initial)											
C.	EWH Small Business Accounting	S.C.			Date of Disbursement							
	Mailing Address 20670 Watertown Rd Ste 1040				04 05 2022							
	5	State	Zip Code		FEC Identification Number							
	Waukesha Purpose of Disbursement	WI	53186-1867		С							
	Accounting				Transaction ID : SB21B-7188							
	Candidate Name			Category/ Type	Amount of Each Disbursement this Period							
	Office Sought: House Disburse	Office Sought: House Disbursement For:			855.00							
	Senate	Primary	General									
	State: District:	Other (spec	cify) 🔻		Memo Item							
s	UBTOTAL of Disbursements This Page (optional).			••••••	93378.29							
		、 、										
IΤ	OTAL This Period (last page this line number only	")		····· ►								

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R	Full Name (Last, First, Middle Initial) EYP Consultants LLC						Date of	of Dis	burse	ment					
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	NAME OF COMMITTEE (In Full) ASSOCIATION FOR EMERGENC	CY RESF	ONDERS A	ND FIRE	FIGHTERS PAC						
A.	Full Name (Last, First, Middle Initial) LAV Services LLC				Date of Disbursement						
	Mailing Address 1009 Whitney Ranch Dr				04 / D D / Y Y Y Y 2022						
	City Henderson	State NV	Zip Code 89014		FEC Identification Number						
	Purpose of Disbursement Phonebank Payroll Services			003	C Transaction ID : SB21B-71876						
	Candidate Name			Category/ Type	Amount of Each Disbursement this Period						
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B.	Full Name (Last, First, Middle Initial) LAV Services LLC Mailing Address 1009 Whitney Ranch Dr				Date of Disbursement						
	City Henderson	State NV	Zip Code 89014		FEC Identification Number						
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C.	Full Name (Last, First, Middle Initial) LAV Services LLC				Date of Disbursement						
	Mailing Address 1009 Whitney Ranch Dr				04 / D D / Y Y Y Y 27 2022						
	City Henderson	State NV	Zip Code 89014		FEC Identification Number						
	Purpose of Disbursement Phonebank Payroll Services Candidate Name				Transaction ID : SB21B-7187 Amount of Each Disbursement this Period						
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Α.	Full Name (Last, First, Middle Initial) RallyPay		Date of Disbursement										
	Mailing Address 995 Market Street Floor 2					04 <u>30</u> <u>2022</u>							
	City	State CA	Zip Code 94103			FEC Identification Number							
	San Franciso Purpose of Disbursement Combined "off the top" CC Transaction fees Apr	CA	94103	0	03	С							
	Candidate Name				egory/ /pe	Transaction ID : SB21B-72830 Amount of Each Disbursement this Period							
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в.	Full Name (Last, First, Middle Initial) RallyPay Mailing Address 995 Market Street					Date of Disbursement							
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	Purpose of Disbursement Combined "off the top" Credit Card Chargebacks			0	03	С							
	Candidate Name				egory/ /pe	Transaction ID : SB21B-73498 Amount of Each Disbursement this Period							
	Senate	ement For: Primary	General			2813.00							
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C.	Full Name (Last, First, Middle Initial) RallyPay					Date of Disbursement							
	Mailing Address 995 Market Street Floor 2					04 / D D / Y Y Y Y 2022							
	City San Franciso Purpose of Disbursement	State CA	Zip Code 94103			FEC Identification Number							
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Α.	Full Name (Last, First, Middle Initial) Ridge Innovative						Date o	f Dis	burse	ment				
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	Mailing Address 2124 Union Ave.													
	City	State	Zip Code											
	Costa Mesa	CA	92627				FEC ld	lentifi	icatior	Nur	nber			
	Purpose of Disbursement Phonebank Long Distance		·		00	7	C							
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В.	Ridge Innovative						Date o	f Dis	burse	ment				
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	Mailing Address 2124 Union Ave.						04		1;	5		2022		
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City	State Zip Code		FEC Identification Number							
Costa Mesa Purpose of Disbursement	CA 92627									
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Senate	Primary General									
President	Other (specify)		Memo Item							
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Full Name (Last, First, Middle Initial) B. Standard Data Services LLC			Date of Disbursement							
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Mailing Address 513 Mill Ave SE Suite 206			04 06 2022							
City New Philadelphia	State Zip Code OH 44663		FEC Identification Number							
Purpose of Disbursement			С							
Caging and Database Services		003	Transaction ID : SB21B-71881							
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Senate	Primary General									
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Full Name (Last, First, Middle Initial)										
C. Standard Data Services LLC			Date of Disbursement							
Mailing Address 513 Mill Ave SE			04 13 2022							
Suite 206										
City Naw Dhiladalahia	State Zip Code OH 44663		FEC Identification Number							
New Philadelphia Purpose of Disbursement	OH 44663		С							
Caging and Database Services		003	Transaction ID : SB21B-71884							
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Office Sought: House Disburs	ement For:	Туре	12329.73							
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Α.	Full Name (Last, First, Middle Initial) Standard Data Services LLC				Date of Disbursement						
	Mailing Address 513 Mill Ave SE Suite 206				04 20 2022						
	City New Philadelphia	State OH	Zip Code 44663		FEC Identification Number						
	Purpose of Disbursement Caging and Database Services			003	C Transaction ID : SB21B-71881						
	Candidate Name			Category/ Type	Amount of Each Disbursement this Period						
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В.					Date of Disbursement						
	Mailing Address 513 Mill Ave SE Suite 206	<u></u>			04 27 2022						
	City New Philadelphia	State OH	Zip Code 44663		FEC Identification Number						
	Purpose of Disbursement Caging and Database Services Candidate Name			003 Category/	Transaction ID : SB21B-71883 Amount of Each Disbursement this Period						
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	State: District:	Other (spec	cify)		Memo Item						
C.	Full Name (Last, First, Middle Initial) United States Treasury				Date of Disbursement						
	Mailing Address 1500 Pennsylvania Avenue NW				04 01 2022						
	City Washington	State DC	Zip Code 20003		FEC Identification Number						
	Purpose of Disbursement Taxes Candidate Name			001 Category/	C Transaction ID : SB21B-7187 Amount of Each Disbursement this Period						
	Senate	ement For: Primary	General	Туре	214.66						
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Α.	Full Name (Last, First, Middle Initial) United States Treasury				Date of Disbursement						
	Mailing Address 1500 Pennsylvania Avenue										
	City Washington	State DC	Zip Code 20003		FEC Identification Number						
	Purpose of Disbursement Taxes			001	С						
	Candidate Name			Category/	Transaction ID : SB21B-71884 Amount of Each Disbursement this Period						
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	Senate President	Primary Other (spec	General cify) ▼		Memo Item						
	State: District: Full Name (Last, First, Middle Initial)										
B.	United States Treasury				Date of Disbursement						
	Mailing Address 1500 Pennsylvania Avenue NW		1		04 15 2022						
	City Washington	State DC	Zip Code 20003		FEC Identification Number						
	Purpose of Disbursement Taxes			001	С						
	Candidate Name			Category/ Type	Transaction ID : SB21B-71883 Amount of Each Disbursement this Period						
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	State: District:	Other (spec			Memo Item						
— C.	Full Name (Last, First, Middle Initial)				Date of Disbursement						
	Mailing Address 1500 Pennsylvania Avenue				04 / D D / Y Y Y Y 22 2022						
	NW City	State	Zip Code		FEC Identification Number						
	Washington Purpose of Disbursement Taxes	DC	20003	001	С						
	Candidate Name				Transaction ID : SB21B-7187(Amount of Each Disbursement this Period						
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Detailed Summary Page 210 22 23 26 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting con or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such cor NAME OF COMMITTEE (In Full) ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC Full Name (Last, First, Middle Initial)	30b tributions					
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting com or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such cor NAME OF COMMITTEE (In Full) ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC Full Name (Last, First, Middle Initial)	tributions					
NAME OF COMMITTEE (In Full) ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC Full Name (Last, First, Middle Initial)	nmittee.					
ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC Full Name (Last, First, Middle Initial)						
Full Name (Last, First, Middle Initial)						
officed States Treasury	Date of Disbursement					
M M / D D / Y Y	YY					
Mailing Address 1500 Pennsylvania Avenue 04 29 202	22					
NW City State Zip Code EEC. Identification Number						
Washington DC 20003	_					
Purpose of Disbursement Taxes 001						
Condidate Name Transaction ID : SB21B-71	Transaction ID : SB21B-71875 Amount of Each Disbursement this Period					
Type						
Office Sought: House Disbursement For:	214.66					
President Other (specify)						
State: District:	Memo Item					
Full Name (Last, First, Middle Initial)						
B. Wired4Data	V V					
City State Zip Code FEC Identification Number Lake Havasu City AZ 86403 FEC Identification Number	FEC Identification Number					
Purpose of Disbursement						
003 Transaction ID · SB21B-71	882					
Candidate Name Category/ Amount of Each Disbursement	this Period					
	004.68					
Senate Primary General						
State: District: Other (specify) Memo Item						
Full Name (Last, First, Middle Initial)						
C. Wired4Data Date of Disbursement						
Mailing Address 55 Lake Havasu Ave South 04 13 202	22 2					
F-677						
City State Zip Code FEC Identification Number Lake Havasu City AZ 86403 FEC Identification Number						
Purpose of Disbursement						
Candidate Name O03 Transaction ID : SB21B-71						
Category/ Amount of Each Disbursement	this Period					
Office Sought: House Disbursement For: 18	722.90					
Senate Primary General President Other (specify) Image: Constraint of the senation of the sen						
State: District: Memo Item						
SUBTOTAL of Disbursements This Page (optional)	942.24					
TOTAL This Period (last page this line number only)						

S	CHEDULE B (FEC Form 3X)			FC	OR I	LINE I	NUMBER: PAGE 24 OF 57						
IT	EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the				k only 21b	one) 22 23 26 27						
			Detailed Summary Page			210 28a	22 23 26 27 28b 28c 29 30b						
	y information copied from such Reports and State for commercial purposes, other than using the na												
\setminus	NAME OF COMMITTEE (In Full)												
	ASSOCIATION FOR EMERGENO	CY RESP	ONDERS A	ND	FIF	REF	IGHTERS PAC						
A.	Full Name (Last, First, Middle Initial) Wired4Data		Date of Disbursement										
	Mailing Address 55 Lake Havasu Ave South F-677						04 20 2022						
	City	State	Zip Code				FEC Identification Number						
	Lake Havasu City Purpose of Disbursement	AZ	86403										
	Phonebank IT/Tech Support			0	03								
	Candidate Name			Cate	egor ype	y/	Transaction ID : SB21B-71883 Amount of Each Disbursement this Period						
	Office Sought: House Disburse	ement For:			71		27011.98						
	Senate	Primary	General										
	State: District:	Other (spe	сіту) 🔻				Memo Item						
_	Full Name (Last, First, Middle Initial)												
В.	Wired4Data		Date of Disbursement										
	Mailing Address 55 Lake Havasu Ave South F-677						04 27 2022						
	City Lake Havasu City	State AZ	Zip Code 86403				FEC Identification Number						
	Purpose of Disbursement	_	С										
	Phonebank IT/Tech Support		003			Transaction ID : SB21B-71879							
	Candidate Name			Category/		y/	Amount of Each Disbursement this Period						
	Office Sought: House Disburse	ement For:		Туре			25674.88						
	Senate	Primary	Primary General										
	President	Other (spec	cify)				Memo Item						
	State: District:												
C.	Full Name (Last, First, Middle Initial) Wisconsin Dept of Revenue						Date of Disbursement						
	Mailing Address PO Box 930208				04 / D D / Y Y Y Y 2022								
	City	State	Zip Code				FEC Identification Number						
	Milwaukee Purpose of Disbursement	WI	53293	_	_	_	С						
	State Taxes Candidate Name			Cate		y/	Transaction ID : SB21B-7187; Amount of Each Disbursement this Period						
	Office Sought: House Disbursement For:						39.54						
Senate Primary General													
	President	Other (spe	cify) 🔻				Memo Item						
	State: District:												
s	UBTOTAL of Disbursements This Page (optional).						52726.40						
Т	OTAL This Period (last page this line number only	/)					, ,						

	CHEDULE B (FEC Form 3X)		arate schedule(s)	FOR LINE						
	EMIZED DISBURSEMENTS	for each	category of the Summary Page	(check only 21b 28a	/ one) 22 23 26 27 28b 28c 29 30b					
	y information copied from such Reports and State for commercial purposes, other than using the na									
$\left\rangle$	NAME OF COMMITTEE (In Full) ASSOCIATION FOR EMERGENC	CY RESF	PONDERS A	ND FIREF	IGHTERS PAC					
Α.	Full Name (Last, First, Middle Initial) Wisconsin Dept of Revenue		Date of Disbursement							
	Mailing Address PO Box 930208									
	City Milwaukee Purpose of Disbursement	State WI	Zip Code 53293		FEC Identification Number					
	State Taxes			001	C Transaction ID : SB21B-71882					
	Candidate Name			Category/ Type	Amount of Each Disbursement this Period					
	Office Sought: House Disburse Senate President	ement For: Primary Other (spe	General		39.54					
	State: District:		ony) v		Memo Item					
B.	Full Name (Last, First, Middle Initial) Wisconsin Dept of Revenue Mailing Address PO Box 930208		Date of Disbursement							
	City Milwaukee Purpose of Disbursement	State WI	Zip Code 53293		FEC Identification Number					
	State Taxes Candidate Name		001 Category/ Type	Transaction ID : SB21B-71879 Amount of Each Disbursement this Period						
	Office Sought: House Disburse Senate President	General cify)	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	39.54 Memo Item						
<u> </u>	State: District: Full Name (Last, First, Middle Initial) Wisconsin Dept of Revenue		Date of Disbursement							
	Mailing Address PO Box 930208				04 / D D / Y Y Y Y 022 2022					
	City Milwaukee	State WI	Zip Code 53293		FEC Identification Number					
	Purpose of Disbursement State Taxes Candidate Name			001 Category/ Type	C Transaction ID : SB21B-7188! Amount of Each Disbursement this Period					
	Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (spe	General cify) ▼		39.54 Memo Item					
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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(check only	R LINE NUMBER: PAGE 26 OF 57 eck only one)					
		Summary Page	× 21b 28a	22 23 26 27 28b 28c 29 30b					
Any information copied from such Reports and St or for commercial purposes, other than using the									
	ND FIREF	IGHTERS PAC							
Full Name (Last, First, Middle Initial) A. Wisconsin Dept of Revenue		Date of Disbursement							
Mailing Address PO Box 930208		04 29 2022							
City Milwaukee	State WI	Zip Code 53293		FEC Identification Number					
Purpose of Disbursement State Taxes			001	C					
Candidate Name			Category/ Type	Transaction ID : SB21B-71879 Amount of Each Disbursement this Period					
Office Sought: House Disbu	rsement For: Primary Other (spe	General Gereral	39.5						
State: District:		<i>,</i> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Memo Item					
Full Name (Last, First, Middle Initial)		Date of Disbursement							
Mailing Address	Mailing Address								
City		FEC Identification Number							
Purpose of Disbursement	· · ·]								
Candidate Name			Category/ Type	Amount of Each Disbursement this Period					
Office Sought: House Disbu	rsement For: Primary Other (spe	General							
State: District:)		Memo Item					
Full Name (Last, First, Middle Initial)				Date of Disbursement					
Mailing Address									
City	State	Zip Code		FEC Identification Number					
Purpose of Disbursement				С					
Candidate Name	Category/ Type	Amount of Each Disbursement this Period							
Senate									
State: District:	Other (spe	ecify) 🔻		Memo Item					
SUBTOTAL of Disbursements This Page (optional	al)		····· ►	39.54					
TOTAL This Period (last page this line number o	••••••	435458.56							

SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS Excluding Loans			(Use separate schedule(s) for each numbered line)	PAGE 27 OF 57 FOR LINE NUMBER: (check only one) 9 ✗ 10	
NAME OF COMMITTEE (In Full) ASSOCIATION FOR EMERGENCY	RESPON	DERS AND FIF	REFIGHTERS	PAC	
A. Full Name (Last, First, Middle Initial) of Debto Cloud Data Services	r or Creditor		Nature of D Leads / Ph	ebt (Purpose): one Lists	
Mailing Address 1350 W SOUTHPORT ROAD BOX 130 City	State	Zip Code			
INDIANAPOLIS	INDIANAPOLIS IN 46217				
Outstanding Balance Beginning This Period 16437.98	16437.98				
Amount Incurred This Period	Pay	ment This Period	Outstandir	ng Balance at Close of This Period	
22207.32	22207.32 16437.98				
B. Full Name (Last, First, Middle Initial) of Debtor EYP Consultants LLC	B. Full Name (Last, First, Middle Initial) of Debtor or Creditor EYP Consultants LLC				
Mailing Address 2949 NW 120th Way	Mailing Address 2949 NW 120th Way				
City					
Outstanding Balance Beginning This Period 2054.74 Amount Incurred This Period 0.00	Outstanding Balance Beginning This Period 2054.74 Amount Incurred This Period Payment This Period			ion ID : SD10-877281 ng Balance at Close of This Period 0.00	
C. Full Name (Last, First, Middle Initial) of Debto LAV Services LLC	C. Full Name (Last, First, Middle Initial) of Debtor or Creditor LAV Services LLC			ebt (Purpose): « Payroll Services	
Mailing Address 3468 Ruth Dr					
City	State	Zip Code			
Las Vegas	NV	89121			
Outstanding Balance Beginning This Period 4109.48 Amount Incurred This Period 5551.83		ion ID : SD10-877283			
1) SUBTOTALS This Period This Page (optional)				27759.15	
2) TOTALS This Period (last page this line number			_	<u></u>	
3) TOTAL OUTSTANDING LOANS from Schedule					
4) ADD 2) and 3) and carry forward to appropriate	iiy) 🖻	7 7 7 .			

		PAGE 28 OF 57					
SCHEDULE D (FEC Form 3X)	(Use separate						
DEBTS AND OBLIGATIONS	schedule(s)	FOR LINE NUMBER:					
Excluding Loans			for each numbered line)	(check only one) 9 × 10			
-				× 10			
ASSOCIATION FOR EMERGENCY	RESPONI	DERS AND FIF	REFIGHTERS	PAC			
A. Full Name (Last, First, Middle Initial) of Debto	A. Full Name (Last, First, Middle Initial) of Debtor or Creditor						
Ridge Innovative	Ridge Innovative						
Mailing Address 2124 Union ave.							
City Costa Mesa	City State Zip Code Costa Mesa CA 92627						
Outstanding Balance Beginning This Period	1	1	Transacti	on ID : SD10-877285			
2967.96	2067.06						
Amount Incurred This Period	Pay	ment This Period	Outstandi	ng Balance at Close of This Period			
4009.66		2967.9	96	4009.66			
B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Nature of D	ebt (Purpose):			
Standard Data Services LLC		Database Services					
Mailing Address 513 Mill Ave SE							
City	City State Zip Code						
New Philadelphia							
Outstanding Balance Beginning This Period	Transact	tion ID : SD10-877287					
6164.24							
Amount Incurred This Period	Amount Incurred This Period Payment This Period						
8327.74		6164.2	24	8327.74			
C. Full Name (Last, First, Middle Initial) of Debto	or or Creditor		Nature of D	ebt (Purpose):			
Wired4Data				NK IT/TECH SUPPORT			
Mailing Address 55 Lake Havasu Ave South							
F-677 City	State	Zip Code					
Lake Havasu City	AZ	86403					
Outstanding Balance Beginning This Period							
9360.50							
Amount Incurred This Period	Pav	ment This Period	Outstandi	ng Balance at Close of This Period			
12645.84		9360.5	50	12645.84			
				24983.24			
1) SUBTOTALS This Period This Page (optional)				24303.24			
2) TOTALS This Period (last page this line number	only)		···· • · · · · · · · · · · · · · · · ·	52742.39			
3) TOTAL OUTSTANDING LOANS from Schedule	C (last page or	ηly)	►	0.00			
,							

Collins, Susan, , , Oppose President Senate State: Calendar Year-To-Date Per Election for Office Sought 162980.44 Disbursement For: Y Primary Ge Full Name of Payee Item of Payee Other (specify) ▶ Other (specify) ▶ Full Name of Payee Item of Payee Item of Payee Other (specify) ▶ Mailing Address 1009 Whitney Ranch Dr. Date of Public Distribution/Disseminati Item of Payee City State Zip Code 11103.6 Henderson NV 89014 Item of Disbursement or Obligation Purpose of Expenditure Category/ 004 Item of Disbursement or Obligation	ER ▼ tion 2 Y
ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC Image: Constraint of the set of the se	tion Y Y 2 66 00 ME
FIREFIGHTERS PAC C C00622472 Check if 24-hour report 48-hour report New report Amends report filed on Image: Construction of the setting issued and paid after close of books Hull Name of Payee Image: Construction of this setting issued and paid after close of books Image: Construction of the setting issued and paid after close of books Date of Public Distribution/Dissemination of the setting issued and paid after close of books Mailing Address 1009 Whitney Ranch Dr. Amount Image: Construction of the setting issued and paid after close of books Purpose of Expenditure Leads / Phone Lists(Estimate) Category/ 004 Image: Construction of the setting issued and paid after close of books Name of Federal Candidate: Image: Construction for Office Sought Calendar Year-To-Date Image: Construction for Office Sought Full Name of Payee Image: Construction for Office Sought Full Name of Payee Image: Construction for Office Sought Image: Construction for Office Sought<	2 2 66 9 9 00 ME
Check if 24-hour report New report Amends report filed on Full Name of Payee X Memo Item Invoice for this estimate issued and paid after close of books X Memo Item Mailing Address 1009 Whitney Ranch Dr. Amends report filed on City State Zip Code Henderson NV 89014 Purpose of Expenditure Category/ 004 Leads / Phone Lists(Estimate) Category/ 004 Name of Federal Candidate: X Support Collins, Susan, , , Oppose President Senate Calendar Year-To-Date Per Election for Office Sought Date of Public Distribution/Disseminati Full Name of Payee X Memo Item Cloy State Zip Code Invoice for this estimate issued and paid after close of books Mailing Address Other (specify) Mailing Address 1009 Whitney Ranch Dr. Amount Memo Item City State Zip Code Memo Item Memo Item Invoice for this estimate issued and paid after close of books Nv 89014 Date of Public Distribution/Dissemin	2 2 66 9 9 00 ME
Cloud Data Services Invoice for this estimate issued and paid after close of books Mailing Address 1009 Whitney Ranch Dr. City State Zip Code Henderson NV 89014 Purpose of Expenditure Category/ 004 Leads / Phone Lists(Estimate) Category/ 004 Name of Federal Candidate: Image: Colored Sought Office Sought: Calendar Year-To-Date Per Election for Office Sought Disbursement For: Full Name of Payee Image: Colored Sought Date of Public Distribution/Disseminati City State Zip Code Invoice for this estimate issued and paid after close of books Image: Colored Sought Date of Public Distribution/Disseminati City State Zip Code Image: Colored Sought Date of Public Distribution/Disseminati Mailing Address 1009 Whitney Ranch Dr. Nv 89014 Date of Disbursement or Obligation City Henderson Nv 89014 Date of Disbursement or Obligation Purpose of Expenditure Category/ 004 28 / 2022 Leads / Phone Lists(Estimate) Category/ 004 11103.6	2 2 66 9 9 00 ME
Invoice for this estimate issued and paid after close of books 04 28 2022 Mailing Address 1009 Whitney Ranch Dr. Amount Invoice for this estimate issued and paid after close of books Amount City State Zip Code Transaction ID : SE-S876711 Date of Disbursement or Obligation Purpose of Expenditure Leads / Phone Lists(Estimate) Category/ Type 004 28 2022 Name of Federal Candidate: Image: Second Secon	2 66 Y Y 00 ME
City State Zip Code Amount Purpose of Expenditure NV 89014 Transaction ID : SE-S876711 Date of Disbursement or Obligation M M / D D / Y Y Y Name of Federal Candidate: X Support Office Sought: House District: Collins, Susan, , , Oppose President X Senate State: Image: Senate State	9 9 9 00 ME
Henderson NV 89014 Transaction ID : SE-S876711 Purpose of Expenditure Leads / Phone Lists(Estimate) Category/ Type 004 Transaction ID : SE-S876711 Name of Federal Candidate: Category/ Type 004 Transaction ID : SE-S876711 Name of Federal Candidate: Support Office Sought: House Calendar Year-To-Date Per Election for Office Sought President X Senate State: Calendar Year-To-Date Per Election for Office Sought 162980.44 Disbursement For:: X Primary Ge Full Name of Payee Invoice for this estimate issued and paid after close of books Item Date of Public Distribution/Disseminati Mailing Address 1009 Whitney Ranch Dr. NV 89014 Transaction ID : SE-S876713 Purpose of Expenditure Leads / Phone Lists(Estimate) Category/ Type 004 Transaction ID : SE-S876713	9 9 9 00 ME
Purpose of Expenditure Leads / Phone Lists(Estimate) Name of Federal Candidate: Collins, Susan, , , Collins, Susan, , , Catendar Year-To-Date Per Election for Office Sought Invoice for this estimate issued and paid after close of books Mailing Address 1009 Whitney Ranch Dr. City Henderson Purpose of Expenditure Leads / Phone Lists(Estimate) City Purpose of Expenditure Leads / Phone Lists(Estimate) Category/ Type Outer (specify) Date of Disbursement or Obligation Mailing Address 1009 Whitney Ranch Dr. Category/ Purpose of Expenditure Leads / Phone Lists(Estimate) Category/ Type Date of Disbursement or Obligation Mailing Address 1009 Whitney Ranch Dr. Category/ Type Outer (specify) Date of Disbursement or Obligation Mailing Address 1009 Whitney Ranch Dr. Category/ Purpose of Expenditure Leads / Phone Lists(Estimate) Category/ Type Outer (specify) Date of Disbursement or Obligation Mail Disbursement or Obligation Mo	00 ME
Leads / Phone Lists(Estimate) Category/ Type 004 Image of President Im	00 ME
Collins, Susan, , , Onlice Sought Onlice Sought House District. Calendar Year-To-Date Per Election for Office Sought President X Senate State: Disbursement For: Y Primary Full Name of Payee Cloud Data Services Invoice for this estimate issued and paid after close of books Memo Item Date of Public Distribution/Dissemination/Dis	ME
Calendar Year-To-Date Per Election for Office Sought 162980.44 Disbursement For: x Primary Ge Calendar Year-To-Date Per Election for Office Sought 162980.44 Disbursement For: x Primary Ge Full Name of Payee Cloud Data Services Invoice for this estimate issued and paid after close of books Date of Public Distribution/Disseminati Mod / 28 / 2022 Mailing Address 1009 Whitney Ranch Dr. Memo Item Date of Public Distribution/Disseminati Mod / 28 / 2022 City Henderson State Zip Code NV State Zip Code 89014 Purpose of Expenditure Leads / Phone Lists(Estimate) Category/ Type 004 Memo Item	
Per Election for Office Sought 162980.44 2026 Other (specify) ▶ Full Name of Payee Image: Cloud Data Services Date of Public Distribution/Dissemination Invoice for this estimate issued and paid after close of books Image: Cloud Data Services Date of Public Distribution/Dissemination Mailing Address 1009 Whitney Ranch Dr. Image: Cloud Data Services Image: Cloud Data Services Mailing Address 1009 Whitney Ranch Dr. Memo Item Image: Cloud Data Services Amount City State Zip Code Image: Cloud Data Services Image: Cloud Data Services Image: Cloud Data Services Purpose of Expenditure Leads / Phone Lists(Estimate) Category/ Type 004 Image: Cloud Data Services Minice Address NV 89014 Image: Cloud Data Services Image: Cloud Data Services Purpose of Expenditure Category/ Type 004 Image: Cloud Data Services Image: Cloud Data Services Image: Cloud Data Services Category/ Type 004 Image: Cloud Data Services Image: Cloud Data Services	eneral
Full Name of Payee Memo Item Date of Public Distribution/Dissemination Invoice for this estimate issued and paid after close of books Memo Item Memo Item Mailing Address 1009 Whitney Ranch Dr. Memo Item Memo Item City State Zip Code Amount Henderson NV 89014 Transaction ID : SE-S876713 Date of Disbursement or Obligation Category/ Type 004 Memo Item	
Invoice for this estimate issued and paid after close of books 04 28 2022 Mailing Address 1009 Whitney Ranch Dr. 04 28 2022 City State Zip Code 11103.6 Henderson NV 89014 Transaction ID : SE-S876713 Date of Disbursement or Obligation Category/ Type 004 04 29 Nu 89014 Mount 1009 1009 1009	tion
Mailing Address 1009 Whitney Ranch Dr. City State Zip Code Henderson NV 89014 Purpose of Expenditure Category/ Type 004 Leads / Phone Lists(Estimate) Category/ Type 004	
City State Zip Code Henderson NV 89014 Purpose of Expenditure Category/ Type 004 Leads / Phone Lists(Estimate) Category/ Type 004	
Henderson NV 89014 Transaction ID : SE-S876713 Purpose of Expenditure Leads / Phone Lists(Estimate) Category/ Type 004	
Purpose of Expenditure Leads / Phone Lists(Estimate) Category/ Type 004	66
Leads / Phone Lists(Estimate)	
Name of Federal Candidate:	YY
	24
Carbajal, Salud, , , Oppose President Senate State:	CA
Per Election for Office Sought 162980.44 2022	eneral
Other (specify) ►	
(a) SUBTOTAL of Itemized Independent Expenditures	0
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or cor with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a poli party committee) any political party committee or its agent.	
PIARO, ROBERT, , , [Electronically Filed] Date 04 28 2022	
Signature Date 04 28 2022	

ITEMIZED INDEPENDENT EXPENDITURES	5			PAGE 30 OF 57				
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X				
ASSOCIATION FOR EMERGENCY RESPONDERS AND								
FIREFIGHTERS PAC		C C00622472						
Check if 24-hour report 48-hour report	New rep	oort Amends repo	ort filed c	n M M / D D / Y Y Y Y Y				
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination				
Cloud Data Services	Cloud Data Services							
Mailing Address 1009 Whitney Ranch Dr.	03 31 2022 Amount							
City	State	Zip Code		8218.99				
Henderson	NV	89014		Transaction ID : SE-S789195				
Purpose of Expenditure Leads/Phone Lists		Category/ Type 004		Date of Disbursement or Obligation				
Name of Federal Candidate:		X Support	Office	Sought: House District: 00				
Collins, Susan, , ,				President X Senate State: ME				
Calendar Year-To-Date				sement For: X Primary General				
Per Election for Office Sought		62670.40	2026	Other (specify) ►				
Full Name of Payee	Full Name of Payee							
Cloud Data Services	Cloud Data Services Mailing Address 1009 Whitney Ranch Dr.							
Mailing Address 1009 Whitney Ranch Dr.								
City	City State Zip Code							
Henderson	NV	89014		Transaction ID : SE-S789197 Date of Disbursement or Obligation				
Purpose of Expenditure Leads/Phone Lists								
Name of Federal Candidate:		X Support	Office	Sought: X House District: 24				
Carbajal, Salud, , ,		Oppose		President Senate State: CA				
Calendar Year-To-Date		00070 40		sement For: 🗴 Primary 🗌 General				
Per Election for Office Sought	- m - m - m - m - m - m - m - m - m - m	62670.40	2022	Other (specify) ►				
(a) SUBTOTAL of Itemized Independent Expenditures	S		•	16437.98				
(b) SUBTOTAL of Uniternized Independent Expenditu	ires		•					
(c) TOTAL Independent Expenditures			•					
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candid party committee) any political party committee or its	ate or authorized							
PIARO, ROBERT, , ,	(TT) / · · · · ·		М	M / D D / Y Y Y Y				
Signature	[Electronically Fi	Date	e 03	31 2022				

ITEMIZED INDEPENDENT EXPENDITURES	i			PAGE 31 OF 57			
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X			
ASSOCIATION FOR EMERGENCY I		FEC IDENTIFICATION NUMBER ▼					
FIREFIGHTERS PAC		C C00622472					
Check if 24-hour report 48-hour report	New rep	oort Amends repo	ort filed o				
Full Name of Payee		Memo	Item [Date of Public Distribution/Dissemination			
Cloud Data Services		04 07 2022					
Mailing Address 1009 Whitney Ranch Dr.	,	Amount					
City	State	Zip Code		8097.13			
Henderson	NV	89014		Transaction ID : SE-S795673			
Purpose of Expenditure Leads/Phone Lists		Category/ Type 004		Date of Disbursement or Obligation			
Name of Federal Candidate:				Sought 00			
Collins, Susan, , ,		Support Oppose					
		Oppose					
Calendar Year-To-Date Per Election for Office Sought		82913.22	2026	sement For: x Primary General General Other (specify) ►			
Full Name of Payee		Memo	Item [Date of Public Distribution/Dissemination			
Cloud Data Services	Cloud Data Services						
Mailing Address 1009 Whitney Ranch Dr.		04 07 2022					
			/	Amount 8097.13			
City	State	Zip Code					
Henderson	NV	89014		Transaction ID : SE-S795675 Date of Disbursement or Obligation			
Purpose of Expenditure Leads/Phone Lists	1	Category/	- L	M M / D D / Y Y Y			
		Type 004		04 13 2022			
Name of Federal Candidate:		X Support	Office \$	Sought: X House District: 24			
Carbajal, Salud, , ,		Oppose	F	President Senate State: CA			
Calendar Year-To-Date		00010.00	Disburs	sement For: 🗶 Primary 🗌 General			
Per Election for Office Sought	7 7	82913.22	2022	Other (specify) ►			
(a) SUBTOTAL of Itemized Independent Expenditures	3		•	16194.26			
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•				
(c) TOTAL Independent Expenditures			•				
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candid party committee) any political party committee or its	ate or authorized						
PIARO ROREPT			M				
PIARO, ROBERT, , , Signature	[Electronically Fi	[led] Date	e 04	07 2022			
Signature							

ITEMIZED INDEPENDENT EXPENDITURES	5			[PAGE 32	OF 57		
NAME OF COMMITTEE (In Full)						4 OF FORM 3X		
ASSOCIATION FOR EMERGENCY RESPONDERS AND								
FIREFIGHTERS PAC	C	C00622472						
Check if 24-hour report 48-hour report	New rep	oort Amends repo	ort filed on	M M /	D D /	Y Y Y Y Y		
Full Name of Payee		Memo	Item D	ate of Public	c Distribution/	Dissemination		
Cloud Data Services	Cloud Data Śervices							
Mailing Address 1009 Whitney Ranch Dr.	A	04 mount	14	2022				
City	State	Zip Code				11681.92		
Henderson	NV	89014			ID : SE-S8478			
Purpose of Expenditure Leads/Phone Lists		Category/ Type 004		04	P 20	Y Y Y Y Y 2022		
Name of Federal Candidate:		X Support	Office S	ought:	House	District:00		
Collins, Susan, , ,					Senate	State: ME		
Colorder Veer To Date				ement For:	× Primary			
Calendar Year-To-Date Per Election for Office Sought	, , ,	112118.03	2026	Other (sp				
Full Name of Payee	Item D	ate of Public	c Distribution/	Dissemination				
Cloud Data Services	Cloud Data Services							
Mailing Address 1009 Whitney Ranch Dr.		mount						
City	State	Zip Code		11681.92				
Henderson	NV	89014		Transaction ID : SE-S847889 Date of Disbursement or Obligation 04 20 2022				
Purpose of Expenditure Leads/Phone Lists		Category/ Type 004						
Name of Federal Candidate:		X Support	Office S	ought:	K House	District: 24		
Carbajal, Salud, , ,		Oppose	Pr	President Senate State				
Calendar Year-To-Date			Disburse	ement For:	× Primary	General		
Per Election for Office Sought	7 7	112118.03	2022	22 Other (specify) ►				
(a) SUBTOTAL of Itemized Independent Expenditures	5		•			23363.84		
(b) SUBTOTAL of Unitemized Independent Expenditu	Ires		•					
(c) TOTAL Independent Expenditures			Ē					
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candid party committee) any political party committee or its	ate or authorized							
PIARO, ROBERT, , ,			M = M	/ D D	/	YY		
Signature	[Electronically Fi	Date	e 04	14	202			
- 0								

ITEMIZED INDEPENDENT EXPENDITURES	5			PAGE 33				
NAME OF COMMITTEE (In Full)					24 OF FORM 3X			
ASSOCIATION FOR EMERGENCY RESPONDERS AND								
FIREFIGHTERS PAC		C C00622472	2					
Check if 24-hour report 48-hour report	New rep	oort Amends repo	ort filed on	M M / D D /	Y Y Y Y Y			
Full Name of Payee		Memo	Item C	ate of Public Distributior	1/Dissemination			
Cloud Data Services	Cloud Data Śervices							
Mailing Address 1009 Whitney Ranch Dr.	A	Amount						
City	State	Zip Code			11103.66			
Henderson	NV	89014		ransaction ID : SE-S875				
Purpose of Expenditure Leads/Phone Lists		Category/ Type 004		ate of Disbursement or 04 / 27				
Name of Federal Candidate:		X Support	Office S	ought: House	District:00			
Collins, Susan, , ,				esident X Senate	State: ME			
Calendar Year-To-Date				ment For: X Primar				
Per Election for Office Sought		139877.19	2026	Other (specify)	,			
Full Name of Payee	Full Name of Payee							
Cloud Data Services								
Mailing Address 1009 Whitney Ranch Dr.		04 21	2022					
1009 Willing Rater Dr.	A	Amount						
City	City State Zip Code							
Henderson	NV	89014		Transaction ID : SE-S875975 Date of Disbursement or Obligation 04 27 04 27				
Purpose of Expenditure Leads/Phone Lists		Category/						
		Type 004						
Name of Federal Candidate:		x Support	Office S	ought: 🗶 House	District: 24			
Carbajal, Salud, , ,		Oppose	P	President Senate State:				
Calendar Year-To-Date		139877.19		ment For: 🗴 Primar	ry General			
Per Election for Office Sought	7 7	100077.10	2022	Other (specify)				
(a) SUBTOTAL of Itemized Independent Expenditures	S		•		22207.32			
(b) SUBTOTAL of Unitemized Independent Expenditu	ires		•					
(c) TOTAL Independent Expenditures			•					
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candid party committee) any political party committee or its	ate or authorized							
PIARO, ROBERT, , ,	· · · ·		M		YYY			
Signature	[Electronically Fi	Date	e 04	21 20	022			

ITEMIZED INDEPENDENT EXPENDITURES	5)F 57		
NAME OF COMMITTEE (In Full)					FOR LINE 24 OF			
ASSOCIATION FOR EMERGENCY RESPONDERS AND								
FIREFIGHTERS PAC								
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed or	n M M /	D D / Y	Y Y Y		
Full Name of Payee		Memo	Item [Date of Public	Distribution/Diss	emination		
EYP Consultants LLC	EYP Consultants LLC							
Mailing Address 2949 NW 120th Way	<i>F</i>	03 31 2022 Amount						
City	State	Zip Code		· · · · ·		1027.37		
Sunrise	FL	33323			D : SE-S789203			
Purpose of Expenditure Payment Processing		Category/ Type 004		Date of Disburs	sement or Obliga	ation 2022		
Name of Federal Candidate:		X Support	Office	Poucht	Llauss Distr	iot. 00		
Collins, Susan, , ,			Office S		☐ House Distr ·] Senate Sta	ate: <u>ME</u>		
				sement For:	Primary	General		
Calendar Year-To-Date Per Election for Office Sought		62670.40	2026					
Full Name of Payee	Item [Date of Public	Distribution/Diss	emination				
	EYP Consultants LLC							
Mailing Address 2949 NW 120th Way		Amount						
City	State	Zip Code		1027.37				
Sunrise	FL	33323		Transaction ID : SE-S789205 Date of Disbursement or Obligation				
Purpose of Expenditure Payment Processing	Purpose of Expenditure Category/ Payment Processing Type					2022 Y		
Name of Federal Candidate:		X Support	Office S	Sought: 🛛 🗙	House Distr	ict: 24		
Carbajal, Salud, , ,		Oppose		President Senate State:				
Calendar Year-To-Date			Disburs	ement For:	× Primary	General		
Per Election for Office Sought	7 7	62670.40	2022					
(a) SUBTOTAL of Itemized Independent Expenditures	S				2	054.74		
(b) SUBTOTAL of Unitemized Independent Expenditu	Ires		[
					7			
(c) TOTAL Independent Expenditures			•					
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candid party committee) any political party committee or its	ate or authorized							
PIARO, ROBERT, , ,			M = N	/ D D	/ Y Y Y	Y		
Signature	[Electronically Fi	led] Date	e 03	31	2022			
Oignaturo								

ITEMIZED INDEPENDENT EXPENDITURES				PAGE 35 OF 57 FOR LINE 24 OF FORM 3X			
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼			
ASSOCIATION FOR EMERGENCY F		C C00622472					
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y			
Full Name of Payee			ltarr D	ate of Public Distribution/Dissemination			
EYP Consultants LLC		Memo	item D	M M / D D / Y Y Y Y Y 04 07 2022			
Mailing Address 2949 NW 120th Way			A	mount			
City	State	Zip Code		1012.14			
Sunrise	FL	33323		Transaction ID : SE-S795681 Date of Disbursement or Obligation			
Purpose of Expenditure Payment Processing	Category/ Type 004			04 / 13 / Y Y Y Y 2022			
Name of Federal Candidate:		X Support	Office S	ought: House District: 00			
Collins, Susan, , ,		Oppose	Pr	esident X Senate State: ME			
Calendar Year-To-Date Per Election for Office Sought	7	82913.22	Disburse 2026	ement For: 🗶 Primary 🗌 General			
Full Name of Payee		Memo	Item D	ate of Public Distribution/Dissemination			
EYP Consultants LLC				04 / D D / Y Y Y Y 0222			
Mailing Address 2949 NW 120th Way			А	mount			
	Ototo	Zin Oodo		1012.14			
City Sunrise	State Zip Code FL 33323			Transaction ID : SE-S795683 Date of Disbursement or Obligation			
Purpose of Expenditure Payment Processing		Category/		M M / D D / Y Y Y Y			
		Type 004		04 13 2022			
Name of Federal Candidate:		x Support	Office S				
Carbajal, Salud, , ,		Oppose	Pr	esident Senate State: CA			
Calendar Year-To-Date Per Election for Office Sought	7 7	82913.22	Disburse 2022	ement For: 🗴 Primary General			
(a) SUBTOTAL of Itemized Independent Expenditures	;		· •				
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•				
(c) TOTAL Independent Expenditures			•	· · · · · · · · · · · · · ·			
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized						
PIARO, ROBERT, , ,	[Electronically Fil	led] Date	• 04	/ D D / Y Y Y Y 07 2022			
Signature							

ITEMIZED INDEPENDENT EXPENDITURES					PAGE 36	-			
NAME OF COMMITTEE (In Full) ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC					FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼				
					C00622472	2			
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	M M /	D D /	Y Y Y Y Y			
Full Name of Payee EYP Consultants LLC		Memo	Item D			/Dissemination			
Mailing Address				^M 04	14	Y Y Y Y 2022			
2949 NW 120th Way					Amount				
City	State	Zip Code				1460.24			
Sunrise	FL	33323		Transaction ID : SE-S847897 Date of Disbursement or Obligation					
Purpose of Expenditure Payment Processing		Category/ Type 004		04 ^M	/ ^D 20 /	2022			
Name of Federal Candidate:		X Support	Office S	ought:	X House	District:24			
Carbajal, Salud, , ,		Oppose	Pr	resident	Senate	State: CA			
Calendar Year-To-Date Per Election for Office Sought	7 7	112118.03	Disburse 2022	ement For:	♥ Primar	y General			
Full Name of Payee		Memo	Item D	ate of Publi	c Distributior	/Dissemination			
EYP Consultants LLC				^M 04	/ D D /	Y Y Y Y 2022			
Mailing Address 2949 NW 120th Way			Δ	mount					
				inount					
City Sunrise	State Zip Code FL 33323			1460.24 Transaction ID : SE-S847895 Date of Disbursement or Obligation					
Purpose of Expenditure Payment Processing	1	Category/ Type 004			/ <u>20</u> /	Ý 2022			
Name of Federal Candidate:		X Support	Office S	ought:	House	District: 00			
Collins, Susan, , ,		Oppose			× Senate	State: ME			
Calendar Year-To-Date Per Election for Office Sought	7	112118.03	Disburse 2026	ement For:	Primar	y General			
	<u></u>			Other (sp	oecify) ▶	2020.40			
(a) SUBTOTAL of Itemized Independent Expenditures	· · · · · · · · · · · · · · · · · · ·					2920.48			
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•						
(c) TOTAL Independent Expenditures			•						
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized								
	[Electronically Fi	led] Date	e 04	/ D D 14	/ Y Y 20	22			
Signature									

ITEMIZED INDEPENDENT EXPENDITURES	5				PAGE 37		
NAME OF COMMITTEE (In Full)					-	24 OF FORM 3	
ASSOCIATION FOR EMERGENCY	RESPOND	ERS AND				ON NUMBER	
FIREFIGHTERS PAC				С	C00622472		4
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	M M /	D D /	Y Y Y Y	
Full Name of Payee		Memo	Item D	ate of Public	c Distribution	Dissemination	
EYP Consultants LLC				M M	/ D_D /	Y Y Y Y 2022	Y
Mailing Address 2949 NW 120th Way			A	mount		LULL	
City	State	Zip Code				1387.96	٦
Sunrise	FL	33323			ID : SE-S875		
Purpose of Expenditure Payment Processing		Category/ Type 004		of Disbu	Ursement or (27	Dbligation Y Y Y 2022	Y
Name of Federal Candidate:		X Support	Office S	ought:	House	District: 00	
Collins, Susan, , ,					X Senate	State: ME	
				esident	× Primar		
Calendar Year-To-Date Per Election for Office Sought	, ,	139877.19	2026	Other (sp			
Full Name of Payee		Memo	Item D	ate of Public	c Distribution	Dissemination	
EYP Consultants LLC				м м 04	/ D D / 21	Y Y Y Y 2022	Y
Mailing Address 2949 NW 120th Way							
			A	mount			_
City	State	Zip Code				1387.96	
Sunrise	FL	33323			ID: SE-S875 ursement or (
Purpose of Expenditure Payment Processing		Category/ Type 004		04	27 ²	y y y 2022	Y
Name of Federal Candidate:		X Support	Office S	ought:	X House	District: 24	
Carbajal, Salud, , ,		Oppose		esident	Senate	State: CA	
Calendar Year-To-Date			Disburse	ement For:	× Primar	/ Gener	al
Per Election for Office Sought		139877.19	2022	Other (sp	Decify) ►		
(a) SUBTOTAL of Itemized Independent Expenditures	S					2775.92	7
(b) SUBTOTAL of Unitemized Independent Expenditu	Ires		Ē				ī
				7			
(c) TOTAL Independent Expenditures			•				
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candid party committee) any political party committee or its	ate or authorized						
PIARO, ROBERT, , ,			M M	/ D D	/ Y Y	Y Y	
Signature	[Electronically Fi	led] Date	e 04	21	202		
Oignaturo							

ITEMIZED INDEPENDENT EXPENDITURE	S			PAGE 38 OF 57
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
ASSOCIATION FOR EMERGENCY	RESPOND	ERS AND		FEC IDENTIFICATION NUMBER ▼
FIREFIGHTERS PAC				C C00622472
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	A = M / D = D / Y = Y = Y = Y = Y
Full Name of Payee		🗶 Memo	Item Date	of Public Distribution/Dissemination
LAV Services LLC Invoice for this estimate issued and paid after clo	se of books		- I I	
Mailing Address 1009 Whitney Ranch Dr.			- L	04 28 2022
			Amou	Int
City	State	Zip Code		2775.92
Henderson	NV	89014		saction ID : SE-S876719 of Disbursement or Obligation
Purpose of Expenditure Phonebank Payroll Services(Estimate)		Category/ Type 004		
Name of Federal Candidate:		X Support	Office Cours	ht. Usuas District. 00
Collins, Susan, , ,		SupportOppose	Office Soug	
			Disburseme	
Calendar Year-To-Date Per Election for Office Sought		162980.44	2026	Dther (specify) ►
Full Name of Payee		🗶 Memo	Item Date	of Public Distribution/Dissemination
LAV Services LLC Invoice for this estimate issued and paid after clo	ose of books			04 / D D / Y Y Y Y 04 28 2022
Mailing Address 1009 Whitney Ranch Dr.				
			Amou	Int
City	State	Zip Code		2775.91
Henderson	NV	89014		saction ID : SE-S876721 of Disbursement or Obligation
Purpose of Expenditure Phonebank Payroll Services(Estimate)		Category/ Type 004		
Thorebank rayion Services(Estimate)		Type 004	- L	
Name of Federal Candidate:		X Support	Office Soug	ht: X House District: 24
Carbajal, Salud, , ,		Oppose	Presic	lent Senate State: CA
Calendar Year-To-Date		162980.44	Disburseme	nt For: 🗴 Primary 🗌 General
Per Election for Office Sought	T	102000.11	2022	Other (specify) ►
			_	
(a) SUBTOTAL of Itemized Independent Expenditure	res		• •	0.00
(b) SUBTOTAL of Unitemized Independent Expend	litures			
(c) TOTAL Independent Expenditures				
(-)				7 7
Under penalty of perjury I certify that the indeper with, or at the request or suggestion of, any canc party committee) any political party committee or	lidate or authorized			
PIARO, ROBERT, , ,		1- 11	M M /	
Signature	[Electronically Fi	Date	e 04	28 2022

ITEMIZED INDEPENDENT EXPENDITURES	5			PAGE 39 OF 57
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
	RESPOND	FRS AND	FE	C IDENTIFICATION NUMBER ▼
FIREFIGHTERS PAC			C	C00622472
Check if 24-hour report 48-hour report	New rep	port Amends repo	rt filed on	/ D D / Y Y Y Y Y
Full Name of Payee		Memo	Item Date of P	ublic Distribution/Dissemination
LAV Services LLC			03	M / D D / Y Y Y Y 31 2022
Mailing Address 1009 Whitney Ranch Dr.			Amount	
City	State	Zip Code		2054.75
Henderson	NV	89014		ion ID : SE-S789207 visbursement or Obligation
Purpose of Expenditure Phonebank Payroll Services		Category/ Type 004		
Name of Federal Candidate:		X Support	Office Sought:	House District:00
Collins, Susan, , ,		Oppose	President	Senate State: ME
Calendar Year-To-Date Per Election for Office Sought		62670.40	Disbursement Fo	or: x Primary General
Full Name of Payee	, ,	Memo		ublic Distribution/Dissemination
LAV Services LLC			M	M / D D / Y Y Y Y
Mailing Address 1009 Whitney Ranch Dr.			03	31 2022
1009 Whitney Ranch Dr.			Amount	
City	State	Zip Code		2054.75
Henderson	NV	89014		tion ID : SE-S789209 Disbursement or Obligation
Purpose of Expenditure Phonebank Payroll Services		Category/ Type 004	04	M / D D / Y Y Y
Name of Federal Candidate:		X Support	Office Sought:	K House District: 24
Carbajal, Salud, , ,		Oppose	President	Senate State: <u>CA</u>
Calendar Year-To-Date Per Election for Office Sought	7 7	62670.40	Disbursement Fo	or: ✗ Primary _ General
(a) SUBTOTAL of Itemized Independent Expenditures	3		•	4109.50
(b) SUBTOTAL of Unitemized Independent Expenditu	ires			7
(c) TOTAL Independent Expenditures			•	л. т. т. т. т. т. т. "т. т. "т. т. т. т. т.
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candid party committee) any political party committee or its	ate or authorized			
PIARO, ROBERT, , ,	[Flastronicall. F	iladi	M M / D	
Signature	[Electronically Fi	Date	03	2022

ITEMIZED INDEPENDENT EXPENDITURES	5			PAGE 40 OF 57
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
ASSOCIATION FOR EMERGENCY	RESPOND	ERS AND		EC IDENTIFICATION NUMBER ▼
FIREFIGHTERS PAC				C C00622472
Check if 24-hour report 48-hour report	New rep	port Amends repo	rt filed on	M / D D / Y Y Y Y Y
Full Name of Payee		Memo	Item Date of	Public Distribution/Dissemination
LAV Services LLC			M_04	
Mailing Address 1009 Whitney Ranch Dr.			Amount	
City	State	Zip Code		2024.28
Henderson	NV	89014		tion ID : SE-S795685 Disbursement or Obligation
Purpose of Expenditure Phonebank Payroll Services		Category/ Type 004		M / D D / Y Y Y
Name of Federal Candidate:		X Support	Office Sought:	House District: 00
Collins, Susan, , ,		Oppose	Presiden	
Calendar Year-To-Date		00040.00	Disbursement I	For: X Primary General
Per Election for Office Sought	7 7 7	82913.22	2026 Oth	er (specify) ►
Full Name of Payee LAV Services LLC		Memo	Item Date of	Public Distribution/Dissemination
			M 0	
Mailing Address 1009 Whitney Ranch Dr.			Amount	
City	State	Zin Codo		2024.28
City Henderson	NV	Zip Code 89014		ction ID : SE-S795687
Purpose of Expenditure		Category/	Date of	Disbursement or Obligation
Phonebank Payroll Services		Type 004	0	4 13 2022
Name of Federal Candidate:		x Support	Office Sought:	★ House District: 24
Carbajal, Salud, , ,		Oppose	Presiden	t Senate State: CA
Calendar Year-To-Date Per Election for Office Sought		82913.22	Disbursement I 2022	
				er (specify)
(a) SUBTOTAL of Itemized Independent Expenditure:	3		•	4048.56
(b) SUBTOTAL of Unitemized Independent Expenditu	Ires		•	л. I. I. I. I. I. I. Л. I. Л. Л. I. Л. I.
(c) TOTAL Independent Expenditures			•	7 7 7
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candid party committee) any political party committee or its	ate or authorize			
PIARO, ROBERT, , ,	[Electron: H T	1.1	M M / I	
Signature	[Electronically Fi	Date	04	07 2022

ITEMIZED INDEPENDENT EXPENDITURES	5			PAGE 41 OF 57
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
ASSOCIATION FOR EMERGENCY	RESPOND	ERS AND		C C00622472
FIREFIGHTERS PAC				0 00022472
Check if 24-hour report 48-hour report	New rep	port Amends repo	rt filed on	M / D D / Y Y Y Y
Full Name of Payee		Memo	Item Date	of Public Distribution/Dissemination
				04 / D D / Y Y Y Y 04 14 2022
Mailing Address 1009 Whitney Ranch Dr.			Amou	int
City	State	Zip Code		2920.48
Henderson	NV	89014		saction ID : SE-S847899 of Disbursement or Obligation
Purpose of Expenditure Phonebank Payroll Services		Category/ Type 004		$ \begin{array}{c} \begin{array}{c} \begin{array}{c} 0 \\ 0 \\ 0 \\ \end{array} \end{array} \right) \left(\begin{array}{c} 0 \\ 2 \\ \end{array} \right) \left(\begin{array}{c} 0 \\ 0 \\ \end{array} \right) \left(\begin{array}{c} 0 \\ \end{array} \right) \left(\begin{array}{c} 0 \\ 0 \\ \end{array} \right) \left(\begin{array}{c} 0 \\ \end{array} \right) \left(\begin{array}{c}$
Name of Federal Candidate:		X Support	Office Soug	ht: House District: 00
Collins, Susan, , ,		Oppose	Presic	
Calendar Year-To-Date			Disburseme	nt For: X Primary General
Per Election for Office Sought		112118.03	2026	Dther (specify) ►
Full Name of Payee		Memo	Item Date	of Public Distribution/Dissemination
				04 / D D / Y Y Y Y 04 14 2022
Mailing Address 1009 Whitney Ranch Dr.			Amou	
City Henderson	State	Zip Code	Tran	2920.48 saction ID : SE-S847901
Purpose of Expenditure		89014		of Disbursement or Obligation
Phonebank Payroll Services		Category/ Type 004		04 / D D / Y Y Y Y 2022
Name of Federal Candidate:		X Support	Office Soug	ht: X House District: 24
Carbajal, Salud, , ,		Oppose	Presic	lent Senate State: CA
Calendar Year-To-Date		112118.03	Disburseme 2022	nt For: X Primary General
Per Election for Office Sought	7 7		2022	Dther (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures	s		► L	5840.96
(b) SUBTOTAL of Unitemized Independent Expenditu	ires		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candid party committee) any political party committee or its	ate or authorize			
ρίλρο βοβερτ			M M /	
PIARO, ROBERT, , , Signature	[Electronically Fi	iled] Date	04	14 2022

ITEMIZED INDEPENDENT EXPENDITURES	6				PAGE 42	-	
NAME OF COMMITTEE (In Full)						24 OF FORM 3	
ASSOCIATION FOR EMERGENCY	RESPOND	ERS AND				ON NUMBER V	
FIREFIGHTERS PAC				С	C00622472		1
Check if 24-hour report 48-hour report	New rep	port Amends repo	ort filed on	M M /	D D /	Y Y Y Y]
Full Name of Payee		Memo	Item Da	te of Public	Distribution	/Dissemination	
LAV Service's LLC				м м / 04	21 /	2022	Y
Mailing Address 1009 Whitney Ranch Dr.			Am	nount			
City	State	Zip Code	— F			2775.92	٦
Henderson	NV	89014		ansaction ID te of Disbur			
Purpose of Expenditure Phonebank Payroll Services		Category/ Type 004		04 /	27	2022	Ý
Name of Federal Candidate:		X Support	Office So	uaht:	House	District: 00	
Collins, Susan, , ,		Oppose			Senate	State: ME	_
Calendar Year-To-Date		139877.19	Disburser	nent For:	× Primar	/ Genera	al
Per Election for Office Sought		133077.13	2026	Other (spe	ecify) ►		
Full Name of Payee		Memo	Item Da	te of Public	Distribution	Dissemination	
				04 /	21 /	y y y 2022	Ý
Mailing Address 1009 Whitney Ranch Dr.			Am	nount			
<u></u>						0775.00	
City Henderson	State	Zip Code 89014		ansaction II			_
Purpose of Expenditure			Da	te of Disbur			
Phonebank Payroll Services		Category/ Type 004		04 /	27	2022	r
Name of Federal Candidate:		X Support	Office So	ught: 🗶	House	District: 24	
Carbajal, Salud, , ,		Oppose	Pre	sident	Senate	State: CA	
Calendar Year-To-Date		139877.19	Disburser 2022	nent For:	× Primar	/ Genera	al
Per Election for Office Sought	7 7		2022	Other (spe	ecify) ►		_
(a) SUBTOTAL of Itemized Independent Expenditure	s		•			5551.84]
(b) SUBTOTAL of Unitemized Independent Expenditu	ures		•	,			
(c) TOTAL Independent Expenditures			•		7		
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candic party committee) any political party committee or its	late or authorize						
PIARO, ROBERT, , ,	[Electronically Fi	iled]	M_M			Y Y	
Signature	12 recubineany F	Date	e 04	21	202	<u> </u>	

Invoice for this estimate issued and paid after close of books 04 28 2022 Mailing Address 2124 Union ave. Amount City State Zip Code 2004.8: Costa Mesa CA 92627 Date of Disbursement or Obligation Purpose of Expenditure Category/ Phonebank Long Distance(Estimate) Category/ Type 004 Transaction ID : SE-S876723 Date of Disbursement or Obligation Name of Federal Candidate: X Support Office Sought: House District: 0 Calendar Year-To-Date Per Election for Office Sought 162980.44 Disbursement For: X Primary Ger Full Name of Payee Ridge Innovative Invoice for this estimate issued and paid after close of books Memo Item Date of Public Distribution/Dissemination Mailing Address 2124 Union ave. State Zip Code 2004.83 Transaction ID : SE-S876725 Date of Disbursement or Obligation Purpose of Expenditure Phonebank Long Distance(Estimate) Category/ Type 004 28 2022 Mailing Address 2124 Union ave. Support Office Sought: House District: 2 Name of Federal Candidate: CA	ITEMIZED INC	DEPENDENT EXPENDIT	URES				PAGE 43	_
ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS PAC Cocceters Coceters Cocceters		MITTEE (In Full)						
FIREFIGHTERS PAC C 000622472 Check if 24-hour report New report Amends report filed on Image: Control of the seminate issued and paid after close of books Full Name of Payse Full Name of Payse Image: Control of the seminate issued and paid after close of books Image: Control of the seminate issued and paid after close of books Mailing Address 2124 Union ave. Control of Debursement of Collipation Image: Control of Debursement of Collipation Phonebank forg Destance(Estimate) Category/ Type Odd Control of Debursement of Collipation Calendar Year-To-Date Control of Collice Sought House District Image: Control of Collice Sought Full Name of Payse Ridge Innovative Discussement For: X Immary Cert Purpose of Expenditure Catendar Year-To-Date Discussement For: X Immary Cert Purpose of Expenditure Catendar Year-To-Date Discussement for: X Immary Cert Purpose of Expenditure Catendar Year-To-Date Catendar Year-To-Date Discussement for: X Immary Cert Purpose of Expenditure Catendar Year-To-Date Catendar Year-To-Date President 's ensate state: Cert Purpose of Expenditu		, ,	NCY RESPONDE	ERS AND			DENTIFICATI	ON NUMBER ▼
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Collins, Susan, , , Collins, Susan, , , Collins, Susan, , , Collins, Susan, , , Collins, Susan, , , Copose President is senate State: M Calendar Year-To-Date Per Election for Office Sought 162980.44 Disbursement For: is primary is for the senate state: M Full Name of Payee Ridge Innovative Invoice for this estimate issued and paid after close of books Memo Item Date of Public Distribution/Dissemination Modified after close of books Mailing Address 2124 Union ave. CA 92627 Date of Disbursement or Obligation City Costa Mesa CA 92627 Transaction ID: SE-S976725 Purpose of Expenditure Phonebank Long Distance(Estimate) Categony/ Type Od4 Immary Name of Federal Candidate: Support Oppose President Senate State: C Calendar Year-To-Date Per Election for Office Sought 162980.44 Disbursement For: is Primary is cartered and the senate state: C Calendar Year-To-Date Per Election for Office Sought 162980.44 Disbursement For: is Primary is cartered and the senate state: C (e) SUBTOTAL of Itemized Independent Expenditures 0.00 (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures or suggestion of, any candidate or auth			I					0
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Per Election for Office Sought 162980.44 2026 Other (specify) ▶ Full Name of Payee Image: Construction of Construction (Specify) ▶ Date of Public Distribution/Dissemination Invoice for this estimate issued and paid after close of books Image: Construction (Specify) ▶ Date of Public Distribution/Dissemination Mailing Address 2124 Union ave. Image: Construction (Specify) ▶ Date of Public Distribution/Dissemination City State Zip Code 20627 Pare of Disbursement or Obligation Purpose of Expenditure Category/ 004 Image: Construction (Specify) ▶ Date of Disbursement or Obligation Name of Federal Candidate: Image: Construction (Specify) ▶ Office Sought Image: Construction (Specify) ▶ Name of Federal Candidate: Image: Construction (Specify) ▶ Office Sought Image: Construction (Specify) ▶ (a) SUBTOTAL of Itemized Independent Expenditures Image: Construction (Specify) ▶ Image: Construction (Specify) ▶ (b) SUBTOTAL of Unitemized Independent Expenditures Image: Construction (Specify) ▶ Image: Construction (Specify) ▶ Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or constitution, or a political party committee or us agent. Image: Construction (State)	Collins, Susa	n, , ,		Oppose	Pres	sident	X Senate	State: ME
Ridge Innovative Invoice for this estimate issued and paid after close of books Mailing Address 2124 Union ave. City State Zip Code Costa Mesa CA 92627 Purpose of Expenditure Category/ 004 Phonebank Long Distance(Estimate) Category/ 004 Name of Federal Candidate: Support Office Sought: House District: Carbajal, Salud, , , Calendar Year-To-Date Disbursement For: Primary Ger Per Election for Office Sought 162980.44 Disbursement For: Primary Ger (a) SUBTOTAL of Itemized Independent Expenditures 0.00 0.00 (b) SUBTOTAL of Unitemized Independent Expenditures 0.00 Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or comwith, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a polit party committee) any political party committee or its agent.			· · · · · · ·	162980.44		1		y General
Invoice for this estimate issued and paid after close of books Mailing Address 2124 Union ave. City State Zip Code Costa Mesa CA 92627 Purpose of Expenditure Category/ 0.4 Phonebank Long Distance(Estimate) Category/ 0.4 Name of Federal Candidate: X Support Office Sought: Catedor Year-To-Date President Senate Per Election for Office Sought 162980.44 Disbursement For: (a) SUBTOTAL of Itemized Independent Expenditures > 0.00 (b) SUBTOTAL of Itemized Independent Expenditures > > (c) TOTAL Independent Expenditures > > Under penalty of perjury I certify that the independent expenditures or authorized committee or agent of either, or (if the reporting entity is not a polit party committee) any political party committee or its agent.				🗶 Memo	Item Dat	te of Publi	c Distribution	/Dissemination
City State Zip Code 2004.83 Costa Mesa CA 92627 Tansaction ID : SE-S876725 Date of Disbursement or Obligation Mm / Im /			ter close of books					Y Y Y Y 2022
City State Zip Code 2004.83 Costa Mesa CA 92627 Tansaction ID : SE-S876725 Purpose of Expenditure Category/ 004 Mm / Control Distance(Estimate) Name of Federal Candidate: X Support Office Sought: X House District: 2 Carbajal, Salud, , , Oppose President Senate State: C Calendar Year-To-Date Disbursement For: X Primary Ger Per Election for Office Sought 162980.44 2022 Other (specify) >	Mailing Addre	2124 Union ave.			٨٣			
Costa Mesa CA 92627 Transaction ID : SE-S876725 Purpose of Expenditure Phonebank Long Distance(Estimate) Category/ Type 004 Image: Category/ Type 004 Name of Federal Candidate: X Support Office Sought: House District: 2 Category/ Type 004 Image: Category/ Type 004 Image: Category/ Type 004 Image: Category/ Type Image: Category/ Typ				.		iount		
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Phonebank Long Distance(Estimate) Category/ Type 004 Image: Market of Sector Sec			CA	92627				
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Carbajal, Salud, , , , Oppose President Senate State: Calendar Year-To-Date Disbursement For: X Primary Ger Per Election for Office Sought 162980.44 Disbursement For: X Primary Ger (a) SUBTOTAL of Itemized Independent Expenditures > 0.00 (b) SUBTOTAL of Unitemized Independent Expenditures > 0.00 (c) TOTAL Independent Expenditures > > Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or comwith, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee or its agent. PIARO, ROBERT, . , Electronically Filed!	Name of Fed	leral Candidate:		X Support	Office So	ught:	X House	District: 24
Image: Description for Office Sought 162980.44 2022 Other (specify) > (a) SUBTOTAL of Itemized Independent Expenditures > 0.00 (b) SUBTOTAL of Unitemized Independent Expenditures > 0.00 (c) TOTAL Independent Expenditures > > Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or consultation, or consultation, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee or its agent. PlaRO, ROBERT, Image: Mathematical party committee or its agent.	Carbajal, Sal	ud, , ,			Pres	sident	Senate	State: CA
(a) SUBTOTAL of Itemized Independent Expenditures 0.00 (b) SUBTOTAL of Unitemized Independent Expenditures 0.00 (c) TOTAL Independent Expenditures 0.00 Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or consultation, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee or its agent. PIARO, ROBERT, Iterationally Filed!				162980.44		1		y General
(b) SUBTOTAL of Unitemized Independent Expenditures			7 7			Other (sp	pecify) 🕨	
(c) TOTAL Independent Expenditures	(a) SUBTOTA	L of Itemized Independent Expe	enditures		•	7		0.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or consultation, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee or its agent.	(b) SUBTOTA	L of Unitemized Independent E	xpenditures		•			
with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a polit party committee) any political party committee or its agent.	(c) TOTAL Ind	ependent Expenditures						
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	PIARO, RO	DBERT, , ,	[Electronically Fil	led]				
Signature	Signature							

ITEMIZED INDEPENDENT EXPENDITURES	5			PAGE 44 OF 57
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
ASSOCIATION FOR EMERGENCY	RESPONDI	ERS AND		FEC IDENTIFICATION NUMBER ▼
FIREFIGHTERS PAC				C C00622472
Check if 24-hour report 48-hour report	New rep	oort Amends repo	ort filed o	
Full Name of Payee		Memo	Item I	Date of Public Distribution/Dissemination
Ridge Innovative				03 / D D / Y Y Y Y 03 31 2022
Mailing Address 2124 Union ave.				Amount
City	State	Zip Code		1483.99
Costa Mesa	CA	92627		Transaction ID : SE-S789211
Purpose of Expenditure Phonebank Long Distance		Category/ Type 004		Date of Disbursement or Obligation
Name of Federal Candidate:		X Support	Office	Sought: House District: 00
Collins, Susan, , ,				President X Senate State: ME
Calendar Year-To-Date				sement For: X Primary General
Per Election for Office Sought		62670.40	2026	Other (specify) ►
Full Name of Payee		Memo	Item I	Date of Public Distribution/Dissemination
Ridge Innovative				M M / D D / Y Y Y Y
Mailing Address 2124 Union ave.				03 31 2022
2124 Onion ave.				Amount
City	State	Zip Code		1483.99
Costa Mesa	CA	92627		Transaction ID : SE-S789213 Date of Disbursement or Obligation
Purpose of Expenditure		Category/	- L	M M / D D / Y Y Y
Phonebank Long Distance		Type 004		04 06 2022
Name of Federal Candidate:		x Support	Office	Sought: X House District: 24
Carbajal, Salud, , ,		Oppose	F	President Senate State: CA
Calendar Year-To-Date		62670.40		sement For: X Primary General
Per Election for Office Sought		02070.40	2022	Other (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures	S		•	2967.98
(b) SUBTOTAL of Unitemized Independent Expenditu	ires		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candid party committee) any political party committee or its	ate or authorized			
PIARO, ROBERT, , ,			M	
Signature	[Electronically Fi	Date	e 03	31 2022
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ITEMIZED INDEPENDENT EXPENDITURES	;			PAGE 45 OF 57
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
ASSOCIATION FOR EMERGENCY I	RESPONDI	ERS AND		FEC IDENTIFICATION NUMBER ▼
FIREFIGHTERS PAC				C C00622472
Check if 24-hour report 48-hour report	New rep	oort Amends repo	ort filed on	M = M / D = D / Y = Y = Y = Y
Full Name of Payee		Memo	Item Date	of Public Distribution/Dissemination
Ridge Innovative				M M / D D / Y Y Y Y 04 07 2022
Mailing Address 2124 Union ave.				لينيا ليا لن
			Amo	unt
City	State	Zip Code		1461.98
Costa Mesa	CA	92627		saction ID : SE-S795689 of Disbursement or Obligation
Purpose of Expenditure Phonebank Long Distance	·	Category/ Type 004		M M / D D / Y Y Y Y 04 13 2022
Name of Federal Candidate:		X Support	Office Soug	ht: House District: 00
Collins, Susan, , ,		Oppose	Presi	
Calendar Year-To-Date			Disburseme	ent For: X Primary General
Per Election for Office Sought	7 7	82913.22	2026	Other (specify)
Full Name of Payee		Memo	Item Date	of Public Distribution/Dissemination
Ridge Innovative				M M / D D / Y Y Y Y 04 07 2022
Mailing Address 2124 Union ave.				
			Amo	unt
City	State	Zip Code		1461.98
Costa Mesa	CA	92627		nsaction ID : SE-S795691 of Disbursement or Obligation
Purpose of Expenditure Phonebank Long Distance		Category/ 004		04 / D D / Y Y Y Y 04 13 2022
· · · · · · · · · · · · · · · · · · ·		Type 004		
Name of Federal Candidate:		x Support	Office Soug	
Carbajal, Salud, , ,		Oppose	Presi	dent Senate State: CA
Calendar Year-To-Date		82913.22	Disburseme 2022	ent For: X Primary General
Per Election for Office Sought	7 7			Other (specify)
			_	
(a) SUBTOTAL of Itemized Independent Expenditures	3			2923.96
(b) SUBTOTAL of Unitemized Independent Expenditu	Ires			
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independ- with, or at the request or suggestion of, any candid party committee) any political party committee or its	ate or authorized			
			Мала	
PIARO, ROBERT, , , Signature	[Electronically Fi	[led] Date	e 04	07 2022
Signature				

ITEMIZED INDEPENDENT EXPENDITURES	5			H	PAGE 46 OF	57
NAME OF COMMITTEE (In Full)					FOR LINE 24 OF FO	
ASSOCIATION FOR EMERGENCY	RESPONDI	ERS AND			ENTIFICATION NUM	
FIREFIGHTERS PAC				С	C00622472	
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Full Name of Payee		Memo	Item D	ate of Public	Distribution/Dissemin	ation
Ridge Innovative				M M /	D D / Y Y 14 20	ү ү 22
Mailing Address 2124 Union ave.			A	mount	20	
City	State	Zip Code	[2109	9.24
Costa Mesa	CA	92627			D : SE-S849491	
Purpose of Expenditure Phonebank Long Distance		Category/ Type 004		ate of Disbui	D D / Y Y 20 20	Y Y
Name of Federal Candidate:			01500		District.	00
Collins, Susan, , ,		Support Oppose	Office S		House District: _	ME
					Senate State:	
Calendar Year-To-Date Per Election for Office Sought		112118.03	2026	ement For:		General
Full Name of Payee		Memo	Item D	ate of Public	Distribution/Dissemin	ation
Ridge Innovative				04 /	D D / Y Y 14 20	ү ү 22
Mailing Address 2124 Union ave.						
			A	mount		
City	State	Zip Code			2109).24
Costa Mesa	CA	92627			D: SE-S849493 rsement or Obligation	
Purpose of Expenditure Phonebank Long Distance		Category/ Type 004		^M 04		Y Y
Name of Federal Candidate:		X Support	Office S	ought:	House District:	24
Carbajal, Salud, , ,		Oppose		esident	 Senate State: _	CA
Calendar Year-To-Date			Disburse	ement For:		General
Per Election for Office Sought		112118.03	2022	Other (sp	ecify) ►	
(a) SUBTOTAL of Itemized Independent Expenditures	3				4218.4	48
(b) SUBTOTAL of Unitemized Independent Expenditu	ires		•	7		
(c) TOTAL Independent Expenditures			•			
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candid party committee) any political party committee or its	ate or authorized					
PIARO, ROBERT, , ,	(m) ,	7 77	M M	/ D D	/	
Signature	[Electronically Fi	Date	e 04	14	2022	

ITEMIZED INDEPENDENT EXPENDITURES	5			PAGE 47 OF 57
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
ASSOCIATION FOR EMERGENCY	RESPOND	ERS AND		FEC IDENTIFICATION NUMBER ▼
FIREFIGHTERS PAC				C C00622472
Check if 24-hour report 48-hour report	New rep	port Amends repo	rt filed on	M / D D / Y Y Y Y
Full Name of Payee		Memo	Item Date of	Public Distribution/Dissemination
Ridge Innovátive				04 21 2022
Mailing Address 2124 Union ave.			Amount	
City	State	Zip Code		2004.83
Costa Mesa	CA	92627		ction ID : SE-S875989
Purpose of Expenditure Phonebank Long Distance		Category/ Type 004	М	f Disbursement or Obligation M / D D / Y Y Y Y 04 27 2022
		Type		
Name of Federal Candidate:		× Support	Office Sought:	
Collins, Susan, , ,		Oppose	Presider	nt 🗶 Senate State: <u>ME</u>
Calendar Year-To-Date Per Election for Office Sought	<u> </u>	139877.19	Disbursement 2026 Otl	For: ≭ Primary General her (specify) ►
Full Name of Payee		Memo		Public Distribution/Dissemination
Ridge Innovative			М	
Mailing Address 2124 Union ave.				04 21 2022
2124 011011 ave.			Amount	t
City	State	Zip Code		2004.83
Costa Mesa	CA	92627		action ID : SE-S875991 Disbursement or Obligation
Purpose of Expenditure Phonebank Long Distance	-	Category/ Type 004	М	04 / D D / Y Y Y Y 2022
Name of Federal Candidate:		X Support	Office Sought	: X House District: 24
Carbajal, Salud, , ,		Oppose	Presider	
Calendar Year-To-Date		100077 10	Disbursement	For: X Primary General
Per Election for Office Sought		139877.19	2022 Otl	her (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditure	S		•	4009.66
(b) SUBTOTAL of Unitemized Independent Expenditu	Iros			
(b) SOBTOTAL OF ONREHIZED INdependent Expendit	1165			-/J /J /A
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candid party committee) any political party committee or its	ate or authorized			
PIARO, ROBERT, , ,	[Electronicall. F	iladi	M M /	
Signature	[Electronically Fi	Date	04	21 2022

NAME OF COMMITTEE (In Full) ASSOCIATION FOR EMERGENCY RESPONDERS AND	OR LINE 24 OF FORM 3XENTIFICATION NUMBER ▼
ASSOCIATION FOR EMERGENCY RESPONDERS AND	ENTIFICATION NUMBER V
	C00622472
Check if 24-hour report 48-hour report New report Amends report filed on 48-hour report	D D / Y Y Y Y Y Y
Standard Data Services LLC	Distribution/Dissemination
Invoice for this estimate issued and paid after close of books	28 2022
Amount	
Suite 206 City State	4163.87
New Philadelphia OH 44663 Transaction ID	
Purpose of Expenditure Caging and Database Services(Estimate) Category/ Type 004	
Name of Federal Candidate:	House District: 00
	Senate State: <u>ME</u>
Calendar Year-To-Date Disbursement For: Per Election for Office Sought 162980.44	x Primary General cify) ▶
i monte et tijee	Distribution/Dissemination
Standard Data Services LLC Invoice for this estimate issued and paid after close of books	28 / Y Y Y Y 2022
Mailing Address 513 Mill Ave SE	
Suite 206 Amount	
City State Zip Code New Philadelphia OH 44663	4163.87 D : SE-S876717
Date of Disburst	sement or Obligation
Caging and Database Services(Estimate)	D D / Y Y Y Y
Name of Federal Candidate:	House District: 24
Carbajal, Salud, , , President	Senate State: <u>CA</u>
Calendar Year-To-Date Disbursement For: 2022	X Primary General
Other (spec	cify) ►
(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the report party committee) any political party committee or its agent.	
PIARO, ROBERT, , , [Electronically Filed] Date 04 28	2022
Signature	

ITEMIZED INDEPENDENT EXPENDITURES	;			PAGE 49	OF 57
NAME OF COMMITTEE (In Full)					OF FORM 3X
ASSOCIATION FOR EMERGENCY I		FEC IDENTIFICATIO			
FIREFIGHTERS PAC				C C00622472	
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	M M / D /	Y Y Y Y Y
Full Name of Payee		Memo	Item D	ate of Public Distribution/D	Dissemination
Standard Data Services LLC				03 / D D / 31	Y Y Y Y 2022
Mailing Address 513 Mill Ave SE			A	nount	
Suite 206	State	Zip Code			3082.12
New Philadelphia	OH	44663		ansaction ID : SE-S78919	
		11000		ate of Disbursement or Ok	
Purpose of Expenditure Caging and Database Services		Category/ Type 004	1	04 / 06 /	Y Y Y Y 2022
Name of Federal Candidate:		X Support	Office S	ought: House D	District: 00
Collins, Susan, , ,		Oppose	Pr	esident X Senate	State: ME
Calendar Year-To-Date Per Election for Office Sought	7	62670.40	Disburse 2026	ment For: x Primary ☐ Other (specify) ►	General
Full Name of Payee		Memo	Item D	ate of Public Distribution/D	issemination
Standard Data Services LLC				03 / D / 31	Y Y Y Y 2022
Mailing Address 513 Mill Ave SE					
Suite 206			A	nount	
City	State	Zip Code			3082.12
New Philadelphia	ОН	44663		ransaction ID : SE-S7892 ate of Disbursement or Ob	••
Purpose of Expenditure Caging and Database Services		Category/ Type 004		M M / D D / 06	Y Y Y Y Y 2022
Name of Federal Candidate:		X Support	Office S	ought: 🗶 House D	District: 24
Carbajal, Salud, , ,		Oppose		esident Senate	State: CA
Calendar Year-To-Date Per Election for Office Sought		62670.40	Disburse 2022	ment For: X Primary	General
	7 7			Other (specify) ►	
(a) SUBTOTAL of Itemized Independent Expenditures	3		•		6164.24
(b) SUBTOTAL of Unitemized Independent Expenditu	ires		•		
(c) TOTAL Independent Expenditures			•	7 7	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized				
PIARO, ROBERT, , ,	[Flootronicall. P!	lodi	M M	/ D D / Y Y	
Signature	[Electronically Fil	Date	ə 03	31 2022	

ITEMIZED INDEPENDENT EXPENDITURES				ŀ	PAGE 50	-
NAME OF COMMITTEE (In Full)						24 OF FORM 3X
ASSOCIATION FOR EMERGENCY F				ON NUMBER ▼		
FIREFIGHTERS PAC				C	C00622472	
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	M = M /	D D /	YYYYY
Full Name of Payee		Memo	Item Da	ate of Public	Distribution	/Dissemination
Standard Data Services LLC				04 /	07 /	Y Y Y Y 2022
Mailing Address 513 Mill Ave SE			A	mount		
Suite 206	State	Zip Code	— I			3036.42
New Philadelphia	OH	44663		ransaction I	D SE-S795	
		11000		ate of Disbu		
Purpose of Expenditure Caging and Database Services		Category/ Type 004	1	04 /	13 /	Y Y Y Y 2022
Name of Federal Candidate:		X Support	Office So	ought:	House	District: 00
Collins, Susan, , ,		Oppose	Pr	esident D	K Senate	State: ME
Calendar Year-To-Date Per Election for Office Sought	7	82913.22	Disburse 2026	ment For:	Image: Primary ecify) ►	g General
Full Name of Payee		Memo	Item Da	ate of Public	Distribution	/Dissemination
Standard Data Services LLC				M M /	07 /	Y Y Y Y 2022
Mailing Address 513 Mill Ave SE				04	01	2022
Suite 206			A	mount		
City	State	Zip Code				3036.42
New Philadelphia	ОН	44663		ransaction late of Disbu		
Purpose of Expenditure Caging and Database Services		Category/ Type 004		04 /	13 /	Y Y Y Y 2022
Name of Federal Candidate:		X Support	Office So	ought:	House	District: 24
Carbajal, Salud, , ,		Oppose	Pro	esident	Senate	State: CA
Calendar Year-To-Date Per Election for Office Sought		82913.22	Disburse	ment For:	x Primar	General
	1 1			Other (sp	ecify) 🕨	
(a) SUBTOTAL of Itemized Independent Expenditures	;		•	7		6072.84
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•			
(c) TOTAL Independent Expenditures				7		
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized					
PIARO, ROBERT, , ,	(Fl. 4	1- 41	M M	/ D D	/ Y Y	YY
Signature	[Electronically Fil	Date	e 04	07	202	22
J						

ITEMIZED INDEPENDENT EXPENDITURES	6			PAGE 51 OF 57
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
ASSOCIATION FOR EMERGENCY				
FIREFIGHTERS PAC				C C00622472
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y = Y
Full Name of Payee		Memo	Item D	ate of Public Distribution/Dissemination
Standard Data Services LLC				04 14 Y Y Y Y Y
Mailing Address 513 Mill Ave SE				
Suite 206			A	mount
City	State	Zip Code		4380.72
New Philadelphia	ОН	44663		ransaction ID : SE-S847891 ate of Disbursement or Obligation
Purpose of Expenditure Caging and Database Services		Category/ Type 004		M M / D D / Y Y Y Y 04 / 20 / 2022
Name of Federal Candidate:		X Support	Office S	ought: House District: 00
Collins, Susan, , ,		Oppose	Pr	esident X Senate State: ME
Calendar Year-To-Date Per Election for Office Sought	7 7	112118.03	Disburse 2026	ement For: X Primary General
Full Name of Payee		Memo	Item D	ate of Public Distribution/Dissemination
Standard Data Services LLC			Kom	M M / D D / Y Y Y
Mailing Address 513 Mill Ave SE				04 14 2022
Suite 206			A	mount
City	State	Zip Code		4380.72
New Philadelphia	ОН	44663		ransaction ID : SE-S847893 ate of Disbursement or Obligation
Purpose of Expenditure Category/				M M / D D / Y Y Y Y
Caging and Database Services		Type 004		04 20 2022
Name of Federal Candidate:		X Support	Office S	ought: X House District: 24
Carbajal, Salud, , ,		Oppose	Pr	esident Senate State: CA
Calendar Year-To-Date		112118.03	Disburse 2022	ement For: X Primary General
Per Election for Office Sought	7 7		2022	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditure	S		•	8761.44
(b) SUBTOTAL of Unitemized Independent Expendite	ures		•	· · · · · · · · · · · ·
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candic party committee) any political party committee or its	late or authorized			
PIARO, ROBERT, , ,	[Electronically Fil	led] –	M	
Signature		Date	e 04	14 2022

ITEMIZED INDEPENDENT EXPENDITURES	5			PA	-	OF 57
NAME OF COMMITTEE (In Full)						
ASSOCIATION FOR EMERGENCY				N NUMBER ▼		
FIREFIGHTERS PAC				C co	00622472	
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	M M / D	D /	Y Y Y Y Y
Full Name of Payee		Memo	Item Da	ate of Public Di	stribution/E	Dissemination
Standard Data Services LLC				M M /	21	Y Y Y Y 2022
Mailing Address 513 Mill Ave SE			An	nount		
Suite 206	01-1-	7	—			4402.07
City	State	Zip Code 44663		ansaction ID :	SE 69750	4163.87
New Philadelphia	ОН	44003		ate of Disburse		
Purpose of Expenditure Caging and Database Services		Category/ Type 004		04 /	27 /	Y Y Y Y 2022
Name of Federal Candidate:		Support	Office Sc	ought: H	House [District: 00
Collins, Susan, , ,		Oppose	Pre	esident 🗴 S	Senate	State: ME
Calendar Year-To-Date Per Election for Office Sought	7	139877.19	Disburser 2026	ment For: 🗴 Other (specif		General
Full Name of Payee		Memo	Item Da	ate of Public Di	stribution/E	Dissemination
Standard Data Services LLC				M M /	21	Y Y Y Y 2022
Mailing Address 513 Mill Ave SE						
Suite 206			An	nount		
City	State	Zip Code				4163.87
New Philadelphia	ОН	44663		ransaction ID : ate of Disburser		-
Purpose of Expenditure Caging and Database Services		Category/ Type 004			27 /	Y Y Y Y 2022
Name of Federal Candidate:		X Support	Office Sc	ought: 🗶 H	House [District: 24
Carbajal, Salud, , ,		Oppose			Senate	State: CA
Calendar Year-To-Date Per Election for Office Sought		139877.19	Disburser 2022 -	ment For: 🗴	Primary	General
				Other (specif	fy) ▶	
(a) SUBTOTAL of Itemized Independent Expenditure:	S		•			8327.74
(b) SUBTOTAL of Unitemized Independent Expenditu	ires		•			
(c) TOTAL Independent Expenditures			•			
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candid party committee) any political party committee or its	ate or authorized					
PIARO, ROBERT, , ,	[Electronically Fil	ed] –	M	/ D D /		Y Y
Signature		Date	e 04	21	2022	<u> </u>

ITEMIZED INDEPENDENT EXPENDITURES	PAGE 53 OF 57
NAME OF COMMITTEE (In Full)	FOR LINE 24 OF FORM 3X
ASSOCIATION FOR EMERGENCY RESPONDERS AND	FEC IDENTIFICATION NUMBER ▼
FIREFIGHTERS PAC	C C00622472
Check if 24-hour report 48-hour report New report Amends report fil	led on M M / D D / Y Y Y Y
Full Name of Payee Memo Item	Date of Public Distribution/Dissemination
Invoice for this estimate issued and paid after close of books Mailing Address	04 28 2022
55 Lake Havasu Ave South	Amount
F-677 City State Zip Code	6322.92
Lake Havasu CityAZ86403	Transaction ID : SE-S876727 Date of Disbursement or Obligation
Purpose of Expenditure PHONEBANK IT/TECH SUPPORT(Estimate) Category/ Type 004	
Name of Federal Candidate:	ffice Sought: House District: 00
Collins, Susan, , ,	President X Senate State: ME
Calendar Year-To-Date Di Per Election for Office Sought 162980.44 202	isbursement For: x Primary General 26Other (specify) ►
Full Name of Payee	n Date of Public Distribution/Dissemination
Wired4Data Invoice for this estimate issued and paid after close of books	04 28 2022
Mailing Address 55 Lake Havasu Ave South	Amount
F-677	
City State Zip Code Lake Havasu City AZ 86403	6322.92 Transaction ID : SE-S876729
Purpose of Expenditure Category/ PHONEBANK IT/TECH SUPPORT(Estimate) 004	Date of Disbursement or Obligation
Name of Federal Candidate:	ffice Sought: X House District: 24
Carbajal, Salud, , ,	President Senate State: CA
	Sursement For: x Primary General 22 Other (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not with, or at the request or suggestion of, any candidate or authorized committee or agent of ei party committee) any political party committee or its agent.	
PIARO, ROBERT, , , [Electronically Filed] Date	04 28 2022
Signature	

ITEMIZED INDEPENDENT EXPENDITURES					AGE 54 OF 57	
NAME OF COMMITTEE (In Full)					OR LINE 24 OF FORM 3X	
ASSOCIATION FOR EMERGENCY RESPONDERS AND						
FIREFIGHTERS PAC				C	000622472	
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	M M /	D D / Y Y Y Y	
Full Name of Payee		Memo	Item Dat	e of Public E	Distribution/Dissemination	
Wired4Data				M M / 03	^D D / Y Y Y Y 31 2022	
Mailing Address 55 Lake Havasu Ave South			Am	ount		
F-677	State	Zin Codo	F		4680.26	
City	State	Zip Code 86403	Tra	negation ID	: SE-S789215	
Lake Havasu City	AZ	00403	-		ement or Obligation	
Purpose of Expenditure Phonebank IT/Tech Support		Category/ Type 004		04 /	06 / Y Y Y Y 2022	
Name of Federal Candidate:		Support	Office Sou	Jaht:	House District: 00	
Collins, Susan, , ,		Oppose		•	Senate State: <u>ME</u>	
Calendar Year-To-Date Per Election for Office Sought	7 7	62670.40	Disbursen 2026	nent For:	x Primary General	
Full Name of Payee		Memo	Item Dat	e of Public D	Distribution/Dissemination	
Wired4Data				M M / 03	D D / Y Y Y Y 31 2022	
Mailing Address 55 Lake Havasu Ave South						
F-677			Am	ount		
City	State	Zip Code			4680.26	
Lake Havasu City	AZ	86403			: SE-S789217 ement or Obligation	
Purpose of Expenditure Phonebank IT/Tech Support		Category/ Type 004		04 /	06 / Y Y Y Y 2022	
Name of Federal Candidate:		X Support	Office Sou	uaht: 🗶	House District: 24	
Carbajal, Salud, , ,		Oppose		sident	Senate State: CA	
Calendar Year-To-Date Per Election for Office Sought		62670.40	Disbursen 2022		Primary General	
	1 1			Other (spec	City) ►	
(a) SUBTOTAL of Itemized Independent Expenditures					9360.52	
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•			
			_			
(c) TOTAL Independent Expenditures						
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized					
DIADA DADEPT			MM	/ D D		
	[Electronically Fil	led] Date	e 03	31	2022	
Signature						

ITEMIZED INDEPENDENT EXPENDITURES	i			PAGE 55 OF 57
NAME OF COMMITTEE (In Full) ASSOCIATION FOR EMERGENCY I FIREFIGHTERS PAC	RESPONDI	ERS AND	FE	FOR LINE 24 OF FORM 3X C IDENTIFICATION NUMBER ▼ C00622472
Check if 24-hour report 48-hour report	New rep	ort Amends repo	M M	
Full Name of Payee Wired4Data		Memo		Public Distribution/Dissemination
Mailing Address 55 Lake Havasu Ave South			04	
F-677			Amount	
City	State	Zip Code		4610.87
Lake Havasu City	AZ	86403		ion ID : SE-S795693 Disbursement or Obligation
Purpose of Expenditure Phonebank IT/Tech Support	1	Category/ Type 004	04	M / D D / Y Y Y
Name of Federal Candidate:		X Support	Office Sought:	House District:00
Collins, Susan, , ,		Oppose	President	Senate State: ME
Calendar Year-To-Date Per Election for Office Sought	7 1 7	82913.22	Disbursement Fe	or: ★ Primary General r (specify) ►
Full Name of Payee Wired4Data		Memo	Item Date of P	
Mailing Address 55 Lake Havasu Ave South F-677			Amount	07 2022
City Lake Havasu City	State AZ	Zip Code 86403		4610.87 tion ID : SE-S795695 Disbursement or Obligation
Purpose of Expenditure Phonebank IT/Tech Support		Category/ Type 004	04	M / D D / Y Y Y
Name of Federal Candidate:		X Support	Office Sought:	★ House District: <u>24</u>
Carbajal, Salud, , ,		Oppose	President	Senate State: <u>CA</u>
Calendar Year-To-Date Per Election for Office Sought	5	82913.22	Disbursement For 2022 Othe	or: ✗ Primary _ General r (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures	5		•	9221.74
(b) SUBTOTAL of Unitemized Independent Expenditu	ires		•	7
(c) TOTAL Independent Expenditures			•	η
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candid party committee) any political party committee or its	ate or authorized			
PIARO, ROBERT, , , Signature	[Electronically Fi	led] Date		07 / Y Y Y Y 2022
oignature				

ITEMIZED INDEPENDENT EXPENDITURES					PAGE 56 OF 57
NAME OF COMMITTEE (In Full)					OR LINE 24 OF FORM 3X
				FEC IDE	ENTIFICATION NUMBER V
FIREFIGHTERS PAC				С	C00622472
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	M M /	D D / Y Y Y Y
Full Name of Payee		Memo	Item Date	e of Public	Distribution/Dissemination
Wired4Data				04 /	D D / Y Y Y Y 14 2022
Mailing Address 55 Lake Havasu Ave South			Amo	ount	
F-677					0050.04
City	State	Zip Code			6652.21
Lake Havasu City	AZ	86403			: SE-S847903 sement or Obligation
Purpose of Expenditure Phonebank IT/Tech Support		Category/ Type 004		M M /	D D / Y Y Y Y 20 2022
Name of Federal Candidate:		X Support	Office Sou	iaht:	House District:00
Collins, Susan, , ,		Oppose		sident X	
Calendar Year-To-Date Per Election for Office Sought	· · · ·	112118.03	Disbursem 2026	ent For: [Other (spe	x Primary General General
Full Name of Payee		Memo	Item Date	· ·	Distribution/Dissemination
Wired4Data				M M /	D D / Y Y Y Y 14 2022
Mailing Address 55 Lake Havasu Ave South					
F-677			Amo	ount	
City	State	Zip Code			6652.21
Lake Havasu City	AZ	86403			D: SE-S847905 sement or Obligation
Purpose of Expenditure Phonebank IT/Tech Support		Category/ Type 004		М М / 04	D D / Y Y Y Y 20 / 2022
Name of Federal Candidate:		X Support	Office Sou	ight: 🗴	House District: 24
Carbajal, Salud, , ,		Oppose		ident	Senate State: <u>CA</u>
Calendar Year-To-Date Per Election for Office Sought		112118.03	Disbursem 2022	L	Primary General
	1 1			Other (spe	city) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	;				13304.42
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•		
(c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized				
PIARO, ROBERT, , ,	[Flastnow! IL. T'	ad]	M M	/ D D	/
Signature	[Electronically Fil	[ed] Date	e 04	14	2022

ITEMIZED INDEPENDENT EXPENDITURE	S			PAGE 57 OF 57
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
	FEC IDENTIFICATION NUMBER ▼			
FIREFIGHTERS PAC				C C00622472
Check if24-hour report48-hour report	New rep	ort Amends repo	ort filed on	M / D D / Y Y Y Y
Full Name of Payee		Memo	Item Date	of Public Distribution/Dissemination
Wired4Data				04 / D D / Y Y Y Y 21 2022
Mailing Address 55 Lake Havasu Ave South			Amou	nt
F-677	04-44-	Zia Ocala		0000.00
City	State	Zip Code		6322.92
Lake Havasu City	AZ	86403		action ID : SE-S875993 of Disbursement or Obligation
Purpose of Expenditure Phonebank IT/Tech Support		Category/ Type 004		04 / D D / Y Y Y Y 27 2022
Name of Federal Candidate:		X Support	Office Sough	nt: House District: 00
Collins, Susan, , ,		Oppose	Presid	
Calendar Year-To-Date Per Election for Office Sought	7 7	139877.19	Disbursemer	nt For: X Primary General Other (specify) ►
Full Name of Payee		Memo	Item Date	of Public Distribution/Dissemination
Wired4Data				04 / D D / Y Y Y Y 04 21 2022
Mailing Address 55 Lake Havasu Ave South			L	
F-677			Amou	nt
City	State	Zip Code		6322.92
Lake Havasu City	AZ	86403		saction ID : SE-S875995 of Disbursement or Obligation
Purpose of Expenditure Phonebank IT/Tech Support		Category/ Type 004		04 / D D / Y Y Y Y 2022
Name of Federal Candidate:		X Support	Office Sough	nt: 🗶 House District: 24
Carbajal, Salud, , ,		Oppose	Presid	
Calendar Year-To-Date Per Election for Office Sought		139877.19	Disbursemer 2022	
	1 1			Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditure	9S		•	12645.84
(b) SUBTOTAL of Unitemized Independent Expendit	tures			· · · · · · · · · · ·
(c) TOTAL Independent Expenditures				195508.54
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candi- party committee) any political party committee or it	date or authorized			
PIARO, ROBERT, , ,	[Electronically Fil	led] Date	e 04	21 2022
Signature				