

# 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

E-PAC

ADDRESS (number and street) PO BOX 500

Check if different than previously reported. (ACC) GLEN FALLS NY 12801

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

C C00570945

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

### 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

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

- (c) 12-Day PRE-Election Report for the:
- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) |                                       |

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

- (d) 30-Day POST-Election Report for the:
- |  |                                       |  |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

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

5. Covering Period M M / D D / Y Y Y Y Y Y 08 / 01 / 2022 through M M / D D / Y Y Y Y Y Y 08 / 31 / 2022

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

HOBBS, CABELL, , ,

Type or Print Name of Treasurer

Signature of Treasurer HOBBS, CABELL, , , [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 09 / 20 / 2022

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

Office Use Only									
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**E-PAC**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2022"/>		381350.74
(b) Cash on Hand at Beginning of Reporting Period.....	137717.20	
(c) Total Receipts (from Line 19) .....	25381.53	313609.80
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	163098.73	694960.54
7. Total Disbursements (from Line 31).....	20479.34	552341.15
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	142619.39	142619.39
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> 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

**E-PAC**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1544.78	51334.34
(ii) Unitemized .....	1886.75	16122.05
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	3431.53	67456.39
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	16950.00	146033.28
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	20381.53	213489.67
12. Transfers From Affiliated/Other Party Committees.....	0.00	85120.13
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.....	5000.00	15000.00
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)).....▶	25381.53	313609.80
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	25381.53	313609.80

**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 .....	10479.34	167091.15
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	10479.34	167091.15
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10000.00	385000.00
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	250.00
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)) ..	20479.34	552341.15
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	20479.34	552341.15

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	20381.53	213489.67
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	20381.53	213489.67
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	10479.34	167091.15
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	10479.34	167091.15

**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 22
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**E-PAC**

**A. WINRED**

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219-1891
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FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
58483.47

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		02		2022

**Transaction ID : SA11C.631112**

Amount of Each Receipt this Period  
525.13

Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**B. GULLIVER, KAREN, , ,**

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

Mailing Address PO BOX 701

City BLACK DIAMOND	State WA	Zip Code 98010-0701
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		02		2022

**Transaction ID : SA11A.631144**

Amount of Each Receipt this Period  
50.00

Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**C. MUELLER, JOSEPH, , ,**

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

Mailing Address 42 NASSAU ROAD

City POUGHKEEPSIE	State NY	Zip Code 12601-5640
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
328.24

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		02		2022

**Transaction ID : SA11A.631125**

Amount of Each Receipt this Period  
5.00

Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

<b>SUBTOTAL</b> of Receipts This Page (optional).....	55.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 22
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**E-PAC**

**A. WINRED**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219-1891
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FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
58483.47

Date of Receipt  
08 / 09 / 2022  
**Transaction ID : SA11C.633825**

Amount of Each Receipt this Period  
634.15

Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**B. MANIACI, ARTHUR, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 280 NEW SCOTLAND AVENUE

City ALBANY	State NY	Zip Code 12208-3117
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
08 / 09 / 2022  
**Transaction ID : SA11A.633859**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**C. MUELLER, JOSEPH, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 42 NASSAU ROAD

City POUGHKEEPSIE	State NY	Zip Code 12601-5640
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
328.24

Date of Receipt  
08 / 09 / 2022  
**Transaction ID : SA11A.633853**

Amount of Each Receipt this Period  
25.00

Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

<b>SUBTOTAL</b> of Receipts This Page (optional).....	275.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 8 OF 22  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**E-PAC**

**A. WINRED**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 9891  
 City ARLINGTON State VA Zip Code 22219-1891  
 FEC ID number of contributing federal political committee. **C** C00694323  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 58483.47

Date of Receipt 08 / 16 / 2022  
**Transaction ID : SA11C.637047**  
 Amount of Each Receipt this Period 1534.37  
 Memo Item CONTRIBUTION  
 SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**B. LUBARD, STEPEHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4812 DON JUAN PLACE  
 City WOODLAND HILLS State CA Zip Code 91364-4704  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 S-L TECH ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 08 / 16 / 2022  
**Transaction ID : SA11A.637081**  
 Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION  
 EARMARKED FROM WINRED

**C. MUELLER, JOSEPH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 42 NASSAU ROAD  
 City POUGHKEEPSIE State NY Zip Code 12601-5640  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 RETIRED RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 328.24

Date of Receipt 08 / 16 / 2022  
**Transaction ID : SA11A.637070**  
 Amount of Each Receipt this Period 12.50  
 Memo Item CONTRIBUTION  
 EARMARKED FROM WINRED

**SUBTOTAL** of Receipts This Page (optional).....▶ 112.50  
**TOTAL** This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 22
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**E-PAC**

**A. SEWARD, WALTER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1919 WILLOWGREEN DRIVE  
 City BEAVERCREEK State OH Zip Code 45432-4014  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 16 / 2022  
**Transaction ID : SA11A.637082**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item CONTRIBUTION  
 EARMARKED FROM WINRED

**B. WINRED**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 9891  
 City ARLINGTON State VA Zip Code 22219-1891  
 FEC ID number of contributing federal political committee. **C** C00694323  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 58483.47

Date of Receipt 08 / 23 / 2022  
**Transaction ID : SA11C.639435**  
 Amount of Each Receipt this Period 495.50  
 Memo Item CONTRIBUTION  
 SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**C. HYMAN, DIANE, U., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 93  
 City DIAMOND POINT State NY Zip Code 12824-0093  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 23 / 2022  
**Transaction ID : SA11A.639461**  
 Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION  
 EARMARKED FROM WINRED

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1050.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 22
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**E-PAC**

**A. WINRED**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219-1891
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FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
58483.47

Date of Receipt  
08 / 30 / 2022  
**Transaction ID : SA11C.641972**

Amount of Each Receipt this Period  
462.37

Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**B. GULLIVER, KAREN, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO BOX 701

City BLACK DIAMOND	State WA	Zip Code 98010-0701
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
08 / 30 / 2022  
**Transaction ID : SA11A.642003**

Amount of Each Receipt this Period  
50.00

Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**C. MUELLER, JOSEPH, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 42 NASSAU ROAD

City POUGHKEEPSIE	State NY	Zip Code 12601-5640
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
328.24

Date of Receipt  
08 / 30 / 2022  
**Transaction ID : SA11A.641977**

Amount of Each Receipt this Period  
2.28

Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

<b>SUBTOTAL</b> of Receipts This Page (optional).....	52.28
<b>TOTAL</b> This Period (last page this line number only).....	1544.78

**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 11 OF 22
<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)  
**E-PAC**

**A. COUNCIL OF INSURANCE AGENTS & BROKERS PAC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 701 PENNSYLVANIA AVENUE NORTHWEST  
 SUITE 750  
 City WASHINGTON State DC Zip Code 20004-2661  
 FEC ID number of contributing federal political committee. **C** C00039578  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 08 / 03 / 2022  
**Transaction ID : SA11C.631235**  
 Amount of Each Receipt this Period 2000.00  
 Memo Item  
**CONTRIBUTION**

**B. THE HOME DEPOT INC. PAC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1155 F STREET, NORTHWEST  
 SUITE 400  
 City WASHINGTON State DC Zip Code 20004-1346  
 FEC ID number of contributing federal political committee. **C** C00284885  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 03 / 2022  
**Transaction ID : SA11C.631234**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
**CONTRIBUTION**

**C. NATIONAL ASSOCIATION OF WHOLESALER-DISTRIBUTORS PAC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1325 G STREET NORTHWEST  
 STE 1000  
 City WASHINGTON State DC Zip Code 20005-3134  
 FEC ID number of contributing federal political committee. **C** C00109306  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 08 / 16 / 2022  
**Transaction ID : SA11C.637045**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 9500.00  
**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: PAGE 12 OF 22  
(check only one)

<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)  
**E-PAC**

**A. NATIONAL RIFLE ASSOCIATION OF AMERICA POLITICAL VICTORY FUND**

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

Mailing Address 11250 WAPLES MILL ROAD

City FAIRFAX	State VA	Zip Code 22030-7550
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00053553

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4950.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
08		16		2022

**Transaction ID : SA11C.637046**

Amount of Each Receipt this Period  
4950.00

Memo Item  
CONTRIBUTION

**B. GENERAL MOTORS COMPANY PAC**

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

Mailing Address 25 MASSACHUSETTS AVENUE, NORTHWEST  
SUITE 400

City WASHINGTON	State DC	Zip Code 20001-1427
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00076810

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
08		26		2022

**Transaction ID : SA11C.640042**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**C.**

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	7450.00
<b>TOTAL</b> This Period (last page this line number only).....▶	16950.00

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

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

FOR LINE NUMBER: PAGE 13 OF 22  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**E-PAC**

**A. LAWSON FOR CONGRESS**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 1153  
 City HAYMARKET State VA Zip Code 20168  
 FEC ID number of contributing federal political committee. **C** C00784629  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 26 / 2022  
**Transaction ID : SA16.456**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item  
**REFUND OF CONTRIBUTION**

**B.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period  
 Memo Item

**C.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  
 Primary  General  
 Other (specify)  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period  
 Memo Item

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

**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)  
**E-PAC**

Full Name (Last, First, Middle Initial) <b>A. SUNOCO LP HQ</b>		Date of Disbursement MM / DD / YYYY 08 / 01 / 2022
Mailing Address 8111 WESTCHESTER DRIVE		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.3470</b> Amount of Each Disbursement this Period [REDACTED] 33.12
City DALLAS	State TX	Zip Code 75225
Purpose of Disbursement TRAVEL		Category/ Type [REDACTED]
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>B. TRUIST</b>		Date of Disbursement MM / DD / YYYY 08 / 01 / 2022
Mailing Address 2200 WILSON BLVD SUITE 100		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.3456</b> Amount of Each Disbursement this Period [REDACTED] 35.00
City ARLINGTON	State VA	Zip Code 22201
Purpose of Disbursement BANK FEES		Category/ Type [REDACTED]
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>C. ZOOM</b>		Date of Disbursement MM / DD / YYYY 08 / 01 / 2022
Mailing Address 55 ALMADEN BLVD SUITE 600		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.3475</b> Amount of Each Disbursement this Period [REDACTED] 15.74
City SAN JOSE	State CA	Zip Code 95113
Purpose of Disbursement WEB SERVICE		Category/ Type [REDACTED]
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	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 83.86
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

**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)  
**E-PAC**

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

Mailing Address 1600 AMPHITHEATRE PARKWAY

City MOUNTAIN VIEW State CA Zip Code 94043

Purpose of Disbursement WEB SERVICE

Candidate Name

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

State: District:

Date of Disbursement: 08 / 02 / 2022

FEC Identification Number: C

Transaction ID : SB21B.3476

Amount of Each Disbursement this Period: 23.99

Memo Item

Full Name (Last, First, Middle Initial)  
**B. WINRED TECHNICAL SERVICES LLC**

Mailing Address 1776 WILSON BLVD #530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement CREDIT CARD MERCHANT FEE

Candidate Name

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

State: District:

Date of Disbursement: 08 / 02 / 2022

FEC Identification Number: C

Transaction ID : SB21B.3459

Amount of Each Disbursement this Period: 174.27

Memo Item

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

Mailing Address 79 POTOMAC AVE SE #606

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement DIGITAL/POLITICAL STRATEGY CONSULTING

Candidate Name

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

State: District:

Date of Disbursement: 08 / 05 / 2022

FEC Identification Number: C

Transaction ID : SB21B.3465

Amount of Each Disbursement this Period: 500.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 698.26

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**E-PAC**

Full Name (Last, First, Middle Initial) <b>A. RENNA, RAYCHEL, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 05 / 2022	
Mailing Address 333 8TH STREET SE APT 410		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.3468</b> Amount of Each Disbursement this Period [REDACTED] 1750.00	
City WASHINGTON	State DC	Zip Code 20003	Category/ Type [REDACTED]
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. RENNA, RAYCHEL, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 05 / 2022	
Mailing Address 333 8TH STREET SE APT 410		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.3471</b> Amount of Each Disbursement this Period [REDACTED] 28.18	
City WASHINGTON	State DC	Zip Code 20003	Category/ Type [REDACTED]
Purpose of Disbursement TRAVEL		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. EXXON</b>		Date of Disbursement MM / DD / YYYY 08 / 08 / 2022	
Mailing Address 5959 LAS COLINAS BLVD		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.3472</b> Amount of Each Disbursement this Period [REDACTED] 79.77	
City IRVING	State TX	Zip Code 75039	Category/ Type [REDACTED]
Purpose of Disbursement TRAVEL		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 1857.95
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

**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)  
**E-PAC**

**A. AVIS CAR RENTAL**

Full Name (Last, First, Middle Initial)

Mailing Address 6 SYLVAN WAY

City PARSIPPANY State NJ Zip Code 07054

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 09 / 2022

FEC Identification Number: C

Transaction ID : SB21B.3473

Amount of Each Disbursement this Period: 413.82

Memo Item

**B. CMDI**

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL ROAD STE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement DATABASE MANAGEMENT SVC

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 09 / 2022

FEC Identification Number: C

Transaction ID : SB21B.3464

Amount of Each Disbursement this Period: 500.00

Memo Item

**C. WINRED TECHNICAL SERVICES LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 1776 WILSON BLVD #530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 09 / 2022

FEC Identification Number: C

Transaction ID : SB21B.3460

Amount of Each Disbursement this Period: 138.78

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1052.60

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**E-PAC**

**A. MASON STRATEGIES**

Full Name (Last, First, Middle Initial)

Mailing Address 219 E HOWELL AVENUE

City ALEXANDRIA State VA Zip Code 22301

Purpose of Disbursement FINANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 10 / 2022

FEC Identification Number: C

Transaction ID : SB21B.3466

Amount of Each Disbursement this Period: 3500.00

Memo Item

**B. HAMPTON INN & SUITES**

Full Name (Last, First, Middle Initial)

Mailing Address 25 LAKE AVE

City SARATOGA SPRINGS State NY Zip Code 12866

Purpose of Disbursement TRAVEL/FOOD/BEVERAGES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 11 / 2022

FEC Identification Number: C

Transaction ID : SB21B.3474

Amount of Each Disbursement this Period: 1605.33

Memo Item

**C. CAPITOL HILL CLUB**

Full Name (Last, First, Middle Initial)

Mailing Address 300 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement FOOD/BEVERAGES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 15 / 2022

FEC Identification Number: C

Transaction ID : SB21B.3467

Amount of Each Disbursement this Period: 91.03

Memo Item

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

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

5196.36

**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)  
**E-PAC**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 16 / 2022
Mailing Address 1776 WILSON BLVD #530		FEC Identification Number C [ ] <b>Transaction ID : SB21B.3461</b> Amount of Each Disbursement this Period [ ] 223.63
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement CREDIT CARD MERCHANT FEE		Category/ Type [ ]
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>B. COMPLIANCE CONSULTING CO OF VIRGINIA LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 18 / 2022
Mailing Address PO BOX 365		FEC Identification Number C [ ] <b>Transaction ID : SB21B.3458</b> Amount of Each Disbursement this Period [ ] 1000.00
City MCLEAN	State VA	Zip Code 22101
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type [ ]
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>C. TRUIST</b>		Date of Disbursement MM / DD / YYYY 08 / 22 / 2022
Mailing Address 2200 WILSON BLVD SUITE 100		FEC Identification Number C [ ] <b>Transaction ID : SB21B.3457</b> Amount of Each Disbursement this Period [ ] 15.00
City ARLINGTON	State VA	Zip Code 22201
Purpose of Disbursement BANK FEES		Category/ Type [ ]
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	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 1238.63
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**E-PAC**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 23 / 2022	
Mailing Address 1776 WILSON BLVD #530		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.3462</b> Amount of Each Disbursement this Period [REDACTED] 25.91	
City ARLINGTON	State VA	Zip Code 22209	Category/ Type [REDACTED]
Purpose of Disbursement CREDIT CARD MERCHANT FEE		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. INTUIT</b>		Date of Disbursement MM / DD / YYYY 08 / 26 / 2022	
Mailing Address 2700 COAST AVE		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.3469</b> Amount of Each Disbursement this Period [REDACTED] 55.00	
City MOUNTAIN VIEW	State CA	Zip Code 94043	Category/ Type [REDACTED]
Purpose of Disbursement SUBSCRIPTIONS		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 30 / 2022	
Mailing Address 1776 WILSON BLVD #530		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.3463</b> Amount of Each Disbursement this Period [REDACTED] 255.03	
City ARLINGTON	State VA	Zip Code 22209	Category/ Type [REDACTED]
Purpose of Disbursement CREDIT CARD MERCHANT FEE		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 335.94
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

# 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)  
**E-PAC**

Full Name (Last, First, Middle Initial) <b>A. ZOOM</b>		Date of Disbursement MM / DD / YYYY 08 / 31 / 2022
Mailing Address 55 ALMADEN BLVD SUITE 600		FEC Identification Number C <b>Transaction ID : SB21B.3477</b> Amount of Each Disbursement this Period 15.74
City SAN JOSE	State CA	
Purpose of Disbursement WEB SERVICE	Zip Code 95113	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional)..... ▶	15.74
<b>TOTAL</b> This Period (last page this line number only)..... ▶	10479.34

**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

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)  
**E-PAC**

**A. VICKY HARTZLER FOR SENATE**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 531

M M M	/	D D D	/	Y Y Y Y Y
08		23		2022

City HARRISONVILLE State MO Zip Code 64701

FEC Identification Number

Purpose of Disbursement  
CONTRIBUTION PRIMARY DEBT RETIREMENT

**C** C00464602

Candidate Name  
**HARTZLER, VICKY, , ,**

Category/  
Type

**Transaction ID : SB23.3479**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify) ▼  
State: MO District: 00

5000.00

Memo Item

**B. LAUREL LEE FOR CONGRESS INC**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 2743

M M M	/	D D D	/	Y Y Y Y Y
08		26		2022

City BRANDON State FL Zip Code 33509

FEC Identification Number

Purpose of Disbursement  
CONTRIBUTION

**C** C00815373

Candidate Name  
**LEE, LAUREL, , ,**

Category/  
Type

**Transaction ID : SB23.3478**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify) ▼  
State: FL District: 15

5000.00

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

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

City State Zip Code

FEC Identification Number

Purpose of Disbursement

**C**

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

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

Memo Item

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

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

10000.00

10000.00