

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

12FE4M5

Three Rivers Political Action Committee

ADDRESS (number and street) 3321 SE 20th Ave

Check if different than previously reported. (ACC)

Portland OR 97202

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

C C00473116 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

July 31 Mid-Year Report (Non-election Year Only) (MY)

Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)

Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)

Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

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

Primary (12P) General (12G) Runoff (12R)

Convention (12C) Special (12S)

Election on [MM] / [DD] / [YYYY] in the State of []

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

General (30G) Runoff (30R) Special (30S)

Election on [MM] / [DD] / [YYYY] in the State of []

5. Covering Period [MM] / [DD] / [YYYY] through [MM] / [DD] / [YYYY]

02 01 2019 06 30 2019

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

Green, Jef, A, ,

Type or Print Name of Treasurer

Signature of Treasurer Green, Jef, A, , [Electronically Filed] Date [MM] / [DD] / [YYYY]

07 31 2019

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Three Rivers Political Action Committee

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2019"/>		32880.37
(b) Cash on Hand at Beginning of Reporting Period.....	32694.80	
(c) Total Receipts (from Line 19)	17500.00	17500.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	50194.80	50380.37
7. Total Disbursements (from Line 31).....	18931.30	19116.87
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	31263.50	31263.50
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Three Rivers Political Action Committee

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	17500.00	17500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	17500.00	17500.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	17500.00	17500.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	17500.00	17500.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	931.30	1116.87
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	931.30	1116.87
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	18000.00	18000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	18931.30	19116.87
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	18931.30	19116.87

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	17500.00	17500.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	17500.00	17500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	931.30	1116.87
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	931.30	1116.87

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 15
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Three Rivers Political Action Committee

A. AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 25 MASSACHUSETTS AVE, NW
SUITE 600

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00000422

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
06 / 20 / 2019

Transaction ID : C23486869

Amount of Each Receipt this Period
2500.00

Memo Item

B. BIOTECHNOLOGY INDUSTRY ORGANIZATION PAC (BIO PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1201 MARYLAND AVE, SW
STE. 900

City WASHINGTON State DC Zip Code 20024

FEC ID number of contributing federal political committee. **C** C00355677

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
06 / 28 / 2019

Transaction ID : C23487603

Amount of Each Receipt this Period
2500.00

Memo Item

C. INTERNATIONAL PAPER POLITICAL ACTION COMMITTEE (IP-PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1101 PENNSYLVANIA AVENUE NW
SUITE 200

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00034405

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
05 / 20 / 2019

Transaction ID : C23485750

Amount of Each Receipt this Period
2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	7500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 15
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Three Rivers Political Action Committee

A. NEW DEMOCRAT COALITION ACTION FUND

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

Mailing Address 233 PENNSYLVANIA AVE SE
2ND FLOOR

City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00409730

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 20 / 2019

Transaction ID : C23481173

Amount of Each Receipt this Period
5000.00

Memo Item

B. THE NATIONAL RURAL ELECTRIC COOPERATIVE ASSOCIATION ACTION COMMITTEE FOR RURAL ELECTRIFICA

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

Mailing Address 4301 WILSON BOULEVARD

City ARLINGTON State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C** C00002972

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
02 / 27 / 2019

Transaction ID : C23480126

Amount of Each Receipt this Period
5000.00

Memo Item

C.

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

Mailing Address

City State Zip Code

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	10000.00
TOTAL This Period (last page this line number only).....▶	17500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Three Rivers Political Action Committee

Full Name (Last, First, Middle Initial)

A. C&E Systems

Mailing Address PO Box 42307

City: Portland State: OR Zip Code: 97242

Purpose of Disbursement: FEC compliance

001
Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
03 / 11 / 2019

FEC Identification Number
C
Transaction ID : D697156
Amount of Each Disbursement this Period
130.00

Memo Item

Full Name (Last, First, Middle Initial)

B. C&E Systems

Mailing Address PO Box 42307

City: Portland State: OR Zip Code: 97242

Purpose of Disbursement: FEC compliance

001
Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2020 Primary General Other (specify)

Date of Disbursement
MM / DD / YYYY
03 / 25 / 2019

FEC Identification Number
C
Transaction ID : D698049
Amount of Each Disbursement this Period
75.00

Memo Item

Full Name (Last, First, Middle Initial)

C. C&E Systems

Mailing Address PO Box 42307

City: Portland State: OR Zip Code: 97242

Purpose of Disbursement: FEC compliance, postage

001
Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
04 / 24 / 2019

FEC Identification Number
C
Transaction ID : D698323
Amount of Each Disbursement this Period
126.30

Memo Item

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

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

331.30

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Three Rivers Political Action Committee

Full Name (Last, First, Middle Initial) A. NGP VAN, Inc.		Date of Disbursement MM / DD / YYYY 03 / 26 / 2019	
Mailing Address PO Box 392264		FEC Identification Number C [] Transaction ID : D697421 Amount of Each Disbursement this Period [] 300.00	
City Pittsburgh	State PA	Zip Code 15251-9264	Category/ Type 001
Purpose of Disbursement database services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. NGP VAN, Inc.		Date of Disbursement MM / DD / YYYY 06 / 12 / 2019	
Mailing Address PO Box 392264		FEC Identification Number C [] Transaction ID : D698857 Amount of Each Disbursement this Period [] 300.00	
City Pittsburgh	State PA	Zip Code 15251-9264	Category/ Type 001
Purpose of Disbursement database services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY [] / [] / []	
Mailing Address		FEC Identification Number C [] Amount of Each Disbursement this Period []	
City	State	Zip Code	Category/ Type
Purpose of Disbursement		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	[] 600.00
TOTAL This Period (last page this line number only).....▶	[] 931.30

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Three Rivers Political Action Committee

Full Name (Last, First, Middle Initial) A. BRINDISI FOR CONGRESS		Date of Disbursement MM / DD / YYYY 03 / 12 / 2019
Mailing Address PO BOX 165		FEC Identification Number C 000648725 Transaction ID : D698041 Amount of Each Disbursement this Period 1000.00
City UTICA	State NY	Zip Code 13503
Purpose of Disbursement political contribution		011 Category/ Type
Candidate Name BRINDISI, ANTHONY, , ,		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NY	District: 22	

Full Name (Last, First, Middle Initial) B. BRINDISI FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 11 / 2019
Mailing Address PO BOX 165		FEC Identification Number C 000648725 Transaction ID : D698848 Amount of Each Disbursement this Period 1000.00
City UTICA	State NY	Zip Code 13503
Purpose of Disbursement political contribution		011 Category/ Type
Candidate Name BRINDISI, ANTHONY, , ,		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NY	District: 22	

Full Name (Last, First, Middle Initial) C. CASE FOR CONGRESS		Date of Disbursement MM / DD / YYYY 03 / 12 / 2019
Mailing Address 1253 S. BERETANIA ST., #8888		FEC Identification Number C 000680918 Transaction ID : D698040 Amount of Each Disbursement this Period 1000.00
City HONOLULU	State HI	Zip Code 96814
Purpose of Disbursement political contribution		011 Category/ Type
Candidate Name CASE, EDWARD, , ,		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: HI	District: 01	

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

3000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Three Rivers Political Action Committee

Full Name (Last, First, Middle Initial)

A. CASE FOR CONGRESS

Mailing Address 1253 S. BERETANIA ST., #8888

City HONOLULU State HI Zip Code 96814

Purpose of Disbursement political contribution

011
Category/
Type

Candidate Name
CASE, EDWARD, , ,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: HI District: 01

Date of Disbursement

MM / DD / YYYY
06 / 11 / 2019

FEC Identification Number

C C00680918

Transaction ID : D698856

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. FRIENDS OF BEN MCADAMS

Mailing Address 2205 S 1000 E

City SALT LAKE CITY State UT Zip Code 84106

Purpose of Disbursement political contribution

011
Category/
Type

Candidate Name
MCADAMS, BEN, , ,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: UT District: 04

Date of Disbursement

MM / DD / YYYY
03 / 12 / 2019

FEC Identification Number

C C00658633

Transaction ID : D698043

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. FRIENDS OF BEN MCADAMS

Mailing Address 2205 S 1000 E

City SALT LAKE CITY State UT Zip Code 84106

Purpose of Disbursement political contribution

011
Category/
Type

Candidate Name
MCADAMS, BEN, , ,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: UT District: 04

Date of Disbursement

MM / DD / YYYY
06 / 11 / 2019

FEC Identification Number

C C00658633

Transaction ID : D698850

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

3000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Three Rivers Political Action Committee

A. KENDRA HORN FOR CONGRESS

Full Name (Last, First, Middle Initial)
KENDRA HORN FOR CONGRESS

Date of Disbursement: MM / DD / YYYY
06 / 11 / 2019

Mailing Address: PO BOX 54375

City: OKLAHOMA CITY | State: OK | Zip Code: 73154

Purpose of Disbursement: political contribution | Category/Type: 011

Candidate Name: HORN, KENDRA, , ,

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

State: OK | District: 05

FEC Identification Number: C00648915
Transaction ID: D698849
Amount of Each Disbursement this Period: 1000.00

Memo Item

B. KENDRA HORN FOR CONGRESS

Full Name (Last, First, Middle Initial)
KENDRA HORN FOR CONGRESS

Date of Disbursement: MM / DD / YYYY
03 / 12 / 2019

Mailing Address: PO BOX 54375

City: OKLAHOMA CITY | State: OK | Zip Code: 73154

Purpose of Disbursement: political contribution | Category/Type: 011

Candidate Name: HORN, KENDRA, , ,

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

State: OK | District: 05

FEC Identification Number: C00648915
Transaction ID: D698042
Amount of Each Disbursement this Period: 1000.00

Memo Item

C. MAX ROSE FOR CONGRESS

Full Name (Last, First, Middle Initial)
MAX ROSE FOR CONGRESS

Date of Disbursement: MM / DD / YYYY
03 / 12 / 2019

Mailing Address: PO BOX 100496

City: STATEN ISLAND | State: NY | Zip Code: 10310

Purpose of Disbursement: political contribution | Category/Type: 011

Candidate Name: ROSE, MAX, , ,

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

State: NY | District: 11

FEC Identification Number: C00652248
Transaction ID: D698048
Amount of Each Disbursement this Period: 1000.00

Memo Item

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

3000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Three Rivers Political Action Committee

Full Name (Last, First, Middle Initial) A. MAX ROSE FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 11 / 2019
Mailing Address PO BOX 100496		FEC Identification Number C C00652248 Transaction ID : D698855
City STATEN ISLAND	State NY	Zip Code 10310
Purpose of Disbursement political contribution		011 Category/ Type
Candidate Name ROSE, MAX, , ,		Amount of Each Disbursement this Period 1000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: NY	District: 11	

Full Name (Last, First, Middle Initial) B. MIKIE SHERRILL FOR CONGRESS		Date of Disbursement MM / DD / YYYY 03 / 12 / 2019
Mailing Address P.O. BOX 43032		FEC Identification Number C C00640003 Transaction ID : D698044
City MONTCLAIR	State NJ	Zip Code 07043
Purpose of Disbursement political contribution		011 Category/ Type
Candidate Name SHERRILL, REBECCA MICHELLE, , ,		Amount of Each Disbursement this Period 1000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: NJ	District: 11	

Full Name (Last, First, Middle Initial) C. MIKIE SHERRILL FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 11 / 2019
Mailing Address P.O. BOX 43032		FEC Identification Number C C00640003 Transaction ID : D698851
City MONTCLAIR	State NJ	Zip Code 07043
Purpose of Disbursement political contribution		011 Category/ Type
Candidate Name SHERRILL, REBECCA MICHELLE, , ,		Amount of Each Disbursement this Period 1000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: NJ	District: 11	

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

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

3000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Three Rivers Political Action Committee

A. SPANBERGER FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 3121

M M M	/	D D D	/	Y Y Y Y Y
06		11		2019

City GLEN ALLEN State VA Zip Code 23058

FEC Identification Number

Purpose of Disbursement political contribution

011
Category/ Type

C	C00649913
---	-----------

Transaction ID : D698852

Amount of Each Disbursement this Period

1000.00

Candidate Name

SPANBERGER, ABIGAIL, , ,

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

Memo Item

State: VA District: 07

B. SPANBERGER FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 3121

M M M	/	D D D	/	Y Y Y Y Y
03		12		2019

City GLEN ALLEN State VA Zip Code 23058

FEC Identification Number

Purpose of Disbursement political contribution

011
Category/ Type

C	C00649913
---	-----------

Transaction ID : D698045

Amount of Each Disbursement this Period

1000.00

Candidate Name

SPANBERGER, ABIGAIL, , ,

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

Memo Item

State: VA District: 07

C. VAN DREW FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 671

M M M	/	D D D	/	Y Y Y Y Y
06		11		2019

City CAPE MAY COURT HOU State NJ Zip Code 08210

FEC Identification Number

Purpose of Disbursement political contribution

011
Category/ Type

C	C00661868
---	-----------

Transaction ID : D698854

Amount of Each Disbursement this Period

1000.00

Candidate Name

VAN DREW, JEFF, , ,

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

Memo Item

State: NJ District: 02

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

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

3000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Three Rivers Political Action Committee

Full Name (Last, First, Middle Initial) A. VAN DREW FOR CONGRESS		Date of Disbursement MM / DD / YYYY 03 / 12 / 2019
Mailing Address PO BOX 671		FEC Identification Number C00661868 Transaction ID : D698047
City CAPE MAY COURT HOU	State NJ	Zip Code 08210
Purpose of Disbursement political contribution	Category/ Type 011	Amount of Each Disbursement this Period 1000.00
Candidate Name VAN DREW, JEFF, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/>
Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: NJ District: 02	

Full Name (Last, First, Middle Initial) B. XOCHITL FOR NEW MEXICO		Date of Disbursement MM / DD / YYYY 03 / 12 / 2019
Mailing Address PO BOX 2250		FEC Identification Number C00666149 Transaction ID : D698046
City LAS CRUCES	State NM	Zip Code 88004
Purpose of Disbursement political contribution	Category/ Type 011	Amount of Each Disbursement this Period 1000.00
Candidate Name TORRES SMALL, XOCHITL, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/>
Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: NM District: 02	

Full Name (Last, First, Middle Initial) C. XOCHITL FOR NEW MEXICO		Date of Disbursement MM / DD / YYYY 06 / 11 / 2019
Mailing Address PO BOX 2250		FEC Identification Number C00666149 Transaction ID : D698853
City LAS CRUCES	State NM	Zip Code 88004
Purpose of Disbursement political contribution	Category/ Type 011	Amount of Each Disbursement this Period 1000.00
Candidate Name TORRES SMALL, XOCHITL, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/>
Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: NM District: 02	

SUBTOTAL of Disbursements This Page (optional).....▶	3000.00
TOTAL This Period (last page this line number only).....▶	18000.00