

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 MA 4 Dems PAC

ADDRESS (number and street) PO Box 600698 Newtonville MA 02460

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C C00786392

3. IS THIS REPORT NEW OR AMENDED

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) [checked] May 20 (M5) Aug 20 (M8) Nov 20 (M11)
Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12)
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 M M / D D / Y Y Y Y Y Y in the State of

(d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S)
Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period 01 / 01 / 2022 through 01 / 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.

Murray, Allison, , ,

Type or Print Name of Treasurer

Signature of Treasurer Murray, Allison, , , [Electronically Filed] Date 02 / 18 / 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.

Table with 7 columns and 1 row for Office Use Only.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**MA 4 Dems 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"/>		43524.89
(b) Cash on Hand at Beginning of Reporting Period.....	43524.89	
(c) Total Receipts (from Line 19) .....	17.00	17.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	43541.89	43541.89
7. Total Disbursements (from Line 31).....	4244.61	4244.61
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	39297.28	39297.28
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

MA 4 Dems PAC

Report Covering the Period: From: 01 / 01 / 2022 To: 01 / 31 / 2022

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 .....	17.00	17.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	17.00	17.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	17.00	17.00
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)).....▶	17.00	17.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	17.00	17.00

**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 .....	2244.61	2244.61
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	2244.61	2244.61
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2000.00	2000.00
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)) ..	4244.61	4244.61
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4244.61	4244.61

**DETAILED SUMMARY PAGE**  
of Disbursements

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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) .....	17.00	17.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	17.00	17.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	2244.61	2244.61
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	2244.61	2244.61

**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

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)  
**MA 4 Dems PAC**

Full Name (Last, First, Middle Initial) <b>A. American Express</b>		Date of Disbursement MM / DD / YYYY 01 / 21 / 2022
Mailing Address PO Box 1270		FEC Identification Number C [REDACTED] <b>Transaction ID : 500603057</b> Amount of Each Disbursement this Period [REDACTED] 669.55
City Newark	State NJ	Zip Code 07101-1270
Purpose of Disbursement Credit Card Payment, See Below		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. Centrolina</b>		Date of Disbursement MM / DD / YYYY 01 / 21 / 2022
Mailing Address 974 Palmer Aly NW		FEC Identification Number C [REDACTED] <b>Transaction ID : 500603082</b> Amount of Each Disbursement this Period [REDACTED] 669.55
City Washington	State DC	Zip Code 20001-4508
Purpose of Disbursement Food & Beverage		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 checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. CFO Compliance, LLC</b>		Date of Disbursement MM / DD / YYYY 01 / 21 / 2022
Mailing Address 1 Park Row Ste 5		FEC Identification Number C [REDACTED] <b>Transaction ID : 500603058</b> Amount of Each Disbursement this Period [REDACTED] 313.08
City Providence	State RI	Zip Code 02903-1235
Purpose of Disbursement Compliance Services		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] 982.63
<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)  
**MA 4 Dems PAC**

**A. Corridoni, Matt, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 565 Pennsylvania Ave NW

City Washington State DC Zip Code 20001-4929

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 13 / 2022

FEC Identification Number: C

Transaction ID : 500603053

Amount of Each Disbursement this Period: 441.75

Memo Item

**B. Corridoni, Matt, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 565 Pennsylvania Ave NW

City Washington State DC Zip Code 20001-4929

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 31 / 2022

FEC Identification Number: C

Transaction ID : 500603061

Amount of Each Disbursement this Period: 441.75

Memo Item

**C. Paychex**

Full Name (Last, First, Middle Initial)

Mailing Address 501 Wampanoag Trl

City Riverside State RI Zip Code 02915-1507

Purpose of Disbursement Payroll Taxes

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 13 / 2022

FEC Identification Number: C

Transaction ID : 500603054

Amount of Each Disbursement this Period: 79.50

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 963.00

**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 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)  
**MA 4 Dems PAC**

**A. Paychex**

Full Name (Last, First, Middle Initial)

Mailing Address 501 Wampanoag Trl

City Riverside State RI Zip Code 02915-1507

Purpose of Disbursement Payroll Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
01 / 14 / 2022

FEC Identification Number: C

Transaction ID : 500603055

Amount of Each Disbursement this Period: 298.30

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	298.30
<b>TOTAL</b> This Period (last page this line number only).....▶	2243.93



**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)  
**MA 4 Dems PAC**

Full Name (Last, First, Middle Initial)

**A. CONOR LAMB FOR SENATE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		27		2022

Mailing Address PO Box 10381

FEC Identification Number

C	C00657411
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**Transaction ID : 500603060**

Amount of Each Disbursement this Period

1000.00
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Memo Item

City Pittsburgh State PA Zip Code 15234-0381

Purpose of Disbursement  
Contribution

Category/ Type
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Candidate Name  
**LAMB, CONOR, , ,**

Office Sought:  House  Senate  President

Disbursement For: 2022  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. ROBERT GARCIA FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		24		2022

Mailing Address 65 Pine Ave  
# 348

FEC Identification Number

C	C00797795
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**Transaction ID : 500603059**

Amount of Each Disbursement this Period

1000.00
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Memo Item

City Long Beach State CA Zip Code 90802-4718

Purpose of Disbursement  
Contribution

Category/ Type
-------------------

Candidate Name  
**GARCIA, ROBERT, , ,**

Office Sought:  House  Senate  President

Disbursement For: 2022  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
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Mailing Address

FEC Identification Number

C	
---	--

Amount of Each Disbursement this Period

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Memo Item

City State Zip Code

Purpose of Disbursement

Category/ Type
-------------------

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

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

2000.00
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**TOTAL** This Period (last page this line number only).....▶

2000.00
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