

# 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**  
**WOLF PACK**

ADDRESS (number and street) 1800 Massachusetts Avenue, NW  
Suite 300  
 Check if different than previously reported. (ACC)  
WASHINGTON DC 20036

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C** C00599092 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 11/03/2020 in the State of DC

5. Covering Period MM/DD/YYYY through MM/DD/YYYY  
10/15/2020 through 11/23/2020

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Alexander, James D., , ,  
Type or Print Name of Treasurer

Signature of Treasurer Alexander, James D., , , [Electronically Filed] Date 12/01/2020

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**WOLF PACK**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>		124704.19
(b) Cash on Hand at Beginning of Reporting Period.....	126676.47	
(c) Total Receipts (from Line 19) .....	17500.00	43505.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	144176.47	168209.19
7. Total Disbursements (from Line 31).....	20000.00	44032.72
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	124176.47	124176.47
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

**WOLF PACK**

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	5.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	5.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	17500.00	43500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	17500.00	43505.00
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	43505.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	17500.00	43505.00

**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 .....	0.00	8032.72
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	8032.72
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	20000.00	36000.00
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)) ..	20000.00	44032.72
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	20000.00	44032.72

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<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) .....	17500.00	43505.00
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	43505.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	8032.72
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	8032.72

**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 13
<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)  
**WOLF PACK**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE (ASA PAC)

Mailing Address 1061 AMERICAN LANE

City SCHAUMBURG	State IL	Zip Code 60173
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00255752

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
10	/	27	/	2020

**Transaction ID : SA11C.4414**

Amount of Each Receipt this Period  
5000.00

Memo Item Contribution

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
BUILD POLITICAL ACTION COMMITTEE OF THE NATIONAL ASSOCIATION OF HOME BUILDERS (BUILD PAC)

Mailing Address 1201 15TH STREET, NW

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00000901

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
11	/	04	/	2020

**Transaction ID : SA11C.4463**

Amount of Each Receipt this Period  
5000.00

Memo Item Contribution

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
MORTGAGE BANKERS ASSOCIATION POLITICAL ACTION COMMITTEE (MOR PAC)

Mailing Address 1919 M STREET, NW  
5TH FLOOR

City WASHINGTON	State DC	Zip Code 20036
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00004812

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 M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2020

**Transaction ID : SA11C.4416**

Amount of Each Receipt this Period  
2500.00

Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	12500.00
<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 13
<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)  
**WOLF PACK**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
NATIONAL ASSOCIATION OF REAL ESTATE INVESTMENT TRUSTS, INC. POLITICAL ACTION COMMITTEE

Mailing Address 1875 I STREET, NW  
SUITE 600

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00303339

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 27 / 2020

Transaction ID : SA11C.4415

Amount of Each Receipt this Period  
5000.00

Memo Item 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).....	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 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)  
**WOLF PACK**

**A. CASTEN FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 132

City DOWNERS GROVE State IL Zip Code 60515

Purpose of Disbursement Contribution  
Category/Type **011**

Candidate Name  
**CASTEN, SEAN, , ,**

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

State: IL District: 06

Date of Disbursement: 10 / 27 / 2020

FEC Identification Number: **C00648493**  
Transaction ID : **SB23.4421**  
Amount of Each Disbursement this Period: 1000.00

Memo Item

**B. CINDY AXNE FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 65551

City WEST DES MOINES State IA Zip Code 50265

Purpose of Disbursement Contribution  
Category/Type **011**

Candidate Name  
**AXNE, CINDY, , ,**

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

State: IA District: 03

Date of Disbursement: 10 / 27 / 2020

FEC Identification Number: **C00646844**  
Transaction ID : **SB23.4420**  
Amount of Each Disbursement this Period: 1000.00

Memo Item

**C. CITIZENS FOR WATERS**

Full Name (Last, First, Middle Initial)  
Mailing Address 249 E. OCEAN BLVD. STE. 685

City LONG BEACH State CA Zip Code 90802

Purpose of Disbursement Contribution  
Category/Type **011**

Candidate Name  
**WATERS, MAXINE, , ,**

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

State: CA District: 43

Date of Disbursement: 10 / 20 / 2020

FEC Identification Number: **C00167585**  
Transaction ID : **SB23.4460**  
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)  
**WOLF PACK**

**A. COLIN ALLRED FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 601631

City DALLAS State TX Zip Code 75360

Purpose of Disbursement Contribution

011  
Category/Type

Candidate Name ALLRED, COLIN, , ,

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: TX District: 32

Date of Disbursement  
MM / DD / YYYY  
10 / 27 / 2020

FEC Identification Number  
C00637868  
Transaction ID : SB23.4417  
Amount of Each Disbursement this Period  
1000.00

Memo Item

**B. CONOR LAMB FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 10381

City PITTSBURGH State PA Zip Code 15234

Purpose of Disbursement Contribution

011  
Category/Type

Candidate Name LAMB, CONOR, , ,

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: PA District: 17

Date of Disbursement  
MM / DD / YYYY  
10 / 27 / 2020

FEC Identification Number  
C00657411  
Transaction ID : SB23.4436  
Amount of Each Disbursement this Period  
1000.00

Memo Item

**C. DEFAZIO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1316

City SPRINGFIELD State OR Zip Code 97477

Purpose of Disbursement Contribution

011  
Category/Type

Candidate Name DEFAZIO, PETER A, , ,

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

Date of Disbursement  
MM / DD / YYYY  
10 / 27 / 2020

FEC Identification Number  
C00215905  
Transaction ID : SB23.4427  
Amount of Each Disbursement this Period  
2000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 4000.00

**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)  
**WOLF PACK**

**A. DR. CAMERON WEBB FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 679

M M M	/	D D D	/	Y Y Y Y Y
10		27		2020

City CHARLOTTEVILLE State VA Zip Code 22902

FEC Identification Number

Purpose of Disbursement Contribution

011
Category/ Type

C C00714964

Transaction ID : SB23.4454

Amount of Each Disbursement this Period

Candidate Name WEBB, BRYANT CAMERON DR., , ,

1000.00
---------

Office Sought:  House  Senate  President  
 Disbursement For: 2020  Primary  General  Other (specify) ▼  
 State: VA District: 05

Memo Item

**B. FRIENDS OF BEN MCADAMS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address P O BOX 522167

M M M	/	D D D	/	Y Y Y Y Y
10		27		2020

City SLC State UT Zip Code 84152

FEC Identification Number

Purpose of Disbursement Contribution

011
Category/ Type

C C00658633

Transaction ID : SB23.4439

Amount of Each Disbursement this Period

Candidate Name MCADAMS, BEN, , ,

1000.00
---------

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

Memo Item

**C. FRIENDS OF DESIREE TIMS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 17034  
4323 W. 3RD STREET

M M M	/	D D D	/	Y Y Y Y Y
10		27		2020

City DAYTON State OH Zip Code 45417

FEC Identification Number

Purpose of Disbursement Contribution

011
Category/ Type

C C00713743

Transaction ID : SB23.4451

Amount of Each Disbursement this Period

Candidate Name TIMS, DESIREE, , ,

1000.00
---------

Office Sought:  House  Senate  President  
 Disbursement For: 2020  Primary  General  Other (specify) ▼  
 State: OH District: 10

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)  
**WOLF PACK**

**A. FRIENDS OF JAHANA HAYES**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1487

City  
WATERBURY

State  
CT

Zip Code  
06721

Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

**HAYES, JAHANA, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼

State: CT District: 05

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			27			20			

FEC Identification Number

C C00677898

**Transaction ID : SB23.4433**

Amount of Each Disbursement this Period

1000.00
---------

Memo Item

**B. FRIENDS OF LUCY MCBATH**

Full Name (Last, First, Middle Initial)

Mailing Address 885 WOODSTOCK RD  
SUITE 430-528

City  
ROSWELL

State  
GA

Zip Code  
30075

Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

**MCBATH, LUCIA KAY, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼

State: GA District: 06

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			27			20			

FEC Identification Number

C C00672295

**Transaction ID : SB23.4442**

Amount of Each Disbursement this Period

1000.00
---------

Memo Item

**C. LAUREN UNDERWOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address 13400 S ROUTE 59  
STE 116 BOX 248

City  
PLAINFIELD

State  
IL

Zip Code  
60585

Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

**UNDERWOOD, LAUREN, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼

State: IL District: 14

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			27			20			

FEC Identification Number

C C00652719

**Transaction ID : SB23.4457**

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)  
**WOLF PACK**

Full Name (Last, First, Middle Initial)  
**A. MICHELLE FOR KANSAS**

Date of Disbursement:  /  /

Mailing Address: PO BOX 67101

City: TOPEKA State: KS Zip Code: 66667

Purpose of Disbursement: Contribution  
Category/Type:

Candidate Name: DE LA ISLA, MICHELLE, , ,

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

State: KS District: 02

FEC Identification Number:   
Transaction ID : **SB23.4430**  
Amount of Each Disbursement this Period:   
 Memo Item

Full Name (Last, First, Middle Initial)  
**B. PETERSON FOR CONGRESS**

Date of Disbursement:  /  /

Mailing Address: 26192 FLOYD LAKE POINT ROAD

City: DETROIT LAKES State: MN Zip Code: 56501

Purpose of Disbursement: Contribution  
Category/Type:

Candidate Name: PETERSON, COLLIN CLARK, , ,

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

State: MN District: 07

FEC Identification Number:   
Transaction ID : **SB23.4445**  
Amount of Each Disbursement this Period:   
 Memo Item

Full Name (Last, First, Middle Initial)  
**C. SCHOLTEN FOR CONGRESS**

Date of Disbursement:  /  /

Mailing Address: P.O. BOX 6233

City: GRAND RAPIDS State: MI Zip Code: 49510

Purpose of Disbursement: Contribution  
Category/Type:

Candidate Name: SCHOLTEN, HILLARY, , ,

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

State: MI District: 03

FEC Identification Number:   
Transaction ID : **SB23.4448**  
Amount of Each Disbursement this Period:   
 Memo Item

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

**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)  
**WOLF PACK**

Full Name (Last, First, Middle Initial)

**A. SHARICE FOR CONGRESS**

Mailing Address 13851 W. 63RD ST.  
NUM 303

City SHAWNEE State KS Zip Code 66216

Purpose of Disbursement  
Contribution

Category/  
Type

Candidate Name  
**DAVIDS, SHARICE, , ,**

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

Date of Disbursement  
M M / D D / Y Y Y Y Y Y  
10 / 27 / 2020

FEC Identification Number  
**C** C00670034  
**Transaction ID : SB23.4424**  
Amount of Each Disbursement this Period  
2000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

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

Date of Disbursement  
M M / D D / Y Y Y Y Y Y

FEC Identification Number  
**C**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

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

Date of Disbursement  
M M / D D / Y Y Y Y Y Y

FEC Identification Number  
**C**  
Amount of Each Disbursement this Period

Memo Item

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

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

2000.00  
20000.00